RI SOS Filing Number: 202022404880 Date: 2/24/2020 2:24:00 PM UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** A NAME & PHONE OF CONTACT AT FILER (optional) Alexis Lashua 978-870-1438 B E-MAIL CONTACT AT FILER (optional) Track pt alashua@fidelitybankonline.com C SEND ACKNOWLEDGMENT TO: (Name and Address) Fidelity Cooperative Bank - \* } ..... Attn Commercial Servicing 9 Leominster Connector Leominster, MA 01453 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a INITIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed [for record] This FINANCING STATEMENT AMENDMENT IS to be find (i.e. 1995)
(or recorded) in the REAL ESTATE RECORDS
Filer attact) Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 201514967230 TERMINATION Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement 3. ASSIGNMENT (full or partial) Provide name of Assignee in item 7s or 7b, and address of Assignee in Item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in Item 8 4. CONTINUATION. Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: AND Check one of these three boxes to Check one of these two boxes CHANGE name and/or address. Complete itom 5e or 6b, and item 7e or 7b and item 7c This Change affects Debtor or Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (8a or 6b) 6a ORGANIZATION'S NAME 60 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFF'X 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact if, 8 name, do not one, modify, or abbreviate any part of the Debtor's name) 76 ORGANIZATION'S NAME 76 INDIVIDUAL'S SURNAME INCIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7c MAILING ADDRESS STATE POSTAL CODE COUNTRY 8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collected DELETE collateral RESTATE covered collateral ASSIGN collatera Indicate collateral

<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHO If this is an Amendment authorized by a DEBTOR, check here</li> </ol>	ORIZING THIS AMENDMENT: Provide only one name (92 and provide name of authorizing Debtor	s or 9b) (name of Assignor, if this is an Assignment)
Fidelity Co-operative Bank	~~	
96 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADD:TIONAL NAME(SYINITIAL(S) SUFFIX
10 OPTIONAL FILER REFERENCE DATA: MINDSPRAY INITIATIVES LLC	<u></u>	

OR