

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) Karen Cottrell (212) 450-6132	
B E-MAIL CONTACT AT FILER (optional) karen.cottrell@davispolk.com	
C SEND ACKNOWLEDGMENT TO (Name and Address) Davis Polk & Wardwell 450 Lexington Avenue New York, NY 10017	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1 DEBTOR'S NAME Provide only one Debtor name (1a or 1b) (use exact full name, do not omit, modify, or abbreviate any part of the Debtor's name). If any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 1C of the Financing Statement Addendum (Form UCC1Ad).

1a ORGANIZATION'S NAME Choice One Communications of Rhode Island Inc.				
OR	1b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c MAILING ADDRESS 4001 N. Rodney Parham Road		CITY Little Rock	STATE AR	POSTAL CODE 72212
				COUNTRY USA

2 DEBTOR'S NAME Provide only one Debtor name (2a or 2b) (use exact full name, do not omit, modify, or abbreviate any part of the Debtor's name). If any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 1C of the Financing Statement Addendum (Form UCC1Ad).

2a ORGANIZATION'S NAME				
OR	2b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

3 SECURED PARTY'S NAME (or NAME of ASSIGNEE or ASSIGNOR SECURED PARTY); Provide only one Secured Party name (3a or 3b)

3a ORGANIZATION'S NAME Wilmington Trust, National Association, as Collateral Agent				
OR	3b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 50 South Sixth Street, Suite 1290		CITY Minneapolis	STATE MN	POSTAL CODE 55402
				COUNTRY USA

4 COLLATERAL This financing statement covers the following collateral:

All assets of the Debtor, whether now owned or hereafter acquired.

5 Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad item 17 and instructions) being administered by a Decedent's Personal Representative

6a Check only if applicable and check only one box: Public Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Loan Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable) Lessor/Lessor Consignor/Consignor Seller/Buyer Bailor/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA
Filed with: RI - Secretary of State F#759756
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