

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C SEND ACKNOWLEDGMENT TO (Name and Address) 8078 - WELLS FARGO	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	78886982 RIRI

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE NUMBER: 201820259630 10/4/2018 SS RI

1b This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. **File Attach Amendment Acknowledgment Form (UCC3Ad) and provide Debtor's name in item 13.**

2. **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 7a 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.

5. **PARTY INFORMATION CHANGE:**

Check one of these two boxes: Debtor or Secured Party of record

AND Check one of these three boxes to:

CHANGE name and/or address. Complete item 6a or 6b, and item 7a or 7b and item 7c. ADD name. Complete item 7a or 7b, and item 7c. DELETE name. Give record name to be deleted in item 6a or 6b.

6. **CURRENT RECORD INFORMATION** Complete for Party Information Change - provide only one name (6a or 6b)

6a ORGANIZATION'S NAME

OR

6b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Tanzi	Janet	S	

7. **CHANGED OR ADDED INFORMATION.** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) - use exact full name, do not omit, modify, or abbreviate any part of the Debtor's name:

7a ORGANIZATION'S NAME

OR

7b INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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8. **COLLATERAL CHANGE** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a ORGANIZATION'S NAME

Wells Fargo Bank, N.A.

OR

9b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA** Debtor Name: EAST SIDE ENDODONTICS, LLC
78886982 Northeast

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11 INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form
 201820259630 10/4/2018 SS RI

12 NAME OF PARTY AUTHORIZING THIS AMENDMENT Same as item 9 on Amendment form

OR	12a ORGANIZATION'S NAME Wells Fargo Bank, N.A.	
	12b INDIVIDUAL'S SURNAME	
	FIRST PERSONAL NAME	
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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13 Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13) Provide only one Debtor name (13a or 13b) (use exact, full name - do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

OR	13a ORGANIZATION'S NAME			
	13b INDIVIDUAL'S SURNAME Tanzi	FIRST PERSONAL NAME Janet	ADDITIONAL NAME(S)/INITIAL(S) S	SUFFIX

14 ADDITIONAL SPACE FOR ITEM 8 (Collateral)

Debtor Name and Address

EAST SIDE ENDODONTICS, LLC - 1 Richmond Square 331 Watermann Street, Providence, RI 02906
 Kafi, Laila - 77 Barnes St., Providence, RI 02906-1501
 Tanzi, Janet S - 84 Strathmore St., Narragansett, RI 02882-3398
 Kraut, Douglas B - 20 Paddock Dr., Lincoln, RI 02865-4943
 Kraut, Douglas - 20 Paddock Dr., Lincoln, RI 02865-4943
 Tanzi, Janet - 84 Strathmore St., Narragansett, RI 02882-3398

Secured Party Name and Address

Wells Fargo Bank, N.A. - 2000 Powell St., Fourth Floor, Emeryville, CA 94608

15 This FINANCING STATEMENT AMENDMENT
 covers timber to be cut covers as extracted collateral is filed as a fixture filing

16 Name and address of a RECORD OWNER of real estate described in item 17
 (if Debtor does not have a record interest)

17 Description of real estate

18 MISCELLANEOUS: 7988992-RI-0378 WELLS FARGO PRACTICE Wells Fargo Bank, N.A. Filed with Secretary of State, RI, Northeast