

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Walters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@walterskluwer.com	
C. SEND ACKNOWLEDGMENT TO (Name and Address): <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 </div> <div style="width: 35%; text-align: center;"> 79994268 RIRI </div> </div>	
File with: Secretary of State, RI	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 202124563890 4/6/2021 SS RI	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Filer, attach Amendment Acknowledgment (Form UCC3Ad) and provide Debtor's name in item 13.
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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

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.

OR	7a. ORGANIZATION'S NAME Sumitomo Mitsui Finance and Leasing Company, Limited			
	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
666 Third Ave	New York	NY	10117	USA

8. **COLLATERAL CHANGE** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral. Indicate collateral: Collateral leased under, financed under, subject to, or relating to Equipment Schedule No. VER23135-002 to the Master Equipment Agreement No. VER23135 dated March 26, 2021. Words and phrases capitalized but not defined herein have the meanings given to them in the Initial Financing Statement.

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.

OR	9a. ORGANIZATION'S NAME C T Corporation System, as representative			
	9b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
	ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX

10. OPTIONAL FILER REFERENCE DATA. Debtor Name: Stanley Tree Service, Inc. 79994268

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
 202124563890 4/6/2021 SS RI

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

12a. ORGANIZATION'S NAME C T Corporation System, as representative	
OR	
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

13a. ORGANIZATION'S NAME Stanley Tree Service, Inc.			
OR			
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S); INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral)

Debtor Name and Address:
 Stanley Tree Service, Inc. - 275 George Washington Highway, Smithfield, RI 02917-1907

Secured Party Name and Address:
 C T Corporation System, as representative - 330 N Brand Blvd, Suite 700, Attn: SPRS, Glendale, CA 91203
 Sumitomo Mitsui Finance and Leasing Company, Limited - 666 Third Ave, New York, NY 10117

15. This FINANCING STATEMENT AMENDMENT <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing	17. Description of real estate
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest)	

18. MISCELLANEOUS: 79994268-RI-0 C T Corporation System, as File with: Secretary of State, RI