

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

<b>A NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> Name: Wolters Kluwer Lien Solutions Phone 800-331-3282 Fax: 818-662-4141	
<b>B E-MAIL CONTACT AT FILER (optional)</b> uccfilingreturn@wolterskluwer.com	
<b>C SEND ACKNOWLEDGMENT TO (Name and Address)</b> 14383 - BERKSHIRE	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	79982465  RIRI

File with: Secretary of State, RI

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

1a INITIAL FINANCING STATEMENT FILE NUMBER  
201110379860 9/30/2011 SS RI

1b  This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS  
Filer also: Amend/ Addendum (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 NEWPORT CONSTRUCTION SERVICES, INC.			
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			
	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

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 or 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 NEWPORT FEDERAL SAVINGS BANK			
OR	9b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. **OPTIONAL FILER REFERENCE DATA** Debtor Name: NEWPORT CONSTRUCTION SERVICES, INC.  
 79982465 9999 AUTO CONTINUATION DEFAULT \*\*\*\*\*

# UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form 201110379860 9/30/2011 SS RI	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT Same as item 9 on Amendment form	
12a ORGANIZATION'S NAME NEWPORT FEDERAL SAVINGS BANK	
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 NEWPORT CONSTRUCTION SERVICES, 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:  
 NEWPORT CONSTRUCTION SERVICES INC. - 15 VERNON AVENUE , NEWPORT, RI 02840

Secured Party Name and Address:  
 NEWPORT FEDERAL SAVINGS BANK - 100 BELLEVUE AVENUE, P.O. BOX 210 , NEWPORT, RI 02840  
 SAVINGS INSTITUTE BANK AND TRUST COMPANY, ITS SUCCESSORS AND/OR ASSIGNS ATIMA - 803 MAIN STREET , WILLIMANTIC, CT 06226

1) SAVINGS INSTITUTE BANK AND TRUST COMPANY, ITS SUCCESSORS AND/OR ASSIGNS ATIMA

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