

**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV

2021 AUG 27 AM 11:03

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) 14026 - TD EQUIPMENT	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	82160692  RIRI
File with: Secretary of State, RI	

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 10 of the Financing Statement Addendum (Form UCC1Ad)

1a ORGANIZATION'S NAME R. P. Iannuccillo and Sons Construction Company				
OR	1b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c MAILING ADDRESS 70 Calverly Street		CITY Providence	STATE RI	POSTAL CODE 02908
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 10 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 of ASSIGNOR SECURED PARTY) Provide only one Secured Party name (3a or 3b)

3a ORGANIZATION'S NAME TD Equipment Finance, Inc.				
OR	3b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 12000 Horizon Way, 3rd Floor		CITY Mount Laurel	STATE NJ	POSTAL CODE 08054
COUNTRY USA				

4. COLLATERAL This financing statement covers the following collateral:

All right, title and interest of R. P. Iannuccillo and Sons Construction Company ("Lessee") in and to any equipment and other personal property now or hereafter leased to, or otherwise financed for, Lessee by TD Equipment Finance, Inc. ("Lessor") pursuant to that certain Master Lease Agreement dated as of July 24, 2019, and all lease schedules now or hereafter entered into pursuant to the terms of such Master Lease Agreement, in each case, between Lessee and Lessor (as any of the foregoing may be amended from time to time), including without limitation, the equipment listed on Exhibit A attached hereto, along with all replacements, attachments, accessories and substitutions therefor and/or thereto, and all cash and non-cash proceeds thereof.

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 <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
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7 ALTERNATIVE DESIGNATION (if applicable)  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licensor

8 OPTIONAL FILER REFERENCE DATA  
82160692 40168583/4086/0003

**EXHIBIT A**

**Lease #40168583**

**R.P. IANNUCCILLO AND SONS CONSTRUCTION COMPANY  
70 CALVERLY STREET  
PROVIDENCE, RI 02908**

This Exhibit A covers all the equipment as further outlined below including all attachments and accessories.

Quantity	Asset Description	Serial Number
1	2019 LINK-BELT 350X4 EXCAVATOR WITH THUMB, BUCKET, & COUPLER	LBX350Q7NKHEX1801