RI SOS Filing Number: 202227174560 Date: 6/30/2022 3:49:00 PM

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UCC FINANCING STATEMENT

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) 8273 - THE CIT GROUP

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

87381468
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
PANNONE LOPES DEVEREAUX & O'GARA LLC

OR

1b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

1c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1301 Atwood Avenue, Suite 215N	JOHNSTON	RI	02919	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
First-Citizens Bank & Trust Company

OR

3b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

3c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
10201 Centurion Parkway N , Suite 100	Jacksonville	FL	32256	USA

4. COLLATERAL This financing statement covers the following collateral

This is a True Lease. This UCC-1 Financing Statement is being filed for informational purposes only. All described collateral herein falls within the scope of Article 9 of the Uniform Commercial Code.

The collateral also includes all currently existing and future attachments, parts, accessories and add-ons for all of the foregoing equipment, and all products and 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 only if applicable and check only one box.
☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box.
☐ Agricultural Lien ☐ Non-UCC Filing

7 ALTERNATIVE DESIGNATION (if applicable) ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8 OPTIONAL FILER REFERENCE DATA
87381468 Office Products 1841383

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev 04/20/11)

Prepared by Lien Solutions, P.O. Box 29071
Glendale, CA 91209-9071 Tel (800) 331-3282

Description	Serial Number	Model
KYOCERA COPIER	RFE1708218	TASKalfa 3
KYOCERA COPIER	W563259810	TASKalfa 5
KYOCERA COPIER	W2Z8934366	TASKalfa 6
KYOCERA COPIER	W2Z8934458	TASKalfa 6
KYOCERA COPIER	W2Z8934480	TASKalfa 6
KYOCERA COPIER	RF71609325	TASKalfa 5
KYOCERA COPIER	RTV1X00257	TASKalfa 7
KYOCERA COPIER	RTV1X00266	TASKalfa 7
KYOCERA COPIER	RRG2301466	TASKalfa 8