

**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> 32814 - THE <div style="display: flex; justify-content: space-between; align-items: center;"><div style="width: 45%;"><p>Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071</p></div><div style="width: 45%; text-align: center;"><p>87827702 <b>RIRI FIXTURE</b></p></div></div> <p style="text-align: center;">File with: Secretary of State, RI</p>				
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>				
<b>1a. INITIAL FINANCING STATEMENT FILE NUMBER</b> 200604162810 10/10/2006 SS RI		<b>1b.</b> <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer <u>attests</u> Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13		
<b>2.</b> <input checked="" type="checkbox"/> <b>TERMINATION</b> Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement				
<b>3.</b> <input type="checkbox"/> <b>ASSIGNMENT</b> (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				
<b>4.</b> <input type="checkbox"/> <b>CONTINUATION</b> 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				
<b>5.</b> <input type="checkbox"/> <b>PARTY INFORMATION CHANGE</b> Check <u>one</u> of these two boxes AND Check <u>one</u> of these three boxes to This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <input type="checkbox"/> CHANGE name and/or address. Complete item 6a or 6b, and item 7a or 7b and item 7c. <input type="checkbox"/> ADD name. Complete item 7a or 7b, and item 7c. <input type="checkbox"/> DELETE name. Give record name to be deleted in item 6a or 6b				
<b>6. CURRENT RECORD INFORMATION</b> Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)				
<div style="display: flex;"><div style="width: 20px;">6a ORGANIZATION'S NAME</div><div>LUCKY HOUSE RESTAURANT, INC.</div></div>				
<div style="display: flex;"><div style="width: 20px;">OR</div><div style="display: flex;"><div style="width: 30%;">6b INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 30%;">ADDITIONAL NAME(S)/INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div></div>				
<b>7. CHANGED OR ADDED INFORMATION.</b> Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)				
<div style="display: flex;"><div style="width: 20px;">7a ORGANIZATION'S NAME</div><div></div></div>				
<div style="display: flex;"><div style="width: 20px;">OR</div><div style="display: flex;"><div style="width: 30%;">7b INDIVIDUAL'S SURNAME</div><div style="width: 30%;">INDIVIDUAL'S FIRST PERSONAL NAME</div><div style="width: 30%;">INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div></div>				
<div style="display: flex;"><div style="width: 40%;">7c MAILING ADDRESS</div><div style="width: 15%;">CITY</div><div style="width: 10%;">STATE</div><div style="width: 15%;">POSTAL CODE</div><div style="width: 10%;">COUNTRY</div></div>				
<b>8.</b> <input type="checkbox"/> <b>COLLATERAL CHANGE</b> Also check <u>one</u> of these four boxes <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral				
<b>9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:</b> Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor				
<div style="display: flex;"><div style="width: 20px;">9a ORGANIZATION'S NAME</div><div>THE WASHINGTON TRUST COMPANY</div></div>				
<div style="display: flex;"><div style="width: 20px;">OR</div><div style="display: flex;"><div style="width: 30%;">9b INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 30%;">ADDITIONAL NAME(S)/INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div></div>				
<b>10. OPTIONAL FILER REFERENCE DATA</b> Debtor Name: LUCKY HOUSE RESTAURANT, INC 87827702 Jason A. Costa 91254200				

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

### FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form  
200604162810 10/10/2006 SS RI

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

12a. ORGANIZATION'S NAME

THE WASHINGTON TRUST COMPANY

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S) INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

LUCKY HOUSE RESTAURANT, 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.

LUCKY HOUSE RESTAURANT, INC. - 32 MAIN STREET, ASHAWAY, RI 02804

Secured Party Name and Address

THE WASHINGTON TRUST COMPANY - 23 BROAD STREET - P.O. DRAWER 512, WESTERLY, RI 02891

15. This FINANCING STATEMENT AMENDMENT

☐ covers timber to be cut

☐ covers as-extracted collateral

☒ 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 97827702-RI-0 32814 - THE WASHINGTON TRUST

THE WASHINGTON TRUST COMPANY File with Secretary of State, RI

Jason A. Costa 91254200