

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) D. O'Neil 508-803-7818								
B. E-MAIL CONTACT AT FILER (optional) doneil@deanbank.com								
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Dean Bank P O Box 307 Franklin, MA 02038								
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY								
1a. INITIAL FINANCING STATEMENT FILE NUMBER 201819119190		1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item *3						
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 <u>one</u> of these two boxes AND Check <u>one</u> of these three boxes to This Change affects: ☐ Debtor or ☐ Secured Party of record ☐ 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 <u>one</u> name (6a or 6b)								
6a. ORGANIZATION'S NAME								
OR <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">6b. INDIVIDUAL'S SURNAME</td> <td style="width: 20%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 20%;">SUFFIX</td> </tr> </table>					6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. CHANGED OR ADDED INFORMATION: 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)								
7a. ORGANIZATION'S NAME								
OR 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 <u>one</u> 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 <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 ☐ and provide name of authorizing Debtor								
9a. ORGANIZATION'S NAME Dean Cooperative Bank								
OR <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">9b. INDIVIDUAL'S SURNAME</td> <td style="width: 20%;">FIRST PERSONAL NAME</td> <td style="width: 20%;">ADDITIONAL NAME(S)/INITIAL(S)</td> <td style="width: 20%;">SUFFIX</td> </tr> </table>					9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA								