

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A NAME & PHONE OF CONTACT AT FILER (optional) Thomas P. Angelo, Esq. (954) 766-9930
B E-MAIL CONTACT AT FILER (optional)
C SEND ACKNOWLEDGMENT TO: (Name and Address) Angelo & Banta, P.A. 515 East Las Olas Boulevard Suite 850 Fort Lauderdale, Florida 33301

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 M MICRO TECHNOLOGIES, INC.	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 1b INDIVIDUAL'S SURNAME	CITY POMPAÑO BEACH		STATE FL	POSTAL CODE 33069
1c MAILING ADDRESS 2901 GATEWAY DRIVE	CITY POMPAÑO BEACH		STATE FL	POSTAL CODE 33069
		CITY POMPAÑO BEACH	STATE FL	POSTAL CODE 33069
		CITY POMPAÑO BEACH	STATE FL	POSTAL CODE 33069

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	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 2b INDIVIDUAL'S SURNAME	CITY		STATE	POSTAL CODE
2c MAILING ADDRESS	CITY		STATE	POSTAL CODE
		CITY	STATE	POSTAL CODE
		CITY	STATE	POSTAL CODE

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 CITY NATIONAL BANK OF FLORIDA	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
OR 3b INDIVIDUAL'S SURNAME	CITY		STATE	POSTAL CODE
3c MAILING ADDRESS 100 SE 2ND STREET, 19th FLOOR	CITY MIAMI		STATE FL	POSTAL CODE 33131
		CITY MIAMI	STATE FL	POSTAL CODE 33131
		CITY MIAMI	STATE FL	POSTAL CODE 33131

4 COLLATERAL This financing statement covers the following collateral:

See Schedule A to UCC attached hereto and by this reference made a part hereof.

5 Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> 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	
7 ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignor/Consignee <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailee <input type="checkbox"/> Licensee/Licensor	8 OPTIONAL FILER REFERENCE DATA 280597-00173 (M MICRO Technologies) (Rhode Island)			

SCHEDULE A TO UCC

Schedule A to UCC from M MICRO TECHNOLOGIES, INC., a Rhode Island corporation (the "Debtor") and for the benefit of CITY NATIONAL BANK OF FLORIDA, its successors and/or assigns ("Secured Party").

This Financing Statement covers the following types and items of property:

All of the Debtor's right, title and interest in and to that certain EH Corporate Advantage Policy No. 5121861 issued by Euler Hermes North America Insurance Company (herein called the "Insurer") and any amendments thereto or any supplementary contracts issued in connection therewith (such policy and contracts being herein called the "Policy"), and all claims, options, privileges, rights, title and interest therein and thereunder, of the Secured Party under that certain Amended and Restated Assignment of Credit Insurance Policy as Collateral dated November 22, 2022 from Debtor in favor of Secured Party (as amended or modified from time to time, the "Assignment"), subject to all the terms and conditions of the Policy and to all superior liens, if any, which the Insurer may have against the Policy.