

UCC-1 Form

FILER INFORMATION

Full name: CORPORATION SERVICE COMPANY

Email Contact at Filer: RISOSUCCFILINGSV3@CSCGLOBAL.COM

SEND ACKNOWLEDGEMENT TO

Contact name: CORPORATION SERVICE COMPANY

Mailing Address: 801 ADLAI STEVENSON DRIVE

City, State Zip Country: SPRINGFIELD, IL 62703 USA

DEBTOR INFORMATION

Org. Name: OLD HARBOUR VIEW INC.

Mailing Address: PO BOX 1593

City, State Zip Country: BLOCK ISLAND, RI 02807 USA

Last Name (i.e. Family Name or Surname): JONES First Name: MARK

Mailing Address: 12359 LAGUNA VALLEY TERRACE

City, State Zip Country: BOYNTON BEACH, FL 33473 USA

SECURED PARTY INFORMATION

Org. Name: NEWLANE FINANCE COMPANY

Mailing Address: 123 S BROAD STREET, 17TH FLOOR

City, State Zip Country: PHILADELPHIA, PA 19109 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2556 81132

COLLATERAL

ALL EQUIPMENT AND OTHER PERSONAL PROPERTY, NOW OR HEREAFTER THE SUBJECT OF THE CERTAIN EQUIPMENT FINANCE AGREEMENT RELATING TO APPLICATION #APP-0000066829 BETWEEN LENDER AND BORROWER AND ANY APPLICABLE PERSONAL GUARANTOR(S). "AND ALL REPLACEMENTS, SUBSTITUTIONS, ACCESSIONS, ADD-ONS, AND ALL PROCEEDS AND ACCOUNTS OF THE DEBTOR(S) ARISING OUT OF OR RELATED TO THE FOREGOING. THIS FINANCING STATEMENT RELATES TO AN EQUIPMENT FINANCE AGREEMENT BETWEEN THE DEBTOR(S) AND THE SECURED PARTY. THIS FINANCING STATEMENT IS FILED TO GIVE NOTICE OF SECURED PARTY'S OWNERSHIP INTEREST IN THE COLLATERAL."