

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

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| 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) 265027 - FLAGSTAR | | | | |
| Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 | | 93782909 RIRI | | |
| File with: Secretary of State, RI | | | | |
| THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY | | | | |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 201211747720 10/22/2012 SS RI | | | 1b <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer <u>attach</u> Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 | |
| 2 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> PARTY INFORMATION CHANGE: 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 <u>or</u> <input checked="" type="checkbox"/> Secured Party of record <input checked="" 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 | | | | |
| 6 CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b) | | | | |
| 6a ORGANIZATION'S NAME FLAGSTAR BANK, F.S.B. | | | | |
| OR | | | | |
| 6b INDIVIDUAL'S SURNAME | | FIRST PERSONAL NAME | ADDITIONAL NAME(S) INITIAL(S) | SUFFIX |
| 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 FLAGSTAR BANK, N.A. | | | | |
| OR | | | | |
| 7b INDIVIDUAL'S SURNAME | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) | | | | SUFFIX |
| 7c MAILING ADDRESS | | | | |
| 301 W. MICHIGAN AVENUE | | JACKSON | MI | 49201 |
| 8 <input type="checkbox"/> COLLATERAL CHANGE: 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 | | | | |
| 9. NAME OF SECURED PARTY OF 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: <input type="checkbox"/> and provide name of authorizing Debtor | | | | |
| 9a ORGANIZATION'S NAME FLAGSTAR BANK, F.S.B. | | | | |
| OR | | | | |
| 9b INDIVIDUAL'S SURNAME | | FIRST PERSONAL NAME | ADDITIONAL NAME(S) INITIAL(S) | SUFFIX |
| 10 OPTIONAL FILER REFERENCE DATA: Debtor Name: SHAMROCK HOME LOANS, INC. 93782909 Shamrock Financial | | | | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

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| 11. INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form 201211747720 10/22/2012 SS RI | |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT Same as item 9 on Amendment form | |
| 12a ORGANIZATION'S NAME FLAGSTAR BANK, F.S.B. | |
| OR | |
| 12b INDIVIDUAL'S SURNAME | |
| FIRST PERSONAL NAME | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

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| 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 SHAMROCK HOME LOANS, 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:

SHAMROCK HOME LOANS, INC. - 75 NEWMAN AVENUE , EAST PROVIDENCE, RI 02916

Secured Party Name and Address:

SOVEREIGN BANK, N.A. - 830 MORRIS TURNPIKE, 3RD FLOOR , SHORT HILLS, NJ 07078

FLAGSTAR BANK, N.A. - 301 W. MICHIGAN AVENUE , JACKSON, MI 49201

SANTANDER BANK, N.A. - 830 MORRIS TURNPIKE, 3RD FLOOR , SHORT HILLS, NJ 07078

1) SOVEREIGN BANK, N.A.

2) SANTANDER BANK, N.A.

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| 15. This FINANCING STATEMENT AMENDMENT <input type="checkbox"/> covers timber to be cut; <input type="checkbox"/> covers as-extracted collateral; <input type="checkbox"/> 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) | |