UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT SUBMITTER (options) B. E-MAIL CONTACT AT SUBMITTER (optional) C. SEND ACKNOWLEDGMENT TO. (Name and Acdress) Dime Bank 290 Salem Turnpike Norwich, CT 06360 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME. Provide only gog 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 fill 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 UCC1Ac) 1a ORGANIZATION'S NAME FUN-ONE, INC. OR 15 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(\$)IN.TIA_(\$) 1c MAILING ADDRESS STATE POSTAL CODE COUNTRY 159 Atlantic Avenue Westerly RI 02891 USA 2. DEBTOR'S NAME Provide only pige Debtor name (2e 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 fil 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 SURFIN PADDY, LLC OR 125 INDIV DUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INIT-AL(S) SUFFIX 2c MAILING ADDRESS STATE POSTAL CODE COUNTRY 159 Atlantic Avenue Westerly ŘΙ 02891 USA 3 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY). Provide only one Secured Party name (3a or 3b) 3a ORGANIZATIONS NAME Dime Bank OR 36 INDIVIDUAL'S SURNAME F RST PERSONAL NAME ADDIT ONAL NAME(S)/IN TIAL(S) SUFF X 3c MAILING ADDRESS STATE POSTAL CODE COUNTRY 290 Salem Turnpike Norwich 06360 USA 4 COLLATERAL. This financing statement covers the following collateral All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all oll, gas and other minerals before extraction; all oll, gas, other minerals and accounts constituting as-extracted collateral; all fixtures; all timber to be cut; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, Inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (Including but not limited to all insurance payments) of or relating to the foregoing property. 5 Check only if applicable and check only one box. Collateral is held in a Trust (see UCC1Ad, item 17 and instructions). being administered by a Decedent's Personal Representative. 6a. Check only if applicable and check only one box. 6b. Check only if applicable and check only one box Public Finance Transaction Manufactured-Home Transaction Agricultural Lien 7. ALTERNATIVE DES GNATION (if applicable) Lessed/Lessor Consignes/Consigner Seller/Buyer Bailee/Bailor Licensee/Licensor 8 OPTIONAL FILER REFERENCE DATA 10-13-23

RI SOS Filing Number: 202329782870 Date: 10/23/2023 4:02:00 PM