RI SOS Filing Number: 202430062940 Date: 1/5/2024 11:51:00 AM UCC FINANCING STATEMENT AMENDMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) B. E-MAIL CONTACT AT SUBMITTER (optional) C. SEND ACKNOWLEDGMENT TO (Name and Address) Lien Solutions PO Box 29071 Glendale, CA 91209-9071 Order 96695430 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 18 IN TIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed flor record]
(or recorded) in the REAL ESTATE RECORDS, Filer: attach Amendment Addendum File # 609752 filed on 06/16/93 (Form UCC3Ad) end provide Debtor's name in Item 13. 2. TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to the security interest(s) of Secured Part(y)(ies) authorizing this Termination Statement ASSIGNMENT. 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; check ASSIGN Collateral box in Item 8 and describe the affected collateral in Item 8 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 PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: CHANGE name end/or address: Complete Item 6a or 6b; and item 7e 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 This Change affects 
Debtor of Secured Party of record 
Item 6a or 6b, and item 7a or 7b and item
CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only and name (6a or 6b) 6a. ORGANIZATION'S NAME BB&S Acquisition Corp. 66. INDIVIDUAL'S SURNAME SUFFIX FIRST PERSONAL NAME ADDITIONAL NAME/SYNIT AL(S) 7. CHANGED OR ADDED INFORMATION: Comprete for Assignment or Party Information Change - provide only gog name (7a or 7b) (use exact, 1/4 name; do not ornit, modify, or abovewase any part of the Debbor's name) 7a. ORGANIZATION'S NAME **BB&S** Acquisition LLC OR 76. INDIVIDUAL'S SURNAME IND VIDUAL'S FIRST PERSONAL NAME IND VIDUAL'S ADDITIONAL NAME (SYINITIAL(S) SUFFIX 7c. MAILING ADDRESS POSTAL COOL COUNTRY 1101 N US Highway I, Suite #702 Jupiter FL 33477 USA COLLATERAL CHANGE: Check only one box: RESTATE covered collateral ASS'GN\* collateral ADO collateral DELETE collateral ndicate collaterati "Check ASS-GN COLLATERAL only if the assignce's gover to amend the record is limited to certain collaboral and describe the collaboral. In Section 8 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9st 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 Bank of America, N.A. 96. IND VIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(SYNITIAL(S) SUFFIX 10. OPTIONAL FILER REFERENCE DATA

To be filed with RI Secretary of State - Debtor: BB&S Acquisition Corp.