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	RI SOS Filing Number: 20243035	630	00 Date	e: 3/26/2024 1:13	:00 P	M	
UC	CC FINANCING STATEMENT AMENDMEN	T					
	LOW INSTRUCTIONS						
Na	NAME & PHONE OF CONTACT AT SUBMITTER (optional) ime: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fa	ıx: 818	8-662-4141				
	E-MAIL CONTACT AT SUBMITTER (optional) uccfilingreturn@wolterskluwer.com						
C.	SEND ACKNOWLEDGMENT TO: (Name and Address) 10104 - C	aterpi	llar				
	Lien Solutions 980	614	35				
<u>ו</u>	P.O. Box 29071 Glendale, CA 91209-9071 RIRI						
Ι.	Tall t						
L	File with: Secretary of State, RI SEE BELOW FOR SECURED PARTY CONTACT INFOR	MATI	ON	THE ABOVE SPA	CE IS FO	OR FILING OFFICE US	E ONLY
	NITIAL FINANCING STATEMENT FILE NUMBER 2430238930 2/26/2024 SS RI		1!	D. 1his FINANCING STATE (or recorded) in the REAL		ENDMENT is to be filed (for RECORDS	r record)
2. [TERMINATION Effectiveness of the Financing Statement identified about	ove is te	erminated with r			m UCC3Ad) <u>and provide Debio</u> ed Party authorizing this Ter	
3. [ASSIGNMENT (full or partial) Provide name of Assignce in item 7a or 7	th sod	addense of Ace				
J. [For partial assignment, complete items 7 and 9 <u>and</u> also indicate affect	ed colla	steral in item 8				
4. [CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bove wi	ith respect to the	security interest(s) of Secured	Party aut	horizing this Continuation S	latement is
5. [PARTY INFORMATION CHANGE						
		HANGE	these three boxes riame and/or add	mess Complete 💝 ADD nam	e Comple		Give record name
_	his Change affects Debtor or Secured Party of record Error URRENT RECORD INFORMATION Complete for Party Information Chan			 	<u>and</u> dem /	cto be deleted in r	tem 6a or 6b
	68 ORGANIZATION'S NAME	30 2		ane (arts oo)			 · · · · ·
OR	66 INDIVIDUAL'S SURNAME	Te	DOT DEOLOG AL		T		T
	OU INSTRUMENTAL S SURVAME		IRST PERSONAL	NAME	ADDITION	NAL NAME(SYINITIAL(S)	SUFFIX
7. C	HANGED OR ADDED INFORMATION. Complete for Assignment or Party Information	or Change	e - provide only ign	name (7a or 7b) (use exact, ful-name,	do not omal,	modify, or ubbreviate any part of the	Deblor's name)
	7a. ORGANIZATION'S NAME						
OR	76 INDIVIDUAL'S SURNAME		_				
	INDIVIOUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL STIMST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(SYNITIAL(S)						SUFFIX
7c	MAII ING ADDRESS	c	CITY		STATE	POSTAL CODE	COUNTRY
_			,			<u> </u>	
8.	<u> </u>		offateral L	DELETÉ collateral R			ASSIGN* collateral
	E (1) CATERPILLAR 305-07CR Hydraulic Excavator S/N: 50						
	JMB I substitutions, replacements, additions and accessions there	eto no	w owned or l	nereafter acquired and or	nceeds t	hereof. The above coll	lateral is
with	in the scope of Article 9 of the Uniform Commercial Code (if						
122	x9-102 and 12A:9-109).						
9 N	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENI	DMENT: Prov	de only one name (9a or 9b) (n	ame of Ass	signor, if this is an Assignme	nt)
	a a		ne of authorizing				
i	Caterpillar Financial Services Corporation						
OR.	SUNDIVIDUAL'S SURNAME	F	IRST PERSONAL	NAME	ADDITION	YAL NAME (S) INITIAL (S)	SUFFIX
			··· · · · · ·	_			
	DPTIONAL FILER REFERENCE DATA. Debtor Name: LARLHAM L 61435 001-70135053	_AND:	SCAPE CON	STRUCTION CO. INC.		001-70135053	

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FO	LLOW INSTRUCTIONS	•				
	INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amend	iment form				
_	2430238930 2/26/2024 SS RI NAME OF PARTY AUTHORIZING THIS AMENDMENT. Same as item 9 on Am	nendment for	n			
	128 ORGANIZATION'S NAME		<u> </u>			
	Caterpillar Financial Services Corporation					
OR	125 INDIVIDUAL'S SURNAME		-			
						
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(SyINITIAL(S)		SUFFIX	ABB.		
13.	I Name of DEBTOR on related financing statement (Name of a current Debtor of	record require	ed for indexing	purposes only in son	SPACE IS FOR FILING OFFICE US ne filing offices - see Instruction item	
	one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab	obreviate any p	part of the Debt	or's name), see Instri	uctions if name does not fit	
0.0	LARLHAM LANDSCAPE CONSTRUCTION CO. INC.					
OR	136 INDIVIDUAL'S SURNAME	FIRST PERSO	DNAL NAME	·	ADDITIONAL NAME(SYMITIAL(S)	SUFFIX
	ADDITIONAL SPACE FOR (CHECK ONE BOX)	M 8 (Collatera	ol) OR	OTHER INFOR	 MATION (Please Describe)	
LAF	otor Name and Address; RLHAM LANDSCAPE CONSTRUCTION CO. INC 3945 OLD P	OST RD (CHARLESTO	OWN, RI 02813-2	2552	
15	This FINANCING STATEMENT AMENDMENT		17. Descripti	on of real estate		
	Covers timber to be cut. Covers as-extracted collateral. Is filed as Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest).	s a fixture film	1			
18.	MISCELLANEOUS 98061435-RI-0 10104 - Caterbillar Financia Caterbil	lar Financial Ser	rvices	File with Secretary of S	tale, RI 001-70135053 001-70135	6053