RI SOS Filing Number: 202430658530 Date: 6/7/2024 4:00:00 PM

C FINANCING STATEMENT LOWINSTRUCTIONS				
NAME & PHONE OF CONTACT AT SUBMITTER (optional) Dya Ustimenko, (212) 513-3272				
-MAIL CONTACT AT SUBMITTER (optional)	<del></del>			
ya.ustimenko@hklaw.com				
SEND ACKNOWLEDGMENT TO (Name and Address)				
— Holland & Knight LLP				
787 Seventh Avenue, 31st Floor				
New York, NY 10019	2.2000	<u> </u>	Programme and the programme an	
SEE BELOW FOR SECURED PARTY CONTACT INFO		Print	Reset	
	THE AE		OR FILING OFFICE USE	
EBTOR'S NAME   Provide only one Debtor name (1a or 1b) (use exact of thin line 1b , leave all of item 1 blank, check here	ct full name, do not omit, modify, or abbroviate any j provide the Individual Debtor information in item 10 of			i Deptor 3 nar
18 ORGANIZATION'S NAME			<del></del>	
SUMMER STREET HOUSING PART	NERS I, LP			
16 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(\$)/INITIAL(\$)	SUFFIX
	CITY	STATE	TPOSTAL CODE	COUNT
MAILING ADDRESS  Crossroads Rhode Island, 160 Broad Street	<del>-</del>	RI	02903	USA
EBTOR'S NAME Provide only one Debtor name (2a or 2b) (use exec		I · · · ·	<u> </u>	
	provide the Individual Debtor information in item 10 o			
2a ORGANIZATION'S NAME		•		
CROSSROADS RHODE ISLAND	······································	r		1
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	Providence	RI	02903	USA
0 Broad Street			<del></del>	
		rty name (3a or 3b)		
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ECURED PARTY'S NAME (& NAME O'ASSIGNEE O'ASSIGNOR 30 ORGANIZATION'S NAME BANK OF AMERICA, N.A.	R SECURED PARTY) Provide only one Secured Pa		NA AL MANAGE CHANITIALICA	Terrecty
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5. Check only if applicable and check only one box. Collareral is he'd in a Trust (see UCC1Ad, item 17 and Inst	tructions) being administered by a Decedent's Personal Representative
6a. Check <u>only</u> if applicable and check <u>only</u> one box	6b. Check <u>only</u> if applicable and check <u>only</u> one box
Public-Finance Transaction Manufactured Home Transaction A Debtor is a Transmitt	ing Utility Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consigner	Seller/Rkryer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA	
File with RI DOS Summer Street - Pledge of Developer Fee	H&K # 585101.07278

Financing Statement (continued)

Name of Debtors: SUMMER STREET HOUSING PARTNERS I, LP CROSSROADS RHODE ISLAND

## EXHIBIT A

This UCC-1 Financing Statement covers the following collateral:

All of Debtors' right, title and interest in and to all payments, fees, commissions, developer fees and incentives, and monies due or to become due, however characterized, together with the proceeds thereof, with respect to the development, construction and/or operation of real property commonly known and described as 94 Summer Street, Providence, Rhode Island, by the Debtors in every case, whether now existing or hereafter acquired by Debtors as well as Debtors' right to receive the same, as security for the payment and performance of the obligations of Summer Street Housing Partners I, LP (the "Borrower") under that certain Construction Loan Agreement (the "Loan Agreement"), dated as of April 30, 2024 between Borrower and Secured Party and the payment and performance of all of Borrower's other obligations under the Loan Documents (as defined in the Loan Agreement).