

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)	
Allison Baker	(704) 331-1000
B. E-MAIL CONTACT AT SUBMITTER (optional)	
allisonbaker@mvalaw.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Moore & Van Allen PLLC	
100 North Tryon Street	
Suite 4700	
Charlotte, NC 28202-4003	
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one 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 fit 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 UCC1Ad).

1a. ORGANIZATION'S NAME				
Metals Recycling L.L.C.				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
89 Celia Street		Johnston	RI	02919 US

2. DEBTOR'S NAME: Provide only one Debtor name (2a 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 fit 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				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY

3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
Bank of America, N.A., as Administrative Agent				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
900 W Trade St, NC1-026-06-09 (MacLegal)		Charlotte	NC	28255 US

4. COLLATERAL: This financing statement covers the following collateral:

All assets of the Debtor, whether now owned or hereafter acquired.

5. Check <u>only</u> if applicable and check <u>only</u> one box		Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions)	☐ 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 Transmitting Utility	☐ Agricultural Lien ☐ Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable)		☐ Lessee/Lessor	☐ Consignee/Consignor
		☐ Seller/Buyer	☐ Bailee/Bailor
		☐ Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA		F#1013484	
Filed with: RI - Secretary of State (017625.004992)		A#1388613	