

## UCC FINANCING STATEMENT AMENDMENT

## FOLLOW INSTRUCTIONS

|                                                                                                                                           |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>A NAME &amp; PHONE OF CONTACT AT SUBMITTER (optional)</b><br>Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141 |                   |
| <b>B E-MAIL CONTACT AT SUBMITTER (optional)</b><br>uccfilingreturn@wolterskluwer.com                                                      |                   |
| <b>C SEND ACKNOWLEDGMENT TO (Name and Address)</b> 34785 - BROOKLINE                                                                      |                   |
| Lien Solutions<br>P.O. Box 29071<br>Glendale, CA 91209-9071                                                                               | 101067029<br>RIRI |
| File with: Secretary of State, RI<br><b>SEE BELOW FOR SECURED PARTY CONTACT INFORMATION</b>                                               |                   |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE NUMBER

201413588860 3/5/2014 SS RI

1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed (for record)  
(or recorded) in the REAL ESTATE RECORDSFiler attach Amendment Addendum (Form UCC3A2) and 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 Party authorizing this Termination Statement:3. ☐ **ASSIGNMENT** (full or partial). 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 and also indicate affected collateral in item 84. ☐ **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 law5. ☐ **PARTY INFORMATION CHANGE**Check any of these two boxesAND Check one of these three boxes to:This Change affects: ☐ Debtor or ☐ Secured Party of record ☐ CHANGE name and/or address. Complete item 6a or 6b, and item 7a 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 6b6. **CURRENT RECORD INFORMATION** Complete for Party Information Change - provide only one name (6a or 6b)

|                                                 |                         |                     |                               |        |
|-------------------------------------------------|-------------------------|---------------------|-------------------------------|--------|
| 6a ORGANIZATION'S NAME<br>NAGEL MACHINE CO. INC |                         |                     |                               |        |
| OR                                              | 6b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S) INITIAL(S) | SUFFIX |

7. **CHANGED OR ADDED INFORMATION** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

|                                            |                         |  |  |        |
|--------------------------------------------|-------------------------|--|--|--------|
| 7a ORGANIZATION'S NAME                     |                         |  |  |        |
| OR                                         | 7b INDIVIDUAL'S SURNAME |  |  |        |
| INDIVIDUAL'S FIRST PERSONAL NAME           |                         |  |  |        |
| INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S) |                         |  |  | SUFFIX |

|                    |      |       |             |         |
|--------------------|------|-------|-------------|---------|
| 7c MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
|--------------------|------|-------|-------------|---------|

8. **COLLATERAL CHANGE** Check only one box ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN\* collateral  
Indicate collateral: \_\_\_\_\_  
\*Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 99. **NAME OF SECURED PARTY OR RECORD AUTHORIZING THIS AMENDMENT** Provide only one name (9a 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<br>BANK RHODE ISLAND |                         |                     |                               |        |
| OR                                          | 9b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S) INITIAL(S) | SUFFIX |

10. **OPTIONAL FILER REFERENCE DATA** Debtor Name, NAGEL MACHINE CO. INC

101067029

323 3623

323

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

### FOLLOW INSTRUCTIONS

11 INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form

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12 NAME OF PARTY AUTHORIZING THIS AMENDMENT Same as item 9 on Amendment form

12a ORGANIZATION'S NAME

BANK RHODE ISLAND

OR

12b INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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13 Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13). Provide only one Debtor name (13a or 13b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a ORGANIZATION'S NAME

NAGEL MACHINE CO. INC

OR

13b INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX)

☐ ITEM 8 (Collateral) OR

☐ OTHER INFORMATION (Please Describe)

Debtor Name and Address:

NAGEL MACHINE CO. INC - 27 WIGHTMAN STREET , WEST WARWICK, RI 02893

Secured Party Name and Address:

BANK RHODE ISLAND - 1062 CENTERVILLE ROAD , WARWICK, RI 02886

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut; ☐ covers as-extracted collateral; ☐ is filed as a fixture filing

16 Name and address of a RECORD OWNER of real estate described in item 17  
(if Debtor does not have a record interest)

17. Description of real estate