

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT SUBMITTER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 507275 - ORBIAN	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	101091244 RIRI
File with: Secretary of State, RI SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a INITIAL FINANCING STATEMENT FILE NUMBER 201921812860 11/13/2019 SS RI	1b <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
2 <input type="checkbox"/> 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 <input type="checkbox"/> 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 8	
4 <input checked="" type="checkbox"/> 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	
5 <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes. AND Check <u>one</u> of these three boxes to This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a c: 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b	
6 CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)	
6a ORGANIZATION'S NAME BUILDING SYSTEMS TECHNOLOGIES, LLC	
OR	6b INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S/INITIAL(S)) SUFFIX
7. CHANGED OR ADDED INFORMATION	
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 <u>one</u> box <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> 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 9	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT. Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor	
9a ORGANIZATION'S NAME Orbian Financial Services II, LLC	
OR	9b INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S/INITIAL(S)) SUFFIX
10 OPTIONAL FILER REFERENCE DATA Debtor Name: BUILDING SYSTEMS TECHNOLOGIES, LLC 101091244 Building Systems Technologies, LLC	

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

Orbian Financial Services II, LLC

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S) INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

BUILDING SYSTEMS TECHNOLOGIES, LLC

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

BUILDING SYSTEMS TECHNOLOGIES, LLC - 16 Bellevue Avenue, North Providence, RI 02911

Secured Party Name and Address:

Orbian Financial Services II, LLC - 2175 Salk Avenue, Suite 160, Carlsbad, CA 92008

15. This FINANCING STATEMENT AMENDMENT

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covers timber to be cut

☐

covers as-extracted collateral

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is filed as a fixture filing

17. Description of real estate

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

18. MISCELLANEOUS: 101091244-RI-C 507275 - ORBIAN CORPORATION

Orbian Financial Services II, LLC

File with: Secretary of State, RI

Building Systems Technologies, LLC