

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)**

Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	101100678  RIRI
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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: 202430293470 3/12/2024 SS RI

1b  This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. File Attach Amendment Acknowledgment Form (UCC3A4) 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 8.
- 4  **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  **PARTY INFORMATION CHANGE.**

Check one of these two boxes:  Debtor or  Secured Party of record

AND Check one of these three boxes in:

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 6b.

6. **CURRENT RECORD INFORMATION** Complete for Party Information Change - provide only one name (6a or 6b)

6a ORGANIZATION'S NAME

OR

6b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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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: JDK LOPES

OR

7b INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7c MAILING ADDRESS

25 EDGEWATER LN	TAUNTON	MA	02780	USA
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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 9.

9. **NAME OF SECURED PARTY OF 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: C T Corporation System, as representative

OR

9b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA** Debtor Name: DMD LOPES LLC  
101100678

**UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form  
 202430293470 3/12/2024 SS RI

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

12a ORGANIZATION'S NAME  
 C T Corporation System, as representative

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  
 DMD LOPES 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:  
 DMD LOPES LLC - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 DMD LOPES LLC - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Daniel - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Daniel D - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Deandrade, Denny - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Deandrade, Denny Dacruz - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Maria - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Maria D - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Rossana - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 Lopes, Rossana N - 42 NORTH PLEASANT STREET, TAUNTON, MA 02780  
 DMD LOPES LLC - 25 EDGEWATER LN, TAUNTON, MA 02780  
 DMD LOPES - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Daniel - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Daniel D - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Deandrade, Denny - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Deandrade, Denny Dacruz - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Maria - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Maria D - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Rossana - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Lopes, Rossana N - 25 EDGEWATER LN, TAUNTON, MA 02780  
 Deandrade, Denny - 1 TIFFANY STREET, CENTRAL FALLS, RI 02863  
 Deandrade, Denny Dacruz - 1 TIFFANY STREET, CENTRAL FALLS, RI 02863  
 Lopes, Rossana - 6 PARK STREET, CENTRAL FALLS, RI 02863  
 Lopes, Rossana N - 6 PARK STREET, CENTRAL FALLS, RI 02863

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

# UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11 INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form  
 202430293470 3/12/2024 SS RI

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

12a ORGANIZATION'S NAME  
 C T Corporation System, as representative

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  
 DMD LOPES 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)

Lopes, Rossana - 355 BROAD ST APT 1, CUMBERLAND, RI 02864  
 Lopes, Rossana N - 355 BROAD ST APT 1, CUMBERLAND, RI 02864  
 JDK LOPES, LLC - 25 EDGEWATER LN, TAUNTON, MA 02780  
 JDK LOPES - 25 EDGEWATER LN, TAUNTON, MA 02780

Secured Party Name and Address:

C T Corporation System, as representative - 330 N Brand Blvd, Suite 700, Attn: SPRS, Glendale, CA 91203

15. THIS FINANCING STATEMENT AMENDMENT:  covers timber to be cut;  covers as extracted collateral;  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)