

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) 27336 - REGENTS
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 103565461 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: 202329659280 9/20/2023 SS RI
1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) in the REAL ESTATE RECORDS. File: attach Amendment Addendum (Form UCC3AD) 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. [X] 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: This Change affects [] Debtor or [] Secured Party of record. AND Check one of these three boxes to: CHANGE name and/or address, ADD name, DELETE name.

6. CURRENT RECORD INFORMATION. Complete for Party Information Change - provide only one name (6a or 6b).
6a. ORGANIZATION'S NAME: DOORLEY AGENCY, INC.
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: First Citizens Bank & Trust Company
7b. INDIVIDUAL'S SURNAME, INDIVIDUAL'S FIRST PERSONAL NAME, INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S), SUFFIX

7c. MAILING ADDRESS: 10201 CENTURION PARKWAY, JACKSONVILLE, FL 32256, USA

8. COLLATERAL CHANGE. Check only one box: [] ADD collateral, [] DELETE collateral, [] RESTATE covered collateral, [] ASSIGN* 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 8.

9. 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: C T CORPORATION SYSTEM, AS REPRESENTATIVE
9b. INDIVIDUAL'S SURNAME, FIRST PERSONAL NAME, ADDITIONAL NAME(S) INITIAL(S), SUFFIX

10. OPTIONAL FILER REFERENCE DATA. Debtor Name: DOORLEY AGENCY, INC. 103565461 156115

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11 INITIAL FINANCING STATEMENT FILE NUMBER Same as item 1a on Amendment form 202329659280 9/20/2023 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 DOORLEY AGENCY, 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:
DOORLEY AGENCY, INC. - 17 Sixth Avenue, East Greenwich, RI 02818

Secured Party Name and Address:
C T CORPORATION SYSTEM, AS REPRESENTATIVE - 330 N Brand Blvd, Suite 700; Attn: SPRS, Glendale, CA 91203
First Citizens Bank & Trust Company - 10201 CFNTURION PARKWAY, JACKSONVILLE, FL 32256

<p>15 THIS FINANCING STATEMENT AMENDMENT</p> <p><input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing</p> <p>16 Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest)</p>	<p>17 Description of real estate</p>
---	--------------------------------------