## UCC FINANCING STATEMENT

**FOLLOW INSTRUCTIONS**

### A. NAME & PHONE OF CONTACT AT FILER (optional)

### B. E-MAIL CONTACT AT FILER (optional)

### C. SEND ACKNOWLEDGMENT TO: (Name and Address)

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 1a, 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
- 1b. INDIVIDUAL’S SURNAME
- 1c. MAILING ADDRESS

### 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)

- OR
- 2a. ORGANIZATION’S NAME
- 2b. INDIVIDUAL’S SURNAME
- 2c. MAILING ADDRESS

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

- OR
- 3a. ORGANIZATION’S NAME
- 3b. INDIVIDUAL’S SURNAME
- 3c. MAILING ADDRESS

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

- Check one if applicable and check only one box:
  - (A Debtor is a Transmitting Utility)
  - (Manufactured-Home Transaction)
  - (Public-Finance Transaction)
  - (A Debtor is a Transferring Utility)
  - (Agricultural Lien)
  - (Non-UCC Filing)

### 5. Check one if applicable and check only one box:

- (Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) by a Decedent’s Personal Representative)

### 6. ALTERNATIVE DESIGNATION (if applicable):

- (Lessee/Lessor)
- (Consignee/Consignor)
- (Seller/Buyer)
- ( Bailor/Bailee)
- (Licensee/Licensee)

### 7. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)
UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

1b. 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

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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, 9 and 10 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 three boxes to:

FIRST PERSONAL NAME SUFFIX
ADDITIONAL NAME(S)/INITIAL(S) OR

check both of these two boxes:

FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

ADD name: Complete item 7a or 7b, and item 7c

DELETE name: Give record name to be deleted in item 6a or 6b

CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b; and item 7c

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

a. ORGANIZATION’S NAME

b. 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 (6a or 6b) [last name, full name; do not omit, modify, or abbreviate any part of the Debtor’s name]

a. ORGANIZATION’S NAME

b. 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: Also check one of these four boxes:

ADD collateral

DELETE collateral

RESTATE covered collateral

ASSIGN collateral

Indicate collateral:

9. NAME or 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

a. ORGANIZATION’S NAME

b. INDIVIDUAL’S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)