## **UCC FINANCING STATEMENT**

FOLLOWINSTRUCTIONS							
A. NAME & PHONE OF CONTACT AT FILER (optional)							
Corporation Service Company 800-858-5294							
B. E-MAIL CONTACT AT FILER (optional)							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
CORPORATION SERVICE COMPANY							
801 ADLAI STEVENSON DRIVE Springfield, IL 62703-4261			DOCUMENT NUMBER: 86399810002 FILING NUMBER: 20-7764052093				
				ELECTRONICALLY FOR			
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do r	not omit, modify, or abbreviate a						
in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor inform	ation in item 10 of the Financino	Statement Addendu	ım (Form UC	C1Ad)			
1a. ORGANIZATION'S NAME PIERCE BAINBRIDGE BECK PRICE & HECHT LLP							
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(\$)/INITIAL(\$)		SUFFIX		
1c. MAILING ADDRESS	СПУ		STATE	POSTAL CODE	COUNTRY		
600 WILSHIRE BLVD AVE STE 500	LOS ANGELES		CA	90017	USA		
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do r					or's name will not fit		
in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor inform	ation in item 10 of the Financing	Statement Addendu	ım (Form UC	C1Ad)			
2a. ORGANIZATION'S NAME JOHN M PIERCE ENTERPRISES LLC							
lor l			I		la		
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(\$)/INITIAL(\$)		SUFFIX		
2c. MAILING ADDRESS	СПУ		STATE	POSTAL CODE	COUNTRY		
10811 WILLOWBRAE AVE	CHARTSWORTH		CA	91311	USA		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY)	ARTY): Provide only one Secure	d Party name (3a or	3ь)				
3a. ORGANIZATION'S NAME							
KARISH KAPITAL LLC							
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(\$)/INITIAL(\$)		SUFFIX		
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
7522 137TH ST	FLUSHING		NY	11367	USA		
COLLATERAL: This financing statement covers the following collateral:							
Receivables- All Assets now owned or hereafter acquired and v	wherever located, inc	luding but not	limited	to, the following su	bcategories		
of assets: a. Accounts, including but not limited to, credit card							
Instruments, including but not limited to, Promissory Notes; f.							
Credit Rights; j. General Intangibles; k. Supporting Obligations							
Obligations; and i. Proceeds and Products of the foregoing. NO	TICE PURSUANT	ro an agri	EMEN	T BETWEEN DEB	TOR AND		
SECURED PARTY, DEBTOR							
HAS AGREED NOT TO FURTHER ENCUMBER THE COL	LATERAL DESCRI	BED HEREII	N, THE	FURTHER ENCUN	ABERING		
OF WHICH MAY CONSTITUTE TORTIOUS	~ × ~ ~ × × ~ × × × × × × × × × × × × ×	, , , , , , , , , , , , , , , , , , ,	ourse e		200 F222200 Y 7 G		
INTERFERENCE WITH THE SECURED PARTY'S RIGHT	BY SUCH ENCUME	SKANCES IN	THEE	VENT THAT ANY	ENTITY IS		
GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL	INTENDICIPIES CO	אדי שאול א פרייואי	י מתוחה	NOVE TUE SECT	in ca.		
PARTY ASSERTS A CLAIM TO ANY PROCEEDS	. IN IMPOUNDED CA	NIA Y WAXIN T. TA	J KIRLS 2	MOVE, THE SEC	J1X1515		
THEREOF RECEIVED BY SUCH ENTITY.							
5. Check only if applicable and check only one box: Collateral is : held in a Trust (see UCC1	Ad, item 17 and instructions)	being administe	ered by a De	cedent's Personal Representa	ative		
6a. Check only if applicable and check only one box:				cable and check <u>only</u> one box			
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a	a Transmitting Utility	Agr	icultural Lier	Non-UCC Filing			
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Cons			Licensee/L				
8. OPTIONAL FILER REFERENCE DATA:	3 3.	3	s-1				
[178057391]							

## **UCC FINANCING STATEMENT ADDENDUM**

FOLI	OWINSTRUCTIONS										
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because individual											
Debtor name did not fit, check here											
	9a. ORGANIZATION'S NAME										
	PIERCE BAINBRIDGE BECK PRICE & HECHT LLP										
OR	9b. INDIVIDUAL'S SURNAME OR										
	FIRST PERSONAL NAME										
				DOCUMENT NUMBER: 86399810002							
	ADDITIONAL NAME(S)/INTITAL(S)		SUFFIX	IMAGE GEN	NERATED ELECTRONICALLY FOR XML FILING						
						IS FOR CA FILING OFF					
10. I	10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit,										
modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c											
	10a. ORGANIZATION'S NAME										
	10b. INDIVIDUAL'S SURNAME										
	PIERCE										
ΔD	INDIVIDUAL'S FIRST PERSONAL NAME JOHN										
OR											
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MARK						SUFFIX 10811				
	MAKK						WILLOW				
							BRAE				
							AVE				
	MAILING ADDRESS	СПҮ			STATE	POSTAL CODE	COUNTRY				
108	10811 WILLOWBRAE AVE CHA		RTSWORTH		CA	91311	USA				
11	ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECU	JRFD P	ARTY'S NAME: P	rovide only one name	e (11a or 11)	a)					
<u> </u>	1. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)										
OR	11b. INDIVIDUAL'S SURNAME	FIR\$T	PERSONAL NAME	ADDITIONAL NAME(\$)/INT		AL NAME(S)/INITIAL(S)	SUFFIX				
11 c.	MAILING ADDRESS	СПҮ			STATE	POSTAL CODE	COUNTRY				
12.	ADDITIONAL SPACE FOR ITEM 4 (collateral):										
TO, A THIS FINANCING STATEMENT IS to be lifed from record (of recorded) in the REAL ESTATE				nis FINANCING STATEMENT:							
	RECORDS (if applicable)		covers timbe		vers as-extra	acted collateral 1 is file	d as a fixture filing.				
15.1   d	Name and address of RECORD OWNER of real estate described in item 16 (if Debtor oes not have a record interest):		16. Description of re	eal estate:							
_											
17.	MISCELLANEOUS:										

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