

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 510953 ITELERENT UCC Direct Services P.O. Box 29071 Glendale, CA 91209-9071 5792955 ALAL File with: Shelby, AL	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S NAME Parvati, Inc.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 11691 Highway 25		CITY Calera	STATE AL	POSTAL CODE 35040
1d. TAX ID #: SSN OR EIN [REDACTED]		1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION AL	
ADD'L INFO RE ORGANIZATION DEBTOR		1g. ORGANIZATIONAL ID #, if any DLL 684-299 ☐ NONE		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or combine names				
2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2d. TAX ID #: SSN OR EIN		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	
ADD'L INFO RE ORGANIZATION DEBTOR		2g. ORGANIZATIONAL ID #, if any ☐ NONE		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b)				
3a. ORGANIZATION'S NAME Telerent Leasing Corporation				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 4191 Fayetteville Road		CITY Raleigh	STATE NC	POSTAL CODE 27603

4. This FINANCING STATEMENT covers the following collateral:
ALL FURNITURE, FIXTURES AND EQUIPMENT AS FULLY DESCRIBED IN SCHEDULE 001 TO MASTER LEASE #12386-000 WHETHER NOW EXISTING OR HEREAFTER ACQUIRED ON OR REMOVED FROM DEBTORS PREMISES. THIS EQUIPMENT INSTALLED AT DAYS INN, 11691 HIGHWAY 25, CALERA, AL 35040. THE ABOVE DESCRIBED EQUIPMENT IS LEASED TO DEBTOR BY SECURED PARTY. DEBTOR IS CONTRACTUALLY BOUND TO ANY BUYER OF THE PROPERTY UPON WHICH THE EQUIPMENT IS LOCATED TO ASSUME ALL OF DEBTOR'S OBLIGATIONS TO SECURED PARTY UNDER THE LEASE WITHOUT MODIFICATIONS TO THE TERMS AND CONDITIONS THEREOF, WHICH ASSUMPTION IS A CONDITION PRECEDENT TO THE SALE OF SUCH PROPERTY. THIS IS A ?PRECAUTIONARY? FIXTURE FILING. THE SECURED PARTY DOES NOT CONCEDE THAT THE GOODS ARE OR WILL BECOME FIXTURES. SEE AMENDED OFFICIAL UCC COMMENT &9-313. THIS FILING IS TO BE RECORDED IN THE REAL ESTATE RECORDS.

Complete only when filing with the Judge of Probate:
The initial indebtedness secured by this financing statement is \$21,866.40
Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$32.85

5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING			
6. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional] ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2	
8. OPTIONAL FILER REFERENCE DATA 5792955 Sharon Dunford L#12386-001/SRD			

FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

OR	9a. ORGANIZATION'S NAME Parvati, Inc.		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

5792955-40-1

510953 ITELERENT

Sharon Dunford

L#12386-001/SRD

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
11d. TAX ID#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION		11g. ORGANIZATIONAL ID #, if any ☐ NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P's NAME - insert only one name (12a or 12b)

OR	12a. ORGANIZATION'S NAME				
	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral or is filed as a ☒ fixture filing.

14. Description of real estate:

Description: Recorded 9/17/02 #20020917000446650 in Shelby County, AL. Lot in the Southeast 1/4 of the Northwest 1/4 of Section 22, Township 22 South, Range 2 West.

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
☐ Filed in connection with a Manufactured-Home Transaction -- effective 30 years
☐ Filed in connection with a Public-Finance Transaction -- effective 30 years