[redacted]

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

2014033100 00058
FORSYTH CO, NC FEE $45.00
PRESENTED & RECORDED:
09-11-2014 10:55:39 AM
C. NORMAN HOLLEMAN
REGISTER OF DEEDS
BY: RANDY L SMITH
DPTY

BK: RE 3196
PG: 1170-1172

A. NAME & PHONE OF CONTACT AT FILER (optional)
Phone: (800) 331-3282 Fax: (818) 662-4141

B. E-MAIL CONTACT AT FILER (optional)
CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address) 9510 - BB & T - MASTER

CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

ENVELOPE

44823889
NCNC
FIXTURE

File with: Forsyth, NC

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 1b, 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				
OR	W ALEX APPANAITIS OD PA				
	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	312 SONATA DR	LEWISVILLE	NC	27023	USA

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)

	2a. ORGANIZATION'S NAME				
OR					
	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

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

	3a. ORGANIZATION'S NAME				
OR	BRANCH BANKING AND TRUST COMPANY				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	110 S STRATFORD RD FL 2	WINSTON SALEM	NC	27104	USA

4. COLLATERAL: This financing statement covers the following collateral:
Goods, including all Fixtures and Timber to be cut, specifically described as follows:

FIXTURES

[IF FURNITURE, FIXTURES - USER TO SPECIFICALLY DESCRIBE FURNITURE/FIXTURES AND PROVIDE LEGAL DESCRIPTION FOR THE UCC FINANCING STATEMENT ADDENDUM], general intangibles including all payment intangibles, copyrights, trademarks, patents, trade names, tax refunds, company records (paper and electronic), rights under equipment leases, warranties, software licenses, supporting obligations, and all proceeds (cash and non-cash) and products of the foregoing. Notice: pursuant to an agreement between Debtor and Secured Party, Debtor has agreed not to grant subsequent security interests in the collateral described herein.

[IF TIMBER TO BE CUT - USER TO SPECIFICALLY DESCRIBE TIMBER TO BE CUT AND PROVIDE LEGAL DESCRIPTION FOR THE UCC FINANCING STATEMENT ADDENDUM], general intangibles including all payment intangibles, copyrights, trademarks, patents, trade names, tax refunds, company records (paper and electronic), rights under equipment leases, warranties, software licenses, supporting obligations, and all proceeds (cash and non-cash) and products of the foregoing. Notice: pursuant to an agreement between Debtor and Secured Party, Debtor has agreed not to grant subsequent security interests in the collateral described herein.

[IF BULK BARN - USER TO SPECIFICALLY DESCRIBE BULK BARN BY YEAR, MAKE, MODEL, SERIAL NUMBER(S) AND PROVIDE LEGAL DESCRIPTION FOR THE UCC FINANCING STATEMENT ADDENDUM], general intangibles including all payment intangibles, copyrights, trademarks, patents, trade names, tax refunds, company records (paper and electronic), rights under equipment leases, warranties, software licenses, supporting

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
44823889 6049170 Commercial

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

Prepared by CT Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

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
W ALEX APPANAITIS OD PA

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

10c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

obligations, and all proceeds (cash and non-cash) and products of the foregoing. Notice: pursuant to an agreement between Debtor and Secured Party, *Debtor has agreed not to grant subsequent security interests in the collateral described herein.*

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

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

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

See attached Exhibit A

17. MISCELLANEOUS: 44823889-NC-67 9510 - BB & T - MASTER NC BRANCH BANKING AND TRUST File with: Forsyth, NC 6049170 Commercial

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Exhibit "A" to BB&T UCC Financing Statement
W Alex Appanaitis OD PA
Loan # 9512415587

BEING KNOWN AND DESIGNATED as Lot Number 2 as shown on the Map of SHALLOWFORD LAKES, SECTION 2, as recorded in Plat Book 21, Page 112 in the Office of the Register of Deeds of Forsyth County, North Carolina, reference to which is hereby made for a more particular description.