



State of Rhode Island

Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

Uniform Commercial Code (UCC) Filing Information

<u>Hours for filing:</u>	Public Counter: Monday – Friday 8:30 AM to 4:30 PM Online filing – 24/7
<u>Information Requests:</u>	Information on specific filings of record with this office will not be given over the Telephone; only general information will be available. UCC11 Information Requests cannot be ordered over the telephone. All filings must be communicated in writing.
<u>Filing Fees:</u>	Filings must be communicated in writing and will not be accepted unless accompanied by the minimum filing fee. Checks are to be made payable to the Rhode Island Department of State. We accept VISA, MasterCard, Discover, and American Express for all over-the-counter and online transactions. A small enhanced access fee is charged for all credit card transactions. See our website for more information on enhanced access fees.
<u>Refunds:</u>	Refunds will be issued for duplicate payments and rejected documents not corrected within 30-days from the date the filing was submitted to this office. Refunds will not be issued for valid transactions and overpayments in the amount of \$10 or less. Enhanced access fees are not refundable. To request a refund or view our refund policy click here .
<u>Paper Filing Forms:</u>	The IACA National Filing Forms will be accepted for filing. Rhode Island does provide a state form for UCC11 Information Requests. Please carefully read all instructions prior to filing.
<u>Acknowledgments:</u>	Acknowledgements are no longer being mailed. If you would like to receive an Acknowledgement of your filing, you MUST provide a valid email address. Complete ITEM C of the filing form to include a valid email address. E-acknowledgements for all approved filings are emailed at 3pm and 8pm daily.
<u>Filing Evidence:</u>	If you do not receive an Acknowledgement or if you would like to obtain a copy of any recorded UCC, follow these steps: <ul style="list-style-type: none">• Go to our UCC Database• To search for a UCC1 – you must search by debtor name• To search for a UCC3 – you can search by file number or debtor name• Click on the filing number to view the filing summary page• Click on the PDF link to view and print the filing
<u>Rejected Filings:</u>	Paper filers will receive their filing and payment via US mail addressed to the individual/entity that submitted the paperwork. Correspondence will accompany the paperwork indicating what steps need to be taken to correct the filing. You may also use our Rejected Filing Viewer to view the rejected document. <ul style="list-style-type: none">• To search for a UCC1 – you must search by debtor name• To search for a UCC3 – you must search by file number

UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

19. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

20. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

20a. ORGANIZATION'S NAME	
OR	
20b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

22. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (22a or 22b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

22a. ORGANIZATION'S NAME				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

23. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (23a or 23b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

24. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (24a or 24b)

24a. ORGANIZATION'S NAME				
OR				
24b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
24c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

25. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (25a or 25b)

25a. ORGANIZATION'S NAME				
OR				
25b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
25c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

26. MISCELLANEOUS:

Instructions for UCC Financing Statement Amendment Additional Party (Form UCC3AP)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions; use of the correct name for the Debtor is crucial. Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filing office cannot give legal advice.

Use this form (multiple copies if needed) to continue adding additional Debtor or Secured Party names as needed when filing a UCC Financing Statement Amendment (Form UCC3).

ITEM INSTRUCTIONS

19. **File Number.** Enter file number of initial financing statement as shown in item 1a of Amendment (Form UCC3) to which this Amendment Addendum relates.
20. **Name of Authorizing Party.** Enter information exactly as shown in item 9 on Amendment (Form UCC3).
- 21-23. **Additional Debtor's name.** If this Amendment Additional Party adds additional Debtors, complete items 21, 22, and 23 in accordance with Instruction 1 of Financing Statement (Form UCC1).
- 24-25. **Additional Secured Party's name or Assignor Secured Party's name.** If this Amendment Additional Party adds additional Secured Parties, complete items 24 and 25 in accordance with Instruction 3 of Financing Statement (Form UCC1). In the case of an assignment of the Secured Party's interest, filer may enter Secured Party and/or Assignor Secured Party's name and mailing address information in items 24 and 25.
26. **Miscellaneous.** Under certain circumstances, additional information not provided on the Financing Statement Amendment (Form UCC3) may be required. Also, some states have non-uniform requirements. Use this space or attach additional page(s) and incorporate by reference in item 26 (e.g., See Exhibit A) to provide such additional information or to comply with such requirements; otherwise, leave blank. Do not include social security numbers or other personally identifiable information.