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FOLLOW INSTRUCTIONS (front and back) CAREFULLY			103555	ن ک	21 AM - 5 1.	.; St. 00
. NAME & PHONE OF CONTACT						
		Phone: 800-331-3282 Fax:	818-662-4141			
. SEND ACKNOWLEDGMENT TO	O: (Name and Addre	ss) 59597 - Premier Financ	cial Se			
			' 			
Lien Solutions		922	209457			
P.O. Box 2907		A 13.71	NNZ			
Glendale, CA	91209-9071	NY	NY			
1			ı			
	File with:	Secretary of State, NY				
				SPACE IS FO	OR FILING OFFICE	USE ONLY
		sert only one debtor name (1a or	1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME						
15. INDIVIDUAL'S LAST NAME Miller		FIRST NAME	MIDDLE	NAME	SUFFIX	
		Brandon	W			
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
737 Park Avenue, Apt 15E			New York	NY 10021		USA
1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	1g. ORGANIZATIONAL ID #, if any	
ADDITIONAL DEBTOR'S EX	XACT FULL LEGA	AL NAME - insert only one debto	or name (2a or 2b) - do not abbreviate or comb	oine names		
ADDITIONAL DEBTOR'S EX		AL NAME - insert only one debto	or name (2a or 2b) - do not abbreviate or comb	pine names		
		AL NAME - insert only <u>one</u> debto	or name (2a or 2b) - do not abbreviate or comb	ine names		
2a. ORGANIZATION'S NAME		AL NAME - insert only <u>one</u> debto			NAME	SUFFIX
		AL NAME - insert only <u>one</u> debto	or name (2a or 2b) - do not abbreviate or comb	oine names MIDDLE	NAME	SUFFIX
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM		AL NAME - insert only <u>one</u> debto	FIRST NAME	MIDDLE		
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM		AL NAME - insert only <u>one</u> debto			NAME POSTAL CODE	SUFFIX
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM c. MAILING ADDRESS	16		FIRST NAME	MIDDLE	POSTAL CODE	
2a. ORGANIZATION'S NAME	ADD'L INFO RE ORGANIZATION	AL NAME - insert only one debto	FIRST NAME	MIDDLE		
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM c. MAILING ADDRESS	E ADD'L INFO RE		FIRST NAME	MIDDLE	POSTAL CODE	
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM c. MAILING ADDRESS d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	FIRST NAME	MIDDLE STATE 2g. ORG	POSTAL CODE	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM c. MAILING ADDRESS d. SEE INSTRUCTIONS SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME	ADD'L INFO RE ORGANIZATION DEBTOR (or NAME of TO	2e. TYPE OF ORGANIZATION TAL ASSIGNEE of ASSIGNOR S	FIRST NAME CITY 21. JURISDICTION OF ORGANIZATION	MIDDLE STATE 2g. ORG	POSTAL CODE	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM 2b. INDIVIDUAL'S LAST NAM 2c. MAILING ADDRESS 3c. SEE INSTRUCTIONS SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME Premier Financial	ADD'L INFO RE ORGANIZATION DEBTOR (or NAME of TO	2e. TYPE OF ORGANIZATION TAL ASSIGNEE of ASSIGNOR S	FIRST NAME CITY 21. JURISDICTION OF ORGANIZATION	MIDDLE STATE 2g. ORG	POSTAL CODE	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM c. MAILING ADDRESS d. SEE INSTRUCTIONS SECURED PARTY'S NAME 3a. ORGANIZATION'S NAME	ADD'L INFO RE ORGANIZATION DEBTOR (or NAME of TO	2e. TYPE OF ORGANIZATION TAL ASSIGNEE of ASSIGNOR S	FIRST NAME CITY 21. JURISDICTION OF ORGANIZATION	MIDDLE STATE 2g. ORG	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM E. MAILING ADDRESS SEE INSTRUCTIONS SECURED PARTY'S NAME Premier Financial	ADD'L INFO RE ORGANIZATION DEBTOR (or NAME of TO	2e. TYPE OF ORGANIZATION TAL ASSIGNEE of ASSIGNOR S	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION S/P) - insert only one secured party name (3a)	STATE 2g. ORG, or 3b)	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAM 2b. MAILING ADDRESS SEE INSTRUCTIONS SECURED PARTY'S NAME Premier Financial	ADD'L INFO RE ORGANIZATION DEBTOR (or NAME of TO	2e. TYPE OF ORGANIZATION TAL ASSIGNEE of ASSIGNOR S	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION S/P) - insert only one secured party name (3a)	STATE 2g. ORG, or 3b)	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CON	ISIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for red ESTATE RECORDS. Attach Addendum	cord] (or recorded) in the REAL [if applicable]		SEARCH REPORT(S) on [optional]	Debtor(s)	All Debtors	Debtor 1 Debtor :

8.OPTIONAL FILER REFERENCE DATA 92209457

VIN: •84859

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