OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]				
Michael A. Piette, Esq.				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
· · · · · · · · · · · · · · · · · · ·				
Michael A. Piette, Esq.	ll l			
Jaeckle Fleischmann & Mugel, LLP				
400 Essjay Road, Suite 320				
Williamsville, New York 14221				
I	1			
<u></u>				
			OR FILING OFFICE U	SE ONLY
DEBTOR'S EXACT FULL LEGAL NAME - insert only one of the control of	debtor name (1a or 1b) - do not abbreviate or combine name	5		
640 ELLICOTT STREET, LLC				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
'01 Ellicott Street	Buffalo	NY	14203	USA
ADD'L INFO RE 1e. TYPE OF ORG				
ORGANIZATION ' DEBTOR limited liabi	ility compan New York	i		
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME -		combine names		
2a. ORGANIZATION'S NAME	The contract of	COMBINE HAMES		
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MAILING ADDRESS	crry	STATE	POSTAL CODE	COUNTR
		SIAIE	POSTAL CODE	COUNTR
ADD'L INFO RE 2e. TYPE OF ORG	ANIZATION 2f. JURISDICTION OF ORGANIZATION			
ORGANIZATION '	21. JURISDIC HONOF ORGANIZATION	F		
DEBTOR				
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNED	E of ASSIGNOR S/P) - insert only one secured party name (a or 3b)		
3a. ORGANIZATION'S NAME				
THE JOHN R. OISHEI FOUNDATION				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
		ĺ		
MAILING ADDRESS	CITY	07475	POSTAL CODE	COUNTRY

4. This FINANCING STATEMENT covers the following collateral:

One HSBC Center, Suite 3650

All personal property of every kind and description now or hereafter owned by the Debtor or in which the Debtor has an interest (but only to the extent of such interest), situated or to be situated upon or used or intended for use, in connection with the real property (the "Real Estate") commonly known as 640 Ellicott Street, Buffalo, New York, 14203, together with any renewals, replacements, or additions thereto or substitutions therefor, as well as all proceeds thereof, whether now or hereafter existing, including, without limitation the following (collectively, the "Personal Property"): A. Equipment, Plans, etc.: All of the Debtor's interest in and to all Fixtures, materials, supplies, contract rights, Documents, Instruments, Chattel Paper, plans and specifications, reports, studies, professional or technical work product, shop drawings, survey, soil studies, permits, licenses, approvals, warranties, and General Intangibles, located at, arising from, relating to, or used in connection with the Real Estate; B. Proceeds: All proceeds (including, without limitation, insurance and condemnation proceeds) as well as all interest earned thereon, paid for any damage done to the Real Estate, or any part thereof, or for any portion thereof appropriated or otherwise taken by an governmental authority, agency, or entity,

Buffalo

NY

14203

USA

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 7, Check to REQUEST SEARCH REPORT(S) on Debtor(s) 1 1 1 1 1 1 1 1 1	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	7 200.0.0	100001 100001 2
NEW YORK SECRETARY OF STATE		

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

NATUCCI - 5/4/01 C T System Online

MAINT OF FILLOUR	ONS (front and back) EBTOR (1a or 1b) O	N RELATED FINANCING STA	TEMENT				
9a. ORGANIZATION							
640 ELLICO	TT STREET, LL	C					
9b. INDIVIDUAL'S LA	ST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
. MISCELLANEOUS							
			:	THE ABOVE	SPACE I	S FOR FILING OFFIC	E USE ONLY
1. ADDITIONAL DEE		L LEGAL NAME - insert only <u>one</u> n	name (11a or 11b) - do not abbrev	ate or combine names			
R 11b. INDIVIDUAL'S I	AST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS			СПҮ		STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGAN	NIZATION			
. ADDITIONAL	SECURED PARTY	'S or ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)			
R	AOT MANE		IFIRST NAME		MIDDLE	NAME	SUFFIX
12b. INDIVIDUAL'S	LAST NAME		FIRST MANUE				
2c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
3. This FINANCING ST	ATEMENT covers tir	mber to be cut or as-extracted	16. Additional collateral descri	ption:		<u> </u>	
collateral, or is filed 4. Description of real e	as a fixture filing. state:	٦	C. Rents and Contra	cts: All of the	Debtor	se or occupancy of	interest in a
			to all leases of other	agreements to			of all or any
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640 Ellicott Str			portion of the Real I	Estate and all re penefits of such	ents, se leases	curity deposits, g and other agreer	uarantees, a nents, as wo
640 Ellicott Str Buffalo, New Y			portion of the Real I other proceeds and as any sales contract	Estate and all re benefits of such its (including ar	ents, se leases ly depo	curity deposits, g and other agreer osit funds paid the	uarantees, a nents, as we ereunder), it
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