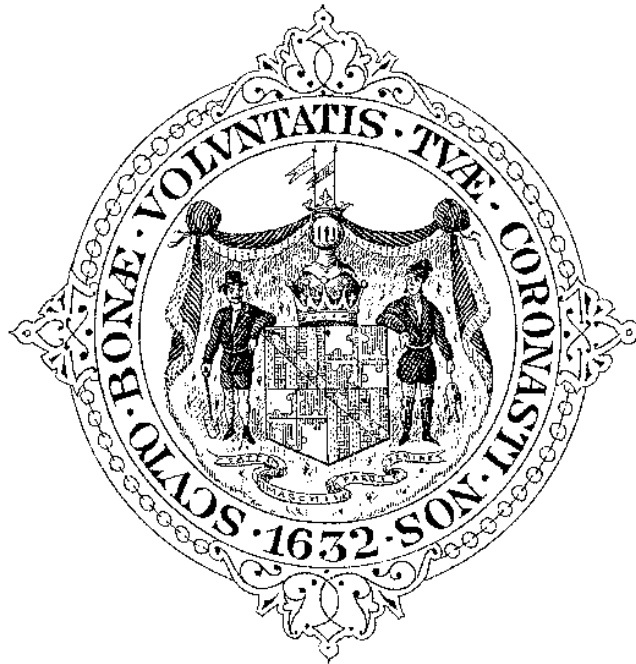


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MARYLAND STATE DEPARTMENT OF  
ASSESSMENTS AND TAXATION  
UCC ONLINE ELECTRONIC FILING USER GUIDE



**Division of Business Filings**

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Baltimore, MD 21201  
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<https://SDAT/UCCFiling/UCCMainPage.aspx>

*IN PARTNERSHIP WITH*



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## 1.0 – INTRODUCTION

The Maryland State Department of Assessments and Taxation’s office has served as the central filing office for public notices of secured transactions under Revised Article 9 of the Uniform Commercial Code. These public notices, called financing statements, indicate a commercial agreement between a debtor and a secured party.

Financing statements are filed by banks, mortgage companies, and other lending institutions against secured collateral. Searches of financing statements provide information on secured collateral. When a debtor pledges collateral on a loan, UCC search results tell lenders if others have filed a claim against the same collateral.

The Maryland State Department of Assessments and Taxation’s UCC Online system provides users with the capability to file all UCCs immediately and to conduct searches that will provide the user with immediate results. The delay normally experienced from having to mail in files is eliminated. If the user completes all mandatory fields, the filing is filed immediately. Payment for filings and certified copies may be made using a debit or credit card.

Privacy and security is assured via Secure Sockets Layer (SSL) protocol which encrypts the information being passed between the web server and the user’s computer.

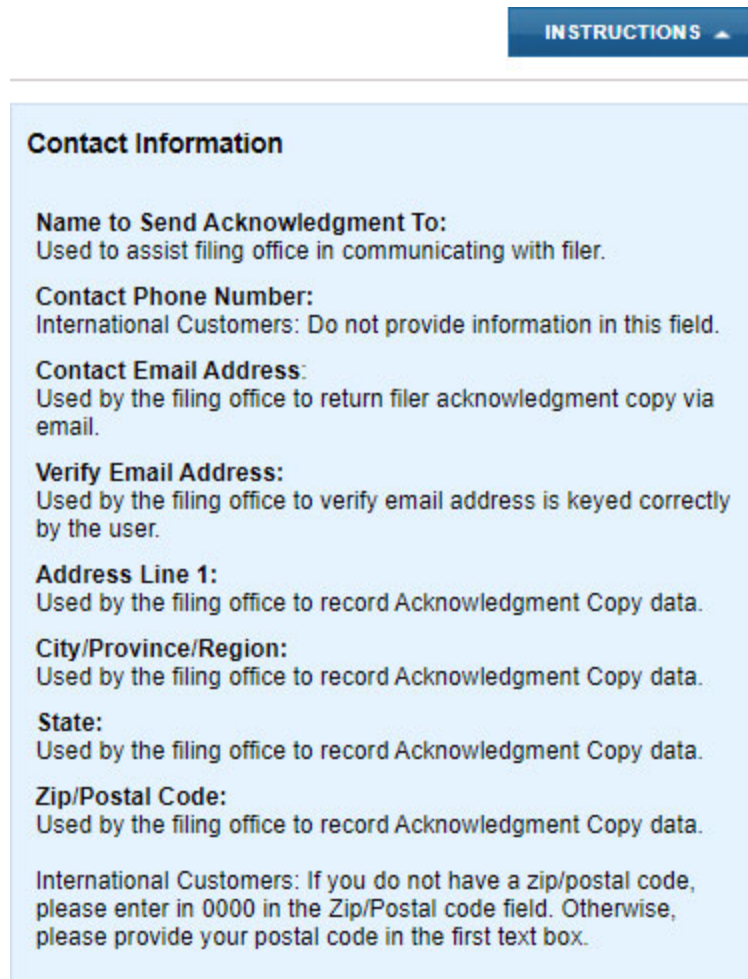
The Maryland UCC Online system is designed to be available 24-hours per day, seven days per week.

We have prepared this user manual to assist you in becoming familiar with the Maryland State Department of Assessments and Taxation’s UCC Online system. In addition, many pages within the application have associated “Instructions” which may be of use. Of course, the Maryland State Department of Assessments and Taxation’s office will be available to assist you as well.

## 2.0 – APPLICATION ELEMENTS

### 2.01 – INSTRUCTIONS

Page instructions can be viewed by clicking the Instructions button located at the top left of the page. Instructions will appear below the **INSTRUCTIONS** button.



The screenshot shows a blue button labeled "INSTRUCTIONS" with a small upward-pointing arrow. Below the button is a light blue rectangular panel with a title "Contact Information" in bold. The panel contains several fields with labels and descriptions:

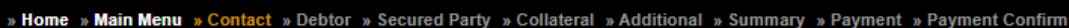
- Name to Send Acknowledgment To:**  
Used to assist filing office in communicating with filer.
- Contact Phone Number:**  
International Customers: Do not provide information in this field.
- Contact Email Address:**  
Used by the filing office to return filer acknowledgment copy via email.
- Verify Email Address:**  
Used by the filing office to verify email address is keyed correctly by the user.
- Address Line 1:**  
Used by the filing office to record Acknowledgment Copy data.
- City/Province/Region:**  
Used by the filing office to record Acknowledgment Copy data.
- State:**  
Used by the filing office to record Acknowledgment Copy data.
- Zip/Postal Code:**  
Used by the filing office to record Acknowledgment Copy data.

At the bottom of the panel, there is a note: "International Customers: If you do not have a zip/postal code, please enter in 0000 in the Zip/Postal code field. Otherwise, please provide your postal code in the first text box."

Click the **INSTRUCTIONS** button again to remove the page instructions from displaying on the page.

### 2.02 – PROGRESS INDICATOR

During the filing process, each page displays a progress indicator. The progress indicator provides the user with a visual representation of where they are in the filing process. The current step is highlighted.



The screenshot shows a dark grey horizontal bar containing a series of navigation links separated by right-pointing arrows: » Home » Main Menu » Contact » Debtor » Secured Party » Collateral » Additional » Summary » Payment » Payment Confirm. The "Contact" link is highlighted in orange, indicating the current step in the process.

## 3.0 – MAIN MENU

This page provides the user with options to file a UCC-1, UCC-3, or UCC-5 as well as options to search filings by name or filing number. Please note the disclaimer box at the bottom of this page. All users should read and pay special attention to this disclaimer statement.

The screenshot shows the 'Main Menu' of the UCC Online system. It is divided into three main sections. The top left section, 'UCC Filings', includes a sub-header 'Save Time - File Online!' and a description: 'Online filers will receive an electronic acknowledgment copy of their filing.' Below this are five links: 'UCC-1 Start a New Filing', 'UCC-3 Amendment', 'UCC-3 Termination', 'UCC-5 Information Statement', 'UCC-3 Continuation', and 'UCC-3 Assignment'. The top right section, 'UCC Search and Retrieval', includes a sub-header 'View/print up to the minute records of UCC filings recorded with the Maryland Department of Assessments and Taxation Business Services.' Below this is a date field showing 'Today's Search Date is: 06/02/2020' and two links: 'Name Search' and 'Filing Number Search'. The bottom section, 'Disclaimer', contains a paragraph of legal notice, a red 'Notice: Protect Your Social Security Number' heading, and two paragraphs of text regarding public records and social security numbers.

**Main Menu**

**UCC Filings**  
Save Time - File Online!  
Online filers will receive an electronic acknowledgment copy of their filing.

- [UCC-1 Start a New Filing](#)
- [UCC-3 Amendment](#)
- [UCC-3 Termination](#)
- [UCC-5 Information Statement](#)
- [UCC-3 Continuation](#)
- [UCC-3 Assignment](#)

**UCC Search and Retrieval**  
View/print up to the minute records of UCC filings recorded with the Maryland Department of Assessments and Taxation Business Services.

Today's Search Date is: 06/02/2020

- [Name Search](#)
- [Filing Number Search](#)

**Disclaimer**  
Information on this Web site is collected, maintained, and provided for the convenience of the user. While the Maryland Department of Assessments and Taxation Business Services strives to keep such information accurate and updated, the Maryland Department of Assessments and Taxation Business Services does not certify the authenticity of information contained herein as it originates from third parties. The Maryland Department of Assessments and Taxation Business Services shall under no circumstances be liable for any actions taken or omissions made from reliance upon any information contained herein regardless of the source.

**Notice: Protect Your Social Security Number**  
Most documents maintained by the Maryland Department of Assessments and Taxation Business Services are public records subject to disclosure. Filings may be viewed by the public and requested copies may also be made available.

Please do not place your social security number on a UCC filing or other documents you submit to the Maryland Department of Assessments and Taxation Business Services. Although we attempt to prevent disclosure of social security numbers, due to the large number of documents filed, we cannot guarantee that a social security number placed on a document will not be disclosed. It is the responsibility of the filer to ensure that a social security number is not contained on the filing.

To begin using the UCC Online system, select one of the UCC Filing or UCC Search and Retrieval options.

The [UCC-1, Start a New Filing](#) link allows you to start the process to file a new initial financing.

The [UCC-3, Amendment](#), [UCC-3, Termination](#), [UCC-3, Assignment](#) and [UCC-3, Continuation](#) links allow you to start the process to file an amendment to an initial financing statement.

The [UCC-5, Information Statement](#) link allows you to start the process to file a correction to an initial financing statement.

The [Name Search](#) link allows you to search active filings by debtor or secured party name.

The [Filing Number Search](#) link allows you to search active filings by filing number.

## 4.0 – UCC-1, START A NEW FILING

This option is used to file the initial security interest.

The UCC-1 financing statement filing is divided into several web pages. Each page allows for the entry of a specific type of information. Please do not place your social security number on a UCC filing or any other document you submit to the Maryland State Department of Assessments and Taxation. Although we attempt to prevent disclosure of social security numbers, we cannot guarantee that a social security number placed on a document will not be disclosed due to the large number of documents filed. It is the responsibility of the filer to ensure that a social security number is not contained on the filing. Please note that all information entered on the following screens will be displayed on copies of the filing. Filings may be viewed by the public and requested copies may also be made available.

### 4.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-1 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows a web form titled "Contact" with a blue "INSTRUCTIONS" button in the top right corner. The form contains several input fields and a radio button group. The fields are: "Send Acknowledgment To (Name)" (text input), "Contact Name" (text input), "Contact Phone Number" (text input with a small icon), "Contact Phone Extension" (text input), "Contact Email Address" (text input), "Verify Contact Email Address" (text input), "Address Line 1" (text input), "Address Line 2" (text input), "City/Province/Region" (text input), "State" (dropdown menu with "SELECT STATE" text), "Zip/Postal Code" (two text inputs), and "Country" (dropdown menu with "United States" text). To the right of the "Contact Email Address" and "Verify Contact Email Address" fields is a radio button group with two options: "Included on Original Filing" (unselected) and "Do Not Include on Original Filing" (selected). At the bottom left is a red "CANCEL" button, and at the bottom right are blue "BACK" and "CONTINUE" buttons.

Once the form has been filled out, click the **CONTINUE** button to move to the next step of the filing process.

## 4.02 – DEBTOR INFORMATION

The Debtor screen is used to allow for the entry of any number of debtors. When the screen is first displayed, the user can select whether the debtor is an individual or an organization. Any fields that should not be provided on the basis of the debtor type will be grayed out.

Information provided on this screen is the same information provided in Sections 1 and 2 of the UCC-1 form and Section 10 of the UCC-1Ad form. Enter only one debtor name in the Organization Name or Individual Name fields per page. If you have more than one debtor to provide, select the **ADD ANOTHER DEBTOR** button after you are done providing the information for the current debtor. If you do not have an additional debtor to add or you are done entering additional debtors, click the **CONTINUE** button to move to the next step of the filing process.

The screenshot shows a web form titled "Debtor (Individual)". At the top right is a blue button labeled "INSTRUCTIONS". Below the title, a red error message states: "You must add at least one debtor before you can continue." The form contains several sections:

- Debtor Type:** Two radio buttons are present: "Organization" (unselected) and "Individual" (selected).
- Organization Name:** A grayed-out text input field.
- Individual's First Name:** A text input field with a small icon on the right.
- Additional Name(s)/Initial(s):** A text input field.
- Individual's Surname:** A text input field.
- Individual Suffix:** A text input field.
- Address Line 1:** A text input field.
- Address Line 2:** A text input field.
- City/Province/Region:** A text input field.
- State:** A dropdown menu with "SELECT STATE" as the placeholder.
- Zip/Postal Code:** Two adjacent text input fields.
- Country:** A dropdown menu with "United States" as the selected option.

At the bottom right is a blue button labeled "ADD ANOTHER DEBTOR". At the bottom left is a red button labeled "CANCEL". At the bottom right, below the "ADD ANOTHER DEBTOR" button, are two blue buttons labeled "BACK" and "CONTINUE".

If the Debtor Type is an *individual*, note that **Individual First Name**, **Individual Last Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.



## Debtor (Organization)

INSTRUCTIONS

You must add at least one debtor before you can continue.

Debtor Type: ☒ Organization ☐ Individual

Organization Name

Individual's First Name

Additional Name(s)/Initial(s)

Individual's Surname

Individual Suffix

Address Line 1

Address Line 2

City/Province/Region

State

Zip/Postal Code

Country

ADD ANOTHER DEBTOR

CANCEL

BACK

CONTINUE

If the Debtor Type is an *organization*, note that **Organization Name, Address Line 1, City/Province/Region, State, Zip/Postal Code, Country, Organization Type** and **Organization Jurisdiction** are all required fields.

## Debtor

INSTRUCTIONS ▾

DEBTOR LIST		
Debtor Type	Debtor Name	Actions
Individual	John Doe	<a href="#">Edit</a> <a href="#">Remove</a>

Debtor Type:

☐ Organization  
☒ Individual

Organization Name

Individual's First Name

Additional Name(s)/Initial(s)

Individual's Surname

Individual Suffix

Address same as First Debtor Address

☐

Address Line 1

Address Line 2

City/Province/Region

State

... SELECT STATE ... ▾

Zip/Postal Code

Country

United States ▾

ADD ANOTHER DEBTOR

CANCEL

BACK

CONTINUE

If more than one debtor is entered, each debtor name provided by the user is displayed at the top of the page. If the user determines that information for the debtor is incorrect, the user can easily edit or remove the debtor by selecting the appropriate link.

In order to make online filing as efficient as possible, additional debtors have an option to allow the user to use the same debtor address as the first debtor. By checking the “Address same as First Debtor Address” checkbox, the Address Line 1, Address Line 2, City/Province/Region, State, Zip/Postal Code and Country will be populated with the same information as the first debtor.

Once you have finished entering debtors, click the **CONTINUE** button to move to the next step of the filing process.

## 4.03 – SECURED PARTY INFORMATION

The Secured Party screen is used to allow for the entry of one or more secured parties. Like the debtor screen, the user can select whether the secured party is an individual or an organization. Any fields that should not be provided on the basis of the secured party type will be grayed out.

Information provided on this screen is the same information provided in Section 3 of the UCC-1 form and Section 11 of the UCC-1Ad form. Enter only one secured party name in the Organization Name or Individual Name fields per page. If you have more than one secured party to provide, select the **ADD ANOTHER SECURED PARTY** button after you are done providing the information for the current secured party. If you do not have an additional secured party to add or you are done entering additional secured parties, click the **CONTINUE** button to move to the next step of the filing process.

**Secured Party (Individual)** [INSTRUCTIONS](#)

**You must add at least one secured party before you can continue.**

•Secured Party Type: ☐ Organization ☒ Individual

\*Organization Name

Individual's First Name

Additional Name(s)/Initial(s)

•Individual's Surname

Individual Suffix

Secured Party Address is the same as Contact Information ☐ Yes ☒ No

•Address Line 1

Address Line 2

•City/Province/Region

•State

•Zip/Postal Code

•Country

[ADD ANOTHER SECURED PARTY](#)

[CANCEL](#) [BACK](#) [CONTINUE](#)

If the Secured Party Type is an *individual*, note that **Individual First Name, Individual Last Name, Address Line 1, City/Province/Region, State, Zip/Postal Code** and **Country** are all required fields.

## Secured Party (Organization)

INSTRUCTIONS

You must add at least one secured party before you can continue.

•Secured Party Type: ☒ Organization  
☐ Individual

•Organization Name

Individual's First Name

Additional Name(s)/Initial(s)

\*Individual's Surname

Individual Suffix

Secured Party Address is the same as Contact Information ☐ Yes ☒ No

•Address Line 1

Address Line 2

•City/Province/Region

•State

•Zip/Postal Code

•Country

ADD ANOTHER SECURED PARTY

CANCEL

BACK

CONTINUE

If the Secured Party Type is an *organization*, note that **Organization Name**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code**, and **Country** are all required fields.

## Secured Party

INSTRUCTIONS ▾

SECURED PARTY LIST

Secured Party Type	Secured Party Name	Actions
Organization	John Doe Corporation	<a href="#">Edit</a> <a href="#">Remove</a>

•Secured Party Type:

☒ Organization  
☐ Individual

•Type:

☐ Additional Secured Party  
☐ Assignor Secured Party

•Organization Name

Individual's First Name

Additional Name(s)/Initial(s)

Individual's Surname

Individual Suffix

Secured Party Address is the same as Contact Information

☐ Yes  
☒ No

•Address Line 1

Address Line 2

•City/Province/Region

•State

SELECT STATE ▾

•Zip/Postal Code

•Country

United States ▾

ADD ANOTHER SECURED PARTY

CANCEL

BACK

CONTINUE

If more than one secured party is entered, each secured party name provided by the user is displayed at the top of the page. If the user determines that information for the secured party is incorrect, the user can easily edit or remove the secured party by selecting the appropriate link.

In order to make online filing as efficient as possible, additional secured parties have an option to allow the user to use the same address as provided on the Contact Information page (see 6.01). By selecting “Yes” for “Secured Party Address is the same as Contact Information,” Address Line 1, Address Line 2, City/Province/Region, State, Zip/Postal Code and Country will be populated with the same information as provided by the user on the Contact Information page.

Once you have finished entering debtors, click the **CONTINUE** button to move to the next step of the filing process.

## 4.04 – COLLATERAL INFORMATION

This page allows for the entry or upload of collateral used for security by the secured party(s). The user may type collateral information, paste from text composed in a word processing software (i.e., Word, WordPerfect, Notepad, and WordPad) or upload a file that is in either PDF or TIFF file format.


### Collateral (Type Description)

INSTRUCTIONS

You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.

☒ Type Collateral Description  
(Max Length 950 characters)

☐ Upload Collateral Document(s)

 State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).

The Financing Statement covers the following collateral:

Max length 950 characters.

ADD ANOTHER COLLATERAL

CANCEL

BACK

CONTINUE

**Collateral (Upload Documents)** INSTRUCTIONS

You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.

☐ Type Collateral Description  
(Max Length 950 characters)

☒ Upload Collateral Document(s)

Upload Collateral  SELECT UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

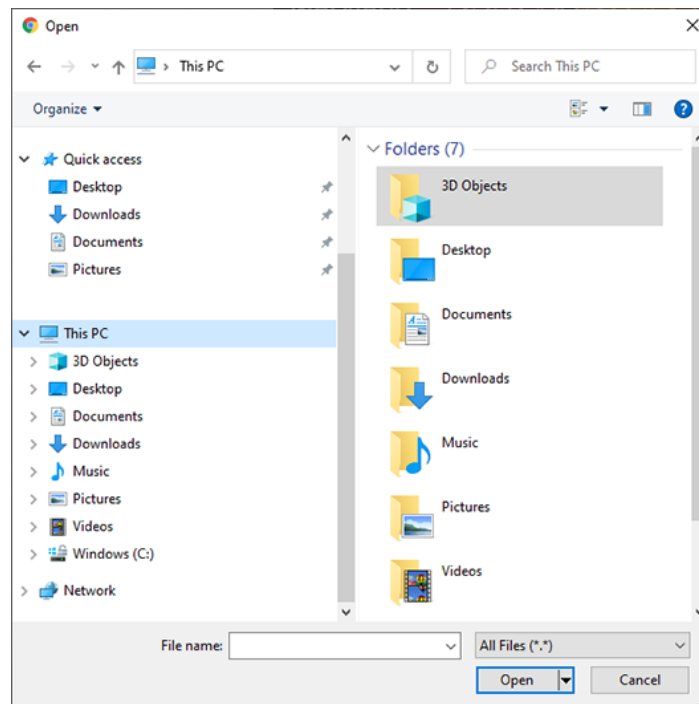
☐ I'm not a robot reCAPTCHA Privacy - Terms

ADD ANOTHER COLLATERAL

CANCEL BACK CONTINUE

Information provided on this screen is the same information provided in Section 4 of the UCC-1 form and Section 12 of the UCC-1Ad form.

To upload collateral, select the Browse... button and locate the file on your computer you wish to upload and attach to the filing.



Once the file is located, select the file and the click the Open button.

Upload Collateral

Corp-collateral.pdf

Remove

UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

The file you selected will display in the Upload Collateral box. Click the **UPLOAD** button.

**Collateral**


INSTRUCTIONS

COLLATERAL LIST	
Collateral Text	Actions
Misc. Assets	<a href="#">Edit</a> <a href="#">Remove</a>

You must type collateral OR upload collateral information before you can continue filing. Please select an option below to enter collateral.

☒ Type Collateral Description  
(Max Length 950 characters)

☐ Upload Collateral Document(s)

 State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).

The Financing Statement covers the following collateral:

Max length 950 characters.

ADD ANOTHER COLLATERAL

CANCEL

BACK

CONTINUE

If more than one file is uploaded or typed, each collateral entry provided by the user is displayed at the top of the page. If the user determines that information or file associated with the collateral is incorrect, the user can easily edit or remove the collateral by selecting the appropriate link.

**Note:** Uploading one or more files will increase the number of pages in your submission.

Once you have finished entering collateral, click the **CONTINUE** button to move to the next step of the filing process.



## 4.05 – ADDITIONAL INFORMATION

The Additional Information screen is used capture any information provided under the following fields: “Alternative Designation” [UCC-1 form, Section 7], “This Financing Statement covers” [UCC-1Ad form, Section 14], “Debtor is a” [UCC-1Ad form, Box 10], “Other”, “Optional Filer Reference Data” [UCC-1 form, Section 8], and “Upload additional information.”

The default value selected for each of these categories is N/A (none). To change, the user simply clicks the selection that is applicable to the filing.

Once you have finished entering additional information, click the **CONTINUE** button to move to the next step of the filing process.

**Additional** INSTRUCTIONS

•Collateral is:[if applicable] ☒ N/A (none)  
☐ Held in a Trust  
☐ Being Administered by a Decedent's Personal Representative

•Other:[if applicable] ☒ N/A (none)  
☐ Public-Finance Transaction  
☐ Manufactured-Home Transaction  
☐ A Debtor is a TRANSMITTING UTILITY

•Other:[if applicable] ☒ N/A (none)  
☐ Agricultural Lien  
☐ Non-UCC Filing


•Alternative Designation:[if applicable] ☒ N/A (none)  
☐ Lessee/Lessor  
☐ Consignee/Consignor  
☐ Seller/Buyer  
☐ Bailee/Bailor  
☐ Licensee/Licensor

•This Financing Statement Covers:[if applicable] ☒ N/A (none)  
☐ Fixtures  
☐ Timber  
☐ Minerals to be Extracted

Optional Filer Reference Data:

Upload additional information:  SELECT UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

☐ I'm not a robot  reCAPTCHA  
Privacy • Terms


Miscellaneous:

CANCEL BACK CONTINUE

## 4.06 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

### Summary

 Your UCC Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 4th Street Baltimore, MD 21201 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	johndoe@email.com
Contact Email To Appear on Filing:	NO

#### DEBTOR INFORMATION

EDIT DEBTOR(S)

Debtor Type:	Individual
Individual Name:	Jane Doe
Address:	456 7th Street Baltimore, MD 21201 Country: US

#### SECURED PARTY INFORMATION

EDIT SECURED PARTY(S)

Secured Party Type:	Organization
Organization Name:	JOHN DOE CORPORATION
Address:	890 11th Street Baltimore, MD 21201 Country: US

COLLATERAL

EDIT COLLATERAL(5)

This Financing Statement covers the following collateral:  
Shoes

ADDITIONAL INFORMATION

EDIT INFORMATION

Alternative Designation: N/A  
Collateral is: N/A  
This Financing Statement is: N/A  
Other: N/A  
Other: N/A  
Miscellaneous: N/A

ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
UCC-1 Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

Please Confirm

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

If all of the information in the filing summary is correct, check the **Please Confirm** box and then select the **CONTINUE** button to move to the next step of the filing process.

## 4.07 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover credit cards or debit card.

**1** Payment Type **2** Customer Info **3** Payment **4** Submit Payment

### Payment

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Country \* Complete all required fields [ \* ]  
United States

First Name \* Last Name \*

Company Name

Address \*

Address 2

City \* State \*  
 Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

**Cancel**

### Transaction Summary

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

### Need Help?

Please complete the Customer Information Section.

## 4.08 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→


**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

 Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
<b>Total Amount Charged</b>		<b>\$25.00</b>

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

UCC-1																													
<b>UCC FINANCING STATEMENT</b> FOLLOW INSTRUCTIONS																													
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p><b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b></p><p><b>B. E-MAIL CONTACT AT FILER (optional)</b></p><p><b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b></p><div style="border: 1px solid black; padding: 5px; margin-top: 5px;"><p>Mr. Spock 234 Winslow Gardens  Annapolis, MD 21401</p></div></div><div style="width: 50%; text-align: right;"><p>MD DEPT. OF ASSESSMENTS &amp; TAXATION</p><p>160316-1608298 NS</p><p>Lapse Date: 03/16/2021</p><p>Date: 3/16/2016 Time: 4:08 PM Page Count: 1 Pg Debtor Count: 1 Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID# 16161562</p></div></div>																													
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>																													
<p><b>1. DEBTOR'S NAME:</b> Provide only <u>one</u> 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 <input type="checkbox"/> and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="4">1a. ORGANIZATION'S NAME</td></tr><tr><td colspan="4">OR</td></tr><tr><td>1b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr><tr><td>Kirk</td><td>James</td><td>Tiberius</td><td></td></tr><tr><td colspan="2">1c. MAILING ADDRESS</td><td>CITY</td><td>STATE POSTAL CODE COUNTRY</td></tr><tr><td colspan="2">2345 Enterprise Drive</td><td>Starfleet</td><td>MD 21401 US</td></tr></table>		1a. ORGANIZATION'S NAME				OR				1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	Kirk	James	Tiberius		1c. MAILING ADDRESS		CITY	STATE POSTAL CODE COUNTRY	2345 Enterprise Drive		Starfleet	MD 21401 US				
1a. ORGANIZATION'S NAME																													
OR																													
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Kirk	James	Tiberius																											
1c. MAILING ADDRESS		CITY	STATE POSTAL CODE COUNTRY																										
2345 Enterprise Drive		Starfleet	MD 21401 US																										
<p><b>2. DEBTOR'S NAME:</b> Provide only <u>one</u> 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 <input type="checkbox"/> and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="4">2a. ORGANIZATION'S NAME</td></tr><tr><td colspan="4">OR</td></tr><tr><td>2b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td colspan="2">2c. MAILING ADDRESS</td><td>CITY</td><td>STATE POSTAL CODE COUNTRY</td></tr><tr><td colspan="2"></td><td></td><td></td></tr></table>		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								
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																										
<p><b>3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY):</b> Provide only <u>one</u> Secured Party name (3a or 3b)</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="4">3a. ORGANIZATION'S NAME</td></tr><tr><td colspan="4">Starfleet</td></tr><tr><td colspan="4">OR</td></tr><tr><td>3b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td colspan="2">3c. MAILING ADDRESS</td><td>CITY</td><td>STATE POSTAL CODE COUNTRY</td></tr><tr><td colspan="2">234 Winslow Gardens</td><td>Annapolis</td><td>MD 21401 US</td></tr></table>		3a. ORGANIZATION'S NAME				Starfleet				OR				3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX					3c. MAILING ADDRESS		CITY	STATE POSTAL CODE COUNTRY	234 Winslow Gardens		Annapolis	MD 21401 US
3a. ORGANIZATION'S NAME																													
Starfleet																													
OR																													
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX																										
3c. MAILING ADDRESS		CITY	STATE POSTAL CODE COUNTRY																										
234 Winslow Gardens		Annapolis	MD 21401 US																										
<p><b>4. COLLATERAL:</b> This financing statement covers the following collateral:</p> <p>Collateral</p>																													
<p><b>5. Check <u>only</u> if applicable and check <u>only</u> one box:</b> Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative</p> <p><b>6a. Check <u>only</u> if applicable and check <u>only</u> one box:</b> <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing</p> <p><b>6b. Check <u>only</u> if applicable and check <u>only</u> one box:</b></p> <p><b>7. ALTERNATIVE DESIGNATION (if applicable):</b> <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor</p> <p><b>8. OPTIONAL FILER REFERENCE DATA:</b></p>																													

(Rev. 04/20/11)

## 5.0 – UCC-3 AMENDMENT

### 5.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

The screenshot shows a web form titled "Contact" with a blue "INSTRUCTIONS" button in the top right corner. The form contains the following fields and options:

- Send Acknowledgment To (Name)**: A text input field with a small icon on the right.
- Contact Name**: A text input field.
- Contact Phone Number**: A text input field with a small icon on the right.
- Contact Phone Extension**: A text input field.
- Contact Email Address**: A text input field. To its right are two radio button options: "Included on Original Filing" (unselected) and "Do Not Include on Original Filing" (selected).
- Verify Contact Email Address**: A text input field.
- Address Line 1**: A text input field with a small icon on the right.
- Address Line 2**: A text input field with a small icon on the right.
- City/Province/Region**: A text input field with a small icon on the right.
- State**: A dropdown menu with "SELECT STATE" as the placeholder.
- Zip/Postal Code**: Two adjacent text input fields, each with a small icon on the right.
- Country**: A dropdown menu with "United States" as the selected option.

At the bottom of the form, there are three buttons: a red "CANCEL" button on the left, and two blue buttons, "BACK" and "CONTINUE", on the right.

## 5.02 – FILING NUMBER LOOKUP

The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.

### FILER IS A DEBTOR OR SECURED PARTY

### Amendment Request

**Filing Number**

**What area would you like to make an amendment to?**

☐ Debtor / Collateral

☐ Secured Party / Collateral

**CANCEL** **BACK** **CONTINUE**

## 5.03 – AMENDMENT ACTION

### DEBTOR FILER AMENDMENT ACTIONS

Debtor party filers have the option to amend an existing debtor party(s), add new debtor party(s), and/or amend collateral.

### Amendment Selection

Verify the following information is correct:

**Filing Number:** 0000000181392939  
**Primary Secured Party:** Any Corporation  
**Primary Secured Party Type:** Organization

If this information is not correct please [check the filing number entered](#).

DEBTOR(S)				
Debtor Type	Debtor Name	Address	Status	Action
Organization	John Doe Corporation	123 4th Street Anytown, MD 21305 Country: US	N/A	<a href="#">Edit</a> <a href="#">Delete</a>
Individual	John Doe	567 8th Street Anytown, MD 21305 Country: US	N/A	<a href="#">Edit</a> <a href="#">Delete</a>

**ADD NEW DEBTOR**

COLLATERAL	
Collateral Description	Type
<b>AMEND COLLATERAL</b>	

AMENDMENT - PENDING ACTIONS		
Type	Modified Party	Modification

**CANCEL** **BACK** **CONTINUE**



## SECURED PARTY FILER AMENDMENT ACTIONS

Secured party filers have the option to amend an existing party(s), add new party(s), delete existing party(s) and/or amend collateral.

### Amendment Selection

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: Any Corporation  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

SECURED PARTY(S)					
Secured Party Type	Secured Party Name	Address	Status	Assignor Secured Party	
Organization	First Corporation	135 7th Street Any Ordinary Town, MD 20306 Country: US	N/A	<a href="#">Edit</a>	<a href="#">Delete</a>
Organization	Second Corporation	246 8th Street Anytown, MD, 20304 Country: US	N/A	<a href="#">Edit</a>	<a href="#">Delete</a>
Organization	Third Corporation	357 9th Street Anytown, MD, 20304 Country: US	N/A	<a href="#">Edit</a>	<a href="#">Delete</a>

[ADD NEW SECURED PARTY](#)

COLLATERAL	
Collateral Description	Type

[AMEND COLLATERAL](#)

AMENDMENT - PENDING ACTIONS		
Type	Modified Party	Modification

[CANCEL](#)[BACK](#)[CONTINUE](#)

## 5.04 – AUTHORIZING PARTY

Amendments must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

### Authorizing Party

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: John Doe Corporation  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

AUTHORIZING PARTY(S)			
#	Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
<input type="checkbox"/>	Debtor	Organization	Jane Doe Corporation
<input type="checkbox"/>	Secured Party	Organization	Any Corporation

CANCELBACKCONTINUE

## 5.05 – MISCELLANEOUS

The user has an opportunity to enter miscellaneous information. Doing so requires an addendum to be uploaded.


### Miscellaneous

Entering Miscellaneous information will require an addendum.

Miscellaneous:

Upload additional information:  SELECT UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.


☐ I'm not a robot 

CANCELBACKCONTINUE

## 5.06 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

### Summary

 Your UCC-3 Amendment Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 4th Street Anytown, MD 20305 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	jdoe@email.com
Contact Email To Appear on Filing:	NO

#### FILING REQUEST INFORMATION

EDIT REQUEST

Filing Number:	0000000181392939
Primary Secured Party Type:	Organization
Primary Secured Party:	John Doe Corporation

#### AMENDMENT SELECTION - PENDING ACTIONS

EDIT AMENDMENT ACTION(S)

Type	Modified Party	Modification
Debtor	DOE, JANE	Add

#### AUTHORIZING PARTY(S)

EDIT AUTHORIZING PARTY

Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
Debtor	Organization	Jane Doe Corporation

Optional Filer Reference Data:

#### ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
UCC Amendment Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

## 5.07 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**1** Payment Type **2** Customer Info **3** Payment **4** Submit Payment

**Payment**

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Complete all required fields [ \* ]

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email ⓘ

**Next >**

**Payment Information**

**Cancel**

**Transaction Summary**

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

**Need Help?**  
Please complete the Customer Information Section.

## 5.08 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→


**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

 Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

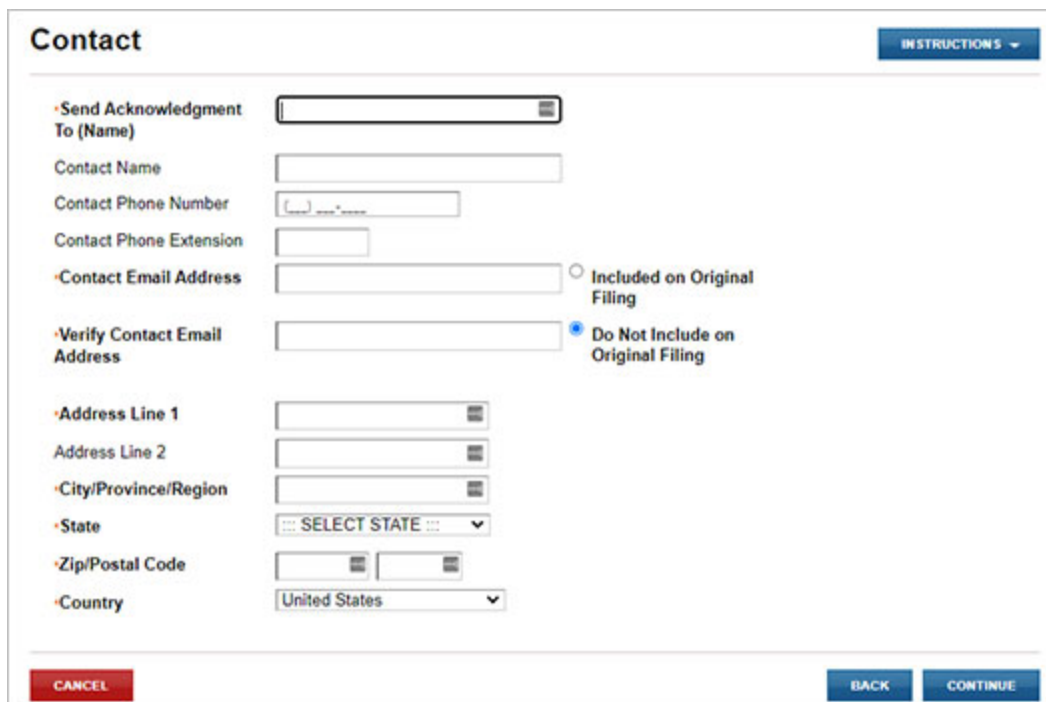
<div style="display: flex; align-items: center; justify-content: space-between;"><div style="width: 30%;"><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div></div><div style="font-size: 24pt; font-weight: bold;">UCC-3</div></div>	
<b>UCC FINANCING STATEMENT AMENDMENT</b> FOLLOW INSTRUCTIONS	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">B. E-MAIL CONTACT AT FILER (optional)</div> <div style="border: 1px solid black; padding: 5px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Napoleon Bonaparte 234 Winslow Gardens  Annapolis, MD 21401</div></div>	<div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">MD DEPT. OF ASSESSMENTS &amp; TAXATION</div> <div style="font-weight: bold; font-size: 12pt;">160316-1600121 NS</div> <div style="font-size: 10pt; margin-top: 10px;">Date: 3/16/2016 Time: 4:00 PM Page Count: 1 Pg Debtor Count: Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID# 16161520</div>
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	
<div style="display: flex; justify-content: space-between;"><div>1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450</div><div>1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13</div></div>	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement	
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law	
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects <input checked="" type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <div style="font-size: 8pt; margin-top: 5px;">AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b</div>	
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)	
<div style="border: 1px solid black; padding: 2px;">6a. ORGANIZATION'S NAME</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 30%;">OR 6b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 20%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)	
<div style="border: 1px solid black; padding: 2px;">7a. ORGANIZATION'S NAME</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 30%;">OR 7b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">INDIVIDUAL'S FIRST PERSONAL NAME</div><div style="width: 20%;">INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
7c. MAILING ADDRESS	
CITY	
STATE	
POSTAL CODE	
COUNTRY	
8. <input checked="" type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input checked="" type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: <b>Collateral</b>	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor	
<div style="border: 1px solid black; padding: 2px;">9a. ORGANIZATION'S NAME Yoko</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 30%;">OR 9b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 20%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
10. OPTIONAL FILER REFERENCE DATA:	

(Rev. 04/20/11)

## 6.0 – UCC-3 ASSIGNMENT

### 6.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.



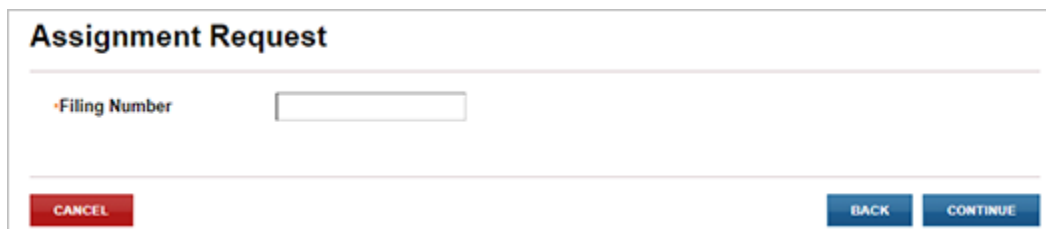
The 'Contact' form contains the following fields and options:

- Send Acknowledgment To (Name)**: Text input field.
- Contact Name**: Text input field.
- Contact Phone Number**: Text input field with a placeholder for area code and number.
- Contact Phone Extension**: Text input field.
- Contact Email Address**: Text input field. Radio button options: ☐ Included on Original Filing, ☒ Do Not Include on Original Filing.
- Verify Contact Email Address**: Text input field.
- Address Line 1**: Text input field.
- Address Line 2**: Text input field.
- City/Province/Region**: Text input field.
- State**: Dropdown menu with 'SELECT STATE' as the placeholder.
- Zip/Postal Code**: Two text input fields for zip and postal code.
- Country**: Dropdown menu with 'United States' as the selected option.

Buttons: CANCEL, BACK, CONTINUE.

### 6.02 – FILING NUMBER LOOKUP

The user must indicate enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filing Number** is a required field.




The 'Assignment Request' form contains the following field:

- Filing Number**: Text input field.

Buttons: CANCEL, BACK, CONTINUE.

## CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.

 **UCC Filing 000000000181392 not found.**

### Assignment Request

Filing Number

0000000181392899

CANCEL

BACK

CONTINUE

## 6.03 – ASSIGNMENT ACTION

Filers have the option to select an existing party to assign collateral, add new debtor(s) to assign collateral or amend the collateral statement.

### Assignment Selection

Verify the following information is correct:

Filing Number: 0000000181392939

Primary Secured Party: John Doe Corporation

Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

**SECURED PARTY(S)**

Secured Party Type	Secured Party Name	Address	Secured Party Assignees
Organization	John Doe Corporation	123 Main Street Anytown, MD 20104 Country: US	<input type="checkbox"/>
Organization	James Doe Corporation	456 Main Street Anytown, MD 20104 Country: US	<input type="checkbox"/>
Organization	Jane Doe Corporation	789 Main Street Anytown, MD 20104 Country: US	<input type="checkbox"/>

ADD ASSIGNEE

CANCEL

BACK

CONTINUE



## 6.04 – COLLATERAL ASSIGNMENT

This page allows for the entry of a collateral assignment. The user selects the assignment type and provides the collateral that is being assigned. Information provided on this screen is the same information provided in Box 8 of the UCC-3 form and Box 13 of the UCC-3Ad form. Note that **Assignment Type** and **Please provide the collateral you are assigning** are required fields.


### Collateral (Type Description)

INSTRUCTIONS

Please select an option below to enter collateral.

☒ Type Collateral Description

☐ Upload Collateral Document(s)

 State Department of Assessments & Taxation is not responsible for the correctness or acceptability of listed collateral. Burden is on the Filer to ensure acceptable collateral is listed (tangible assets).

Please provide the collateral you are assigning

Max length 950 characters.

CANCEL

BACK

CONTINUE



### Collateral (Upload Documents)

INSTRUCTIONS


Please select an option below to enter collateral.

☐ Type Collateral Description

☒ Upload Collateral Document(s)

Upload Collateral   SELECT  UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

☐ I'm not a robot 

CANCEL

BACK

CONTINUE

## 6.05 – AUTHORIZING PARTY

Assignments must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

### Authorizing Party

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: John Doe Organization  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

AUTHORIZING PARTY(S)			
#	Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
<input type="checkbox"/>	Secured Party	Organization	John Doe Organization
<input type="checkbox"/>	Secured Party	Organization	James Doe Organization
<input type="checkbox"/>	Secured Party	Organization	Jane Doe Organization
<input type="checkbox"/>	Other	(Enter Name in textbox>>>)	<input type="text"/>

CANCELBACKCONTINUE

## 6.06 – MISCELLANEOUS

The user has an opportunity to enter miscellaneous information. Doing so requires an addendum to be uploaded.


### Miscellaneous

Entering Miscellaneous information will require an addendum.

Miscellaneous:

Upload additional information:  SELECT + UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.


☐ I'm not a robot 

CANCELBACKCONTINUE

## 6.07 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

### Summary

 Your UCC Assignment Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 Main Street Anytown, MD 20405 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	jdoe@email.com
Contact Email To Appear on Filing:	NO

#### FILING REQUEST INFORMATION

EDIT REQUEST

Filing Number:	0000000181392939
Primary Secured Party Type:	Organization
Primary Secured Party:	John Doe Corporation

#### AUTHORIZING PARTY(S)

EDIT AUTHORIZING PARTY

Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
Secured Party	Organization	Jane Doe Corporation

#### ASSIGNMENT PENDING ACTION(S)

EDIT ASSIGNMENT SELECTION(S)

Secured Party Type	Secured Party Name
Organization	James Doe Corporation

Optional Filer Reference Data:

#### ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
UCC Assignment Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

## 6.08 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**1** Payment Type **2** Customer Info **3** Payment **4** Submit Payment

### Payment

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Complete all required fields [ \* ]

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

Cancel

### Transaction Summary

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

### Need Help?

Please complete the Customer Information Section.

## 6.09 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a PAYMENT SUCCESSFUL screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→

**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

<div style="display: flex; justify-content: space-between; align-items: center;"><div style="width: 30%;"><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div></div><div style="font-size: 24px; font-weight: bold; margin-left: 10px;">UCC-3</div></div>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><h3 style="margin: 0;">UCC FINANCING STATEMENT AMENDMENT</h3><p style="margin: 0; font-size: 10px;">FOLLOW INSTRUCTIONS</p><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b></div><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><b>B. E-MAIL CONTACT AT FILER (optional)</b></div><div style="border: 1px solid black; padding: 5px;"><b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Maurice Minor 234 Winslow Gardens  Annapolis, MD 21401</div></div></div><div style="width: 50%; text-align: center; font-size: 12px;"><div style="writing-mode: vertical-rl; transform: rotate(180deg);">MD DEPT. OF ASSESSMENTS &amp; TAXATION</div><div style="display: flex; justify-content: space-around; margin-top: 10px;"><div>160316-1557025</div><div>NS</div></div><div style="display: flex; justify-content: space-around; margin-top: 10px;"><div>Date: 3/16/2016</div><div>Time: 3:57 PM</div><div>Page Count: 2 Pg</div><div>Debtor Count: 0</div><div>Filing Fees: \$25.00</div><div>Electronic Records Access: \$0.00</div><div>Total: \$25.00</div><div>Order ID# 16161500</div></div></div></div>	
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><b>1a. INITIAL FINANCING STATEMENT FILE NUMBER</b> 0000000181417450</div><div style="width: 50%; font-size: 10px;"><b>1b.</b> <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13</div></div>	
<b>2.</b> <input type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement	
<b>3.</b> <input checked="" type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
<b>4.</b> <input type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law	
<b>5.</b> <input type="checkbox"/> <b>PARTY INFORMATION CHANGE:</b> Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <div style="font-size: 10px; margin-top: 5px;">AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b</div>	
<b>6. CURRENT RECORD INFORMATION:</b> Complete for Party Information Change - provide only one name (6a or 6b) <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">6a. ORGANIZATION'S NAME</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"><div style="width: 30%;">OR 6b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 20%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
<b>7. CHANGED OR ADDED INFORMATION:</b> Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">7a. ORGANIZATION'S NAME PRINCIPIS CAPITAL LLC.</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"><div style="width: 30%;">OR 7b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">INDIVIDUAL'S FIRST PERSONAL NAME</div><div style="width: 20%;">INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
<div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"><div style="width: 40%;">7c. MAILING ADDRESS</div><div style="width: 15%;">CITY</div><div style="width: 10%;">STATE</div><div style="width: 15%;">POSTAL CODE</div><div style="width: 20%;">COUNTRY</div></div>	
<b>8.</b> <input type="checkbox"/> <b>COLLATERAL CHANGE:</b> Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input checked="" type="checkbox"/> ASSIGN collateral Indicate collateral: Collateral	
<b>9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:</b> Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">9a. ORGANIZATION'S NAME Issac</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"><div style="width: 30%;">OR 9b. INDIVIDUAL'S SURNAME</div><div style="width: 30%;">FIRST PERSONAL NAME</div><div style="width: 20%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 20%;">SUFFIX</div></div>	
<b>10. OPTIONAL FILER REFERENCE DATA:</b>	

(Rev. 04/20/11)

## 7.0 – UCC-3 CONTINUATION

This option is used to file a continuation to extend the lapse period for the filing. The UCC-3 can be filed within six months before the expiration of the five-year period. If a UCC-3 is not filed before the end of the five-year period, the financing statement lapses, and the security interest becomes unperfected. A UCC-3 cannot be filed after the lapse date.

The UCC-3 Continuation filing is divided into several web pages. Each page allows for the entry of a specific type of information. Please do not place your social security number on a UCC filing or any other document you submit to the Maryland State Department of Assessments and Taxation. Although we attempt to prevent disclosure of social security numbers, we cannot guarantee that a social security number placed on a document will not be disclosed due to the large number of documents filed. It is the responsibility of the filer to ensure that a social security number is not contained on the filing. Please note that all information entered on the following screens will be displayed on copies of the filing. Filings may be viewed by the public and requested copies may also be made available.

### 7.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

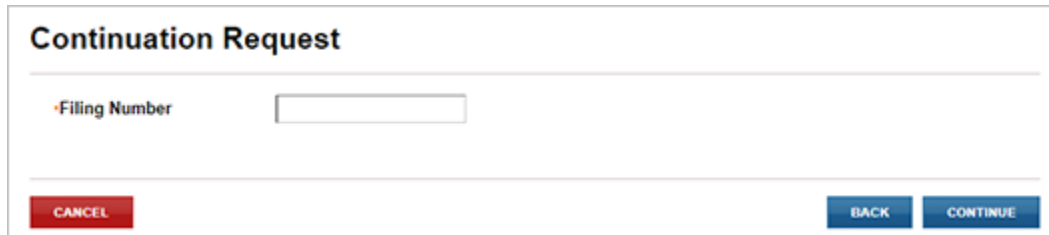
The screenshot shows a web form titled "Contact" with a blue "INSTRUCTIONS" button in the top right corner. The form contains the following fields and options:

- Send Acknowledgment To (Name)**: Text input field.
- Contact Name**: Text input field.
- Contact Phone Number**: Text input field with a placeholder "(...) - \* - ".
- Contact Phone Extension**: Text input field.
- Contact Email Address**: Text input field. To its right are two radio button options: "Included on Original Filing" (unselected) and "Do Not Include on Original Filing" (selected).
- Verify Contact Email Address**: Text input field.
- Address Line 1**: Text input field.
- Address Line 2**: Text input field.
- City/Province/Region**: Text input field.
- State**: Dropdown menu with "SELECT STATE" as the current selection.
- Zip/Postal Code**: Two adjacent text input fields.
- Country**: Dropdown menu with "United States" as the current selection.

At the bottom of the form, there is a red "CANCEL" button on the left and two blue buttons, "BACK" and "CONTINUE", on the right.

## 7.02 – FILING NUMBER LOOKUP

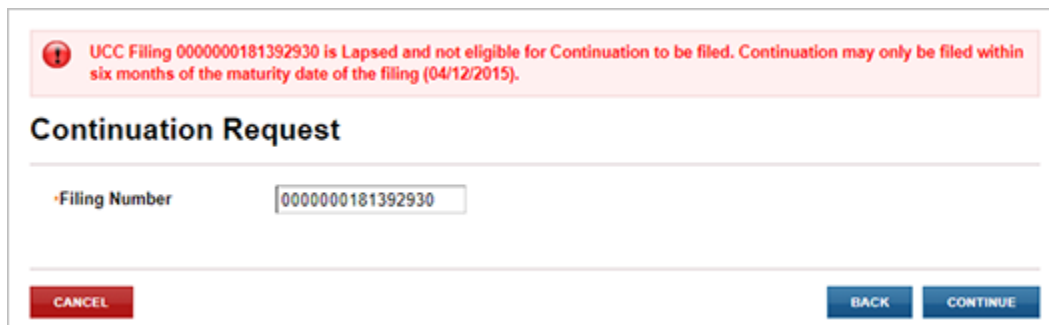
The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.



The screenshot shows the 'Continuation Request' form. At the top, the title 'Continuation Request' is displayed. Below it, there is a label 'Filing Number' followed by an empty text input field. At the bottom of the form, there are three buttons: a red 'CANCEL' button on the left, and two blue buttons, 'BACK' and 'CONTINUE', on the right.

### INELIGIBLE FOR CONTINUATION

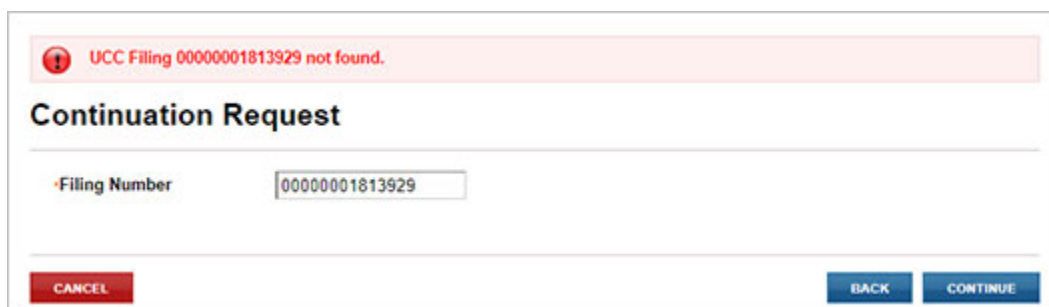
If the filing number entered is ineligible for continuation because the original filing has lapsed or is not in the six-month window of the filing lapsing, the user will be provided a message that the filing is not eligible to be continued.



The screenshot shows the 'Continuation Request' form with an error message at the top. The message, in red text, states: 'UCC Filing 0000000181392930 is Lapsed and not eligible for Continuation to be filed. Continuation may only be filed within six months of the maturity date of the filing (04/12/2015)'. Below the message, the 'Filing Number' field is populated with '0000000181392930'. The 'CANCEL', 'BACK', and 'CONTINUE' buttons are at the bottom.

### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.




The screenshot shows the 'Continuation Request' form with an error message at the top. The message, in red text, states: 'UCC Filing 00000001813929 not found.'. Below the message, the 'Filing Number' field is populated with '00000001813929'. The 'CANCEL', 'BACK', and 'CONTINUE' buttons are at the bottom.



## 7.03 – AUTHORIZING PARTY

Continuations must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

 **PLEASE NOTE:** A Continuation filed outside the statutory 6-month window (the 6 months prior to the current Lapse Date of 4/12/2025) will not update the Lapse Date, and you will NOT be eligible for a refund of that filing. Please be sure that any Continuation request is filed no sooner than 10/12/2024.

### Authorizing Party

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: John Doe Corporation  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

AUTHORIZING PARTY(S)			
#	Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
<input type="checkbox"/>	Debtor	Organization	Jane Doe Corporation

CANCEL

BACK

CONTINUE

## 7.04 – MISCELLANEOUS

The user has an opportunity to enter miscellaneous information. Doing so requires an addendum to be uploaded.

### Miscellaneous

Entering Miscellaneous information will require an addendum.

Miscellaneous:


Upload additional information:

SELECT

UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

☐ I'm not a robot

  
reCAPTCHA  
Privacy - Terms

CANCEL


BACK

CONTINUE

## 7.05 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

### Summary

 Your UCC Continuation Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 Main Street Anytown, MD 20105 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	jdoe@email.com
Contact Email To Appear on Filing:	NO

#### FILING REQUEST INFORMATION

EDIT REQUEST

Filing Number:	0000000181392939
Primary Secured Party Type:	Organization
Primary Secured Party:	John Doe Corporation

#### AUTHORIZING PARTY(S)

EDIT AUTHORIZING PARTY

Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
Debtor	Organization	Jane Doe Corporation

Optional Filer Reference Data:

#### ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
UCC Continuation Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

## 7.06 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**1** Payment Type **2** Customer Info **3** Payment **4** Submit Payment

### Payment

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Country \* Complete all required fields [ \* ]  
United States

First Name \* Last Name \*

Company Name

Address \*

Address 2

City \* State \*  
 Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

**Cancel**

### Transaction Summary

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

### Need Help?

Please complete the Customer Information Section.

## 7.07 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's Office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→

**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

<div style="display: flex; justify-content: space-between; align-items: center;"><div style="width: 30%;"><div style="background-color: black; height: 20px; width: 100%;"></div><div style="background-color: black; height: 20px; width: 100%;"></div><div style="background-color: black; height: 20px; width: 100%;"></div></div><div style="width: 60%;"><h2 style="margin: 0;">UCC-3</h2></div></div>	
<h3 style="margin: 0;">UCC FINANCING STATEMENT AMENDMENT</h3> <p style="margin: 0;">FOLLOW INSTRUCTIONS</p>	
<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">B. E-MAIL CONTACT AT FILER (optional)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Jane Saw</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">234 Winslow Gardens</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Annapolis, MD 21401</div>	<div style="display: flex; flex-direction: column; align-items: center;"><div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">MD DEPT. OF ASSESSMENTS &amp; TAXATION</div><div style="text-align: right; font-weight: bold;">160316-1552417 NS</div><div style="text-align: right; font-weight: bold;">Lapse Date: 04/01/2021</div><div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"><div>Date: 3/16/2016</div><div>Time: 3:52 PM</div><div>Page Count: 1 Pg</div><div>Debtor Count: 0</div><div>Filing Fees: \$25.00</div><div>Electronic Records Access: \$0.00</div><div>Total: \$25.00</div><div>Order ID# 16161480</div></div></div>
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	
<div style="display: flex; justify-content: space-between;"><div>1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450</div><div>1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13</div></div>	
2. <input type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement	
3. <input type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. <input checked="" type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law	
5. <input type="checkbox"/> <b>PARTY INFORMATION CHANGE:</b> Check one of these two boxes: This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <input type="checkbox"/> AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b	
6. <b>CURRENT RECORD INFORMATION:</b> Complete for Party Information Change - provide only one name (6a or 6b)	
6a. ORGANIZATION'S NAME	
OR	
6b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S) INITIAL(S)	
SUFFIX	
7. <b>CHANGED OR ADDED INFORMATION:</b> Complete for Assignment or Party Information Change - provide only one name (7a or 7b) [use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name]	
7a. ORGANIZATION'S NAME	
OR	
7b. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S) INITIAL(S)	
SUFFIX	
7c. MAILING ADDRESS	
CITY	
STATE	
POSTAL CODE	
COUNTRY	
8. <input type="checkbox"/> <b>COLLATERAL CHANGE:</b> Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:	
9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:</b> Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor	
9a. ORGANIZATION'S NAME	
Roger	
OR	
9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S) INITIAL(S)	
SUFFIX	
10. <b>OPTIONAL FILER REFERENCE DATA:</b>	

(Rev. 04/20/11)

## 8.0 – UCC-3 TERMINATION

### 8.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-3 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.

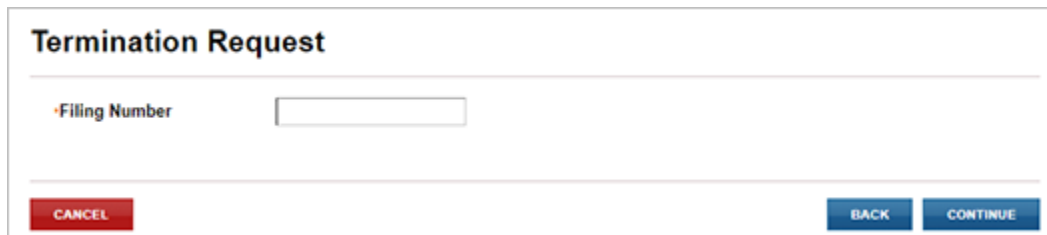
The screenshot shows a web form titled "Contact" with a blue "INSTRUCTIONS" button in the top right corner. The form contains the following fields and options:

- Send Acknowledgment To (Name)**: A text input field with a small icon on the right.
- Contact Name**: A text input field.
- Contact Phone Number**: A text input field with a small icon on the right.
- Contact Phone Extension**: A text input field.
- Contact Email Address**: A text input field. To its right are two radio button options:
  - ☐ Included on Original Filing
  - ☒ Do Not Include on Original Filing
- Verify Contact Email Address**: A text input field.
- Address Line 1**: A text input field with a small icon on the right.
- Address Line 2**: A text input field with a small icon on the right.
- City/Province/Region**: A text input field with a small icon on the right.
- State**: A dropdown menu with "SELECT STATE" and a downward arrow.
- Zip/Postal Code**: Two adjacent text input fields, each with a small icon on the right.
- Country**: A dropdown menu with "United States" and a downward arrow.

At the bottom of the form, there are three buttons: a red "CANCEL" button on the left, and two blue buttons, "BACK" and "CONTINUE", on the right.

## 8.02 – FILING NUMBER LOOKUP

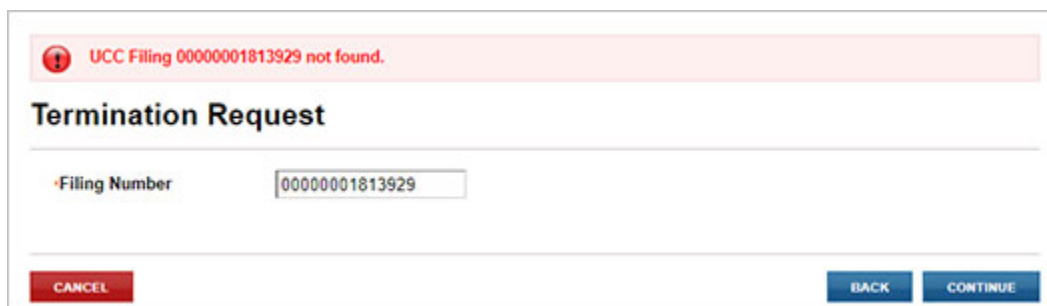
The user must indicate whether they are a debtor or secured party making the filing and enter the Filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.



The screenshot shows a web form titled "Termination Request". Below the title is a horizontal line. Underneath the line is the label "Filing Number" followed by an empty text input box. At the bottom of the form, there are three buttons: a red "CANCEL" button on the left, and two blue buttons, "BACK" and "CONTINUE", on the right.

### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.



The screenshot shows the same "Termination Request" form, but with an error message at the top. A red banner with a white exclamation mark icon contains the text "UCC Filing 00000001813929 not found." Below this banner, the "Filing Number" input box now contains the text "00000001813929". The "CANCEL", "BACK", and "CONTINUE" buttons remain at the bottom.

## 8.03 – AUTHORIZING PARTY

Terminations must be authorized by a secured party or debtor. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 9 of the UCC-3 form.

### Authorizing Party

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: John Doe Corporation  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

AUTHORIZING PARTY(S)		
#	Authorizing Party Type	Authorizing Party Name
<input type="checkbox"/>	Debtor	Jane Doe Corporation

CANCELBACKCONTINUE

## 8.04 – MISCELLANEOUS

The user has an opportunity to enter miscellaneous information. Doing so requires an addendum to be uploaded.


### Miscellaneous

Entering Miscellaneous information will require an addendum.

Miscellaneous:

Upload additional information:  SELECT UPLOAD

The file must be in PDF or TIFF format and cannot exceed 10 Megabytes. Adding a file will increase the number of pages in your submission.

☐ I'm not a robot 


CANCELBACKCONTINUE



## 8.05 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the Maryland State Department of Assessments and Taxation's Office. The user selects the appropriate **EDIT** button to change information previously entered.

### Summary

 Your UCC Termination Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 Main Street Anytown, MD 20106 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	jdoe@email.com
Contact Email To Appear on Filing:	NO

#### FILING REQUEST INFORMATION

EDIT REQUEST

Filing Number:	0000000181392939
Primary Secured Party Type:	Organization
Primary Secured Party:	John Doe Corporation

#### AUTHORIZING PARTY(S)

EDIT AUTHORIZING PARTY

Authorizing Party Type	Authorizing Party Name Type	Authorizing Party Name
Debtor	Organization	Jane Doe Corporation

Optional Filer Reference Data:

#### ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
UCC Continuation Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

## 8.06 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

**Cancel**

**Transaction Summary**

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

**Need Help?**  
Please complete the Customer Information Section.

## 8.07 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→

**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

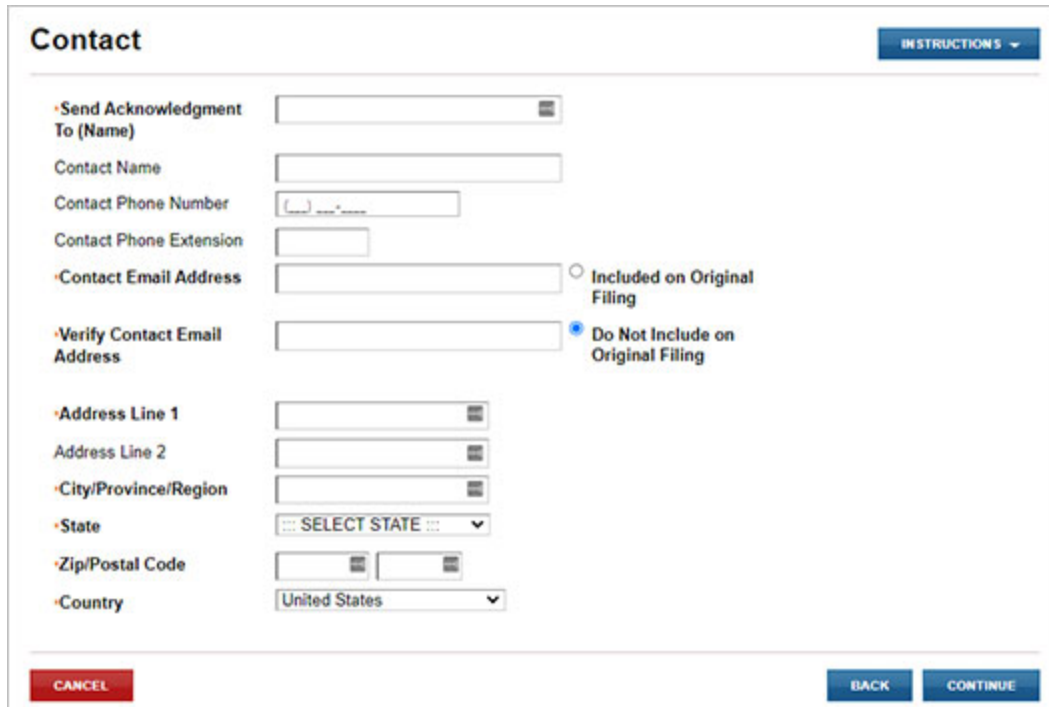
<div style="display: flex; align-items: center; justify-content: space-between;"><div style="width: 30%;"><div style="background-color: black; height: 15px; width: 100%; margin-bottom: 2px;"></div><div style="background-color: black; height: 15px; width: 100%; margin-bottom: 2px;"></div><div style="background-color: black; height: 15px; width: 100%; margin-bottom: 2px;"></div></div><div style="font-size: 24pt; font-weight: bold; margin-left: 10px;">UCC-3</div></div>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><b>UCC FINANCING STATEMENT AMENDMENT</b> FOLLOW INSTRUCTIONS</div><div style="width: 50%; text-align: right; font-size: 10pt;"><div style="display: flex; justify-content: space-between;"><div>MD DEPT. OF ASSESSMENTS &amp; TAXATION 160316-1548013 NS</div><div>Date: 3/16/2016 Time: 3:48 PM Page Count: 1 Pg Debtor Count: 0 Filing Fees: \$25.00 Electronic Records Access: \$0.00 Total: \$25.00 Order ID# 16161456</div></div></div></div>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</div><div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">B. E-MAIL CONTACT AT FILER (optional)</div><div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)</div><div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Richard The Third 234 Winslow Gardens  Annapolis, MD 21401</div></div><div style="width: 50%; text-align: right; font-size: 10pt;"><b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b></div></div>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450</div><div style="width: 50%;">1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13</div></div>	
2. <input checked="" type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement	
3. <input type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. <input type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law	
5. <input type="checkbox"/> <b>PARTY INFORMATION CHANGE:</b> Check one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <b>AND</b> Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b	
6. <b>CURRENT RECORD INFORMATION:</b> Complete for Party Information Change - provide only one name (6a or 6b)	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">6a. ORGANIZATION'S NAME</div><div style="width: 50%;">6b. INDIVIDUAL'S SURNAME</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 45%;">FIRST PERSONAL NAME</div><div style="width: 10%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div>	
7. <b>CHANGED OR ADDED INFORMATION:</b> Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">7a. ORGANIZATION'S NAME</div><div style="width: 50%;">7b. INDIVIDUAL'S SURNAME</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 45%;">INDIVIDUAL'S FIRST PERSONAL NAME</div><div style="width: 10%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div>	
7c. MAILING ADDRESS	
8. <input type="checkbox"/> <b>COLLATERAL CHANGE:</b> Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:	
9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:</b> Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input checked="" type="checkbox"/> and provide name of authorizing Debtor	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">9a. ORGANIZATION'S NAME Gordon</div><div style="width: 50%;">9b. INDIVIDUAL'S SURNAME</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div style="width: 45%;">FIRST PERSONAL NAME</div><div style="width: 10%;">ADDITIONAL NAME(S) INITIAL(S)</div><div style="width: 10%;">SUFFIX</div></div>	
10. <b>OPTIONAL FILER REFERENCE DATA:</b>	

(Rev. 04/20/11)

## 9.0 – UCC-5, INFORMATION STATEMENT

### 9.01 – CONTACT INFORMATION

The first screen is used to document the name and contact information of the individual or organization filing the financing statement. This is the information provided in Boxes A, B and C of the UCC-1 form. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, **Verify Contact Email Address**, **Address Line 1**, **City/Province/Region**, **State**, **Zip/Postal Code** and **Country** are all required fields.



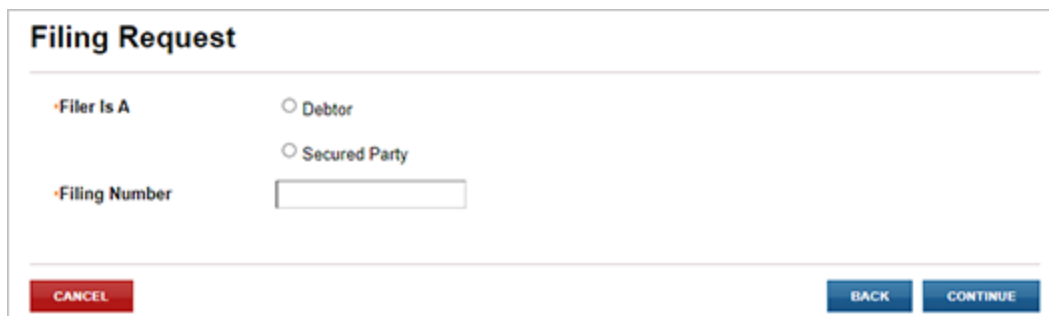
The 'Contact' form contains the following fields and options:

- Send Acknowledgment To (Name)**: Text input field.
- Contact Name**: Text input field.
- Contact Phone Number**: Text input field with a placeholder for area code and number.
- Contact Phone Extension**: Text input field.
- Contact Email Address**: Text input field.
- Verify Contact Email Address**: Text input field.
- Included on Original Filing**: Radio button option.
- Do Not Include on Original Filing**: Radio button option (selected).
- Address Line 1**: Text input field.
- Address Line 2**: Text input field.
- City/Province/Region**: Text input field.
- State**: Dropdown menu with 'SELECT STATE' as the placeholder.
- Zip/Postal Code**: Two text input fields for the zip code.
- Country**: Dropdown menu with 'United States' as the selected option.

Buttons: CANCEL, BACK, CONTINUE.

### 9.02 – FILING NUMBER LOOKUP

The user must indicate whether they are a debtor or secured party making the filing and enter the filing number of the original financing statement. Information provided on this screen is the same information provided in Boxes 1a, 1b and 5 of the UCC-3 form. Note that **Filer Is A** and **Filing Number** are required fields.



The 'Filing Request' form contains the following fields and options:

- Filer Is A**: Radio button options for **Debtor** and **Secured Party**.
- Filing Number**: Text input field.

Buttons: CANCEL, BACK, CONTINUE.

### CANNOT LOCATE FILING NUMBER

If the filing number entered cannot be located, the user will be provided a message that the filing number could not be located.

UCC Filing 000000018139293 not found.

### Filing Request

Filer Is A ☒ Debtor ☐ Secured Party

Filing Number

### 9.03 – INFORMATION STATEMENT

The user indicates on this page whether they believe the filing to be inaccurate or wrongly filed. Information provided on this screen is the same information provided in Boxes 1b, 2 and 3 of the UCC-5 form. Note that **Please Select** and **Date of Original Filing** are required fields.

### Information Statement

[INSTRUCTIONS](#)

Verify the following information is correct:

Filing Number: 0000000181392939  
Primary Secured Party: John Doe Corporation  
Primary Secured Party Type: Organization

If this information is not correct please [check the filing number entered](#).

Record Information To Which This Information Statement Relates

Please Select ☐ Record is inaccurate ☐ Record was wrongfully filed ☐ Record filed by person not entitled to do so

Basis for Claim

Date of Original Filing  (mm/dd/yyyy)

Time of Original Filing  (hh:mm) ☐ AM ☐ PM

### 9.04 – AUTHORIZING PARTY

Information Statement must be authorized by a party of record. The Authorizing Party page provides checkbox options to mark one or more parties as the authorizing party. This is the information provided in Section 5 of the UCC-5 form.

**Authorizing Party**

Verify the following information is correct:  
Filing Number: 0000000181392939  
Primary Secured Party: John Doe Corporation  
Primary Secured Party Type: Organization  
If this information is not correct please [check the filing number entered.](#)

AUTHORIZING PARTY(S)		
#	Debtor Type	Debtor Name
<input type="checkbox"/>	Organization	Jane Doe Corporation

CANCEL


BACK

CONTINUE

## 9.05 – FILING SUMMARY

The user has an opportunity to review and check data prior to submitting the filing to the State Department of Assessments and Taxation's Office. The user selects the **EDIT** button to change information previously entered.

### Summary

 Your Information Statement Filing is not yet complete. Please review the information below for accuracy.

#### CONTACT INFORMATION

EDIT CONTACT

Send Acknowledgment To (Name):	John Doe
Contact Address:	123 Main Street Anytown, MD 21401 Country: US
Contact Name:	
Contact Phone:	
Contact Phone Extension:	
Contact Email Address:	name@email.com
Contact Email To Appear on Filing:	NO

#### FILING REQUEST INFORMATION

EDIT REQUEST

Filer Is A:	Debtor
Filing Number:	0000000181392939
Primary Secured Party Type:	Organization
Primary Secured Party:	John Doe Corporation

#### AUTHORIZING DEBTOR(S)

EDIT AUTHORIZING PARTY

Debtor Type	Debtor Name
Organization	Jane Doe Corporation

#### INFORMATION STATEMENT

EDIT INFORMATION STATEMENT

Record To Which This Information Statement Relates:	
Record is inaccurate:	
Date of Original Filing:	3/3/2019
Time of Original Filing:	

Optional Filer Reference Data:

#### ITEMS SELECTED FOR PURCHASE

ITEM	# of Pages	PRICE
Information Statement Filing Fee	1	\$25.00
Total Amount to be Charged:		\$25.00

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE



## 9.06 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**1** Payment Type **2** Customer Info **3** Payment **4** Submit Payment

### Payment

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Complete all required fields [ \* ]

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email

Next >

**Payment Information**

Cancel

### Transaction Summary

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

### Need Help?

Please complete the Customer Information Section.

## 9.07 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the acknowledgment copy as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

This is the user's acknowledgment, and no printed acknowledgment will be mailed by the Maryland State Department of Assessments and Taxation's office. The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the acknowledgment copy.

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→


**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

 Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
<b>Total Amount Charged</b>		<b>\$25.00</b>

[BACK](#)

SAMPLE ACKNOWLEDGMENT COPY

<div style="display: flex; justify-content: space-between; align-items: center;"><div style="width: 30%;"><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div><div style="background-color: black; height: 15px; width: 100%;"></div></div><div style="width: 60%;"><h2 style="margin: 0;">UCC-5</h2></div></div>	
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><h3 style="margin: 0;">INFORMATION STATEMENT</h3><p style="margin: 0;">FOLLOW INSTRUCTIONS</p><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</div><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">B. E-MAIL CONTACT AT FILER (optional)</div><div style="border: 1px solid black; padding: 5px;">C. SEND ACKNOWLEDGMENT TO: (Name and Address)<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Horatio Hornblower 234 Winslow Gardens  Annapolis, MD 21401</div></div></div><div style="width: 50%; text-align: center; font-size: small;"><div style="writing-mode: vertical-rl; transform: rotate(180deg);">MD DEPT. OF ASSESSMENTS &amp; TAXATION</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">160316-1604034 NS</div><div style="display: flex; justify-content: space-around; margin-top: 10px;"><div>Date: 3/16/2016</div><div>Time: 4:04 PM</div><div>Page Count: 1 Pg</div><div>Debtor Count: 0</div><div>Filing Fees: \$25.00</div><div>Electronic Records Access: \$0.00</div><div>Total: \$25.00</div><div>Order ID# 16161542</div></div></div></div>	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. Identification of the RECORD to which this INFORMATION STATEMENT relates.</p><div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">1a. INITIAL FINANCING STATEMENT FILE NUMBER 0000000181417450</div></div><div style="width: 48%;"><p>1b. RECORD INFORMATION TO WHICH THIS INFORMATION STATEMENT RELATES</p></div></div>	
<p>2. Check <u>one</u> of these three boxes to indicate the claim made by this INFORMATION STATEMENT</p> <div style="margin-bottom: 5px;">2a. <input checked="" type="checkbox"/> RECORD IS INACCURATE. Enter in item 3 the basis for the belief by the Debtor of Record identified in item 5 that the RECORD identified in item 1 is inaccurate and indicate the manner in which the person believes the RECORD should be amended to cure the inaccuracy</div> <div style="margin-bottom: 5px;">2b. <input type="checkbox"/> RECORD WAS WRONGFULLY FILED. Enter in item 3 the basis for the belief by the Debtor of Record identified in item 5 that the RECORD identified in item 1 was wrongfully filed</div> <div style="margin-bottom: 5px;">2c. <input type="checkbox"/> RECORD FILED BY PERSON NOT ENTITLED TO DO SO. Enter in item 3 the basis for the belief by the Secured Party of Record that the person that filed the RECORD identified in item 1 was not entitled to do so under UCC Section 9-509</div>	
<p>3. Basis for claim of box checked in item 2</p> <p style="margin-left: 20px;">Wrong information</p>	
<div style="text-align: center; font-size: 2em; color: red; opacity: 0.5; transform: rotate(-45deg); pointer-events: none;">SAMPLE</div>	
<p>4. If this INFORMATION STATEMENT relates to a RECORD filed [or recorded] in a filing office described in Section 9-501(a)(1) and this INFORMATION STATEMENT is filed in such a filing office, provide the date [and time] on which the INITIAL FINANCING STATEMENT identified in item 1a above was filed [or recorded]</p> <div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>4a. DATE</p><div style="border: 1px solid black; padding: 2px;">3/1/2015</div></div><div style="width: 48%;"><p>4b. TIME</p></div></div>	
<p>5. NAME of PERSON filing this INFORMATION STATEMENT</p> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">5a. ORGANIZATION'S NAME Humpty</div> <div style="display: flex; justify-content: space-between;"><div style="width: 33%;"><p>OR</p><div style="border: 1px solid black; padding: 2px;">5b. INDIVIDUAL'S SURNAME</div></div><div style="width: 33%;"><div style="border: 1px solid black; padding: 2px;">FIRST PERSONAL NAME</div></div><div style="width: 33%;"><div style="border: 1px solid black; padding: 2px;">ADDITIONAL NAME(S)/INITIAL(S)</div></div><div style="width: 33%;"><div style="border: 1px solid black; padding: 2px;">SUFFIX</div></div></div>	
(Rev. 07/19/12)	

## 10.0 –SEARCH BY NAME

Searches are used to find initial financing statements, amendments, correction statements and lien statements for debtors. One of the key components to keep in mind while searching is the “through date.” The through date and time is “real time” – your search results will contain data meeting the criteria up to the date and time the search is submitted. The search results you receive will clearly display the through date.

### SEARCH LOGIC

Search results are created by applying search rules to the name presented for searching.

- There is no limit to the number of matches that may be returned in response to the search criteria.
- No distinction is made between upper- and lower-case letters.
- Punctuation marks and accents are disregarded.
- All spaces are disregarded.
- Searches for individuals should be entered as Last Name First Name Middle Name or Initial (i.e., Doe John)
- If a first name is provided, a match will be found on that with any middle name.
- If only an initial is provided for the first name, a match will be found on any first name starting with the same letter.
- If a middle name is provided for the middle name, a match will be found on the middle name.
- If only an initial is given for the middle name, a match will be found on any middle name starting with the same letter.

Examples are as follows:

A search for **Bank of America** will retrieve:

- Bank of America Home Loans
- Bank of America Corporate Center
- Bank of America N.A.

A search request for **Smith John A.** will retrieve:

- John A. Smith
- John Alexander Smith
- John Adam Smith

A search request for **Smith John** will retrieve:

- John Smith
- John A. Smith
- Johnnie Smith
- John Robert Smith

A search request for **Smith J M** will retrieve:

- John M. Smith
- John Michael Smith

- Johnnie Smith
- John Matthew Smith

Because search results are produced by applying standard RA9 search logic to the name presented to the filing officer, this provides consistent, reliable results and ensures that human judgment does not play a role in determining the results of the search.

Per RA9 Standards Section 503, jurisdictions perform UCC lien searches using the following logic:

There is no limit to the number of matches that may be returned in response to the search criteria.

- No distinction is made between upper- and lower-case letters.
- The character "&" (the ampersand) is deleted and replaced with the characters "and" each place it appears in the name.
- Punctuation marks and accents are disregarded. For purposes of this rule, punctuation and accents include all characters other than the numerals 0 through 9 and the letters A through Z (in any case) of the English alphabet.
- Words and abbreviations at the end of an organization name that indicate the existence or nature of the organization are "disregarded" as determined by the filing office's programming of its UCC information management system.
- The word "the" at the beginning of an organization debtor name is disregarded.
- All spaces are disregarded.
- For first and middle names of individual debtor names, initials are treated as the logical equivalent of all names that begin with such initials, and first name and no middle name or initial is equated with all middle names and initials. For example, a search request for "John A. Smith" would cause the search to retrieve all filings against all individual debtors with "John" or the initial "J" as the first name, "Smith" as the last name, and with the initial "A" or any name beginning with "A" in the middle name field. If the search request were for "John Smith" (first and last names with no designation in the middle name field), the search would retrieve all filings against individual debtors with "John" or the initial J as the first name, "Smith" as the last name and with any name or initial or no name or initial in the middle name field.
- If the name being searched is the last name of an individual debtor name without any first or middle name provided, the search will retrieve from the UCC information management system all unlapsed records or, if requested by the searcher, all active records that pertain to financing statements with individual debtor names that consist of such last name, any or no middle name or initial and no first name.
- After using the preceding rules to modify the name being searched, the search will retrieve from the UCC information management system all unlapsed records, or, if requested by the searcher, all active records that pertain to financing statements with debtor names that, after being modified as provided in this rule, exactly match the modified name being searched.

#### NOISE WORDS

AGENCY	LTD	PROFESSIONAL LIMITED LIABILITY
ASSOCIATION	LTEE	CO
ASSN	LIMITED LIABILITY COMPANY	PLLC
ASSOCIATES	LC	RAILROAD
ASSC	LLC	RR
ASSOC	LIMITED LIABILITY PARTNERSHIP	REAL ESTATE INVESTMENT TRUST
ATTORNEYS AT LAW	LLP	REIT
BANK	LIMITED PARTNERSHIP	REGISTERED LIMITED LIABILITY
NATIONAL BANK	LP	PARTNERSHIP
BUSINESS TRUST	MEDICAL DOCTORS PROFESSIONAL	RLLP
CHARTER	ASSOCIATION	SAVINGS ASSOCIATION
CHARTERED	MDPA	SA
COMPANY	MEDICAL DOCTORS PROFESSIONAL	SERVICE CORPORATION
CO	CORPORATION	SC
CORPORATION	MDPC	SOLE PROPRIETORSHIP
CORP	NATIONAL ASSOCIATION	SP
CREDIT UNION	NA	SPA
CU	PARTNERS	TRUST
FEDERAL SAVINGS BANK	PARTNERSHIP	TRUSTEE
FSB	PROFESSIONAL ASSOCIATION	AS TRUSTEE
GENERAL PARTNERSHIP	PROF ASSN	LLLP
GENPART	PA	LIMITED LIABILITY LIMITED
GP	PROFESSIONAL CORPORATION	PARTNERSHIP
INCORPORATED	PROF CORP	OD
INC	PC	PROFESSIONAL LIMITED LIABILITY
LIMITED		COMPANY

## 10.01 – SEARCH CRITERIA

The Search by Name option allows the user to look up and view information by debtor or secured party name.

The screenshot shows a web form titled "Name Search". At the top, a blue banner contains the text: "The responsibility for accurately searching names rests with the user. Search results are determined by the search criteria you choose. Therefore, if you do not see the results you expect, check the spelling of the information entered and/or choose different search criteria." To the right of the banner is a blue button labeled "INSTRUCTIONS" with a downward arrow. Below the banner, the form has several sections. The "Party" section has two radio buttons: "Debtor" (selected) and "Secured Party". The "Party Name" section has a text input field. Below the input field, there is a note: "Please enter a name using Last Name, First Name. (Example: Smith, John) Or you may search by an organization name. (Example: B & B Toys)". The "Filing Status" section has two radio buttons: "All Filings (Lapsed and Unlapsed)" (selected) and "Only Unlapsed Filings". The "Filing Type" section has two radio buttons: "All" (selected) and "UCC-1 Only". At the bottom of the form, there is a reCAPTCHA section with a checkbox labeled "I'm not a robot" and a reCAPTCHA logo. Below the reCAPTCHA section are three buttons: "CANCEL" (red), "BACK" (blue), and "SEARCH" (blue).

### PARTY SEARCH FILTER (1)

This option is used to allow the user to indicate if the party name being searched is a debtor or secured party. "Debtor" is selected by default.

### PARTY NAME

The user provides the party name they wish to search.

When searching for an individual, the user should enter the last name and then a first name or initial and optionally a middle name or initial. (Examples: Adams, John Q. or Adams, J Q or Adams, John Quincy)

When searching for an organization, the user should enter the name of the organization. (Examples: B and B Toys or B and B Toys)

### FILING STATUS FILTER (2)

This option is used to allow the user to indicate if the search results should contain both active and lapsed filings or only active filings which are unlapsed. "All Filings (Lapsed and Unlapsed)" is selected by default.

### FILING TYPE (3)

This option is used to allow the user to indicate if the search results should contain only initial financing statements (UCC-1) on record for the party name or all filings on record for the party name. "All" is selected by default.

## 10.02 – SEARCH RESULTS

If the search results include one or more matches, the application will display all matching party names on file for the search. The user has the option to select one or more matching names from the returned results.

### Name Search Result(s)

*If one or more of the names for which you are searching is displayed below, select the appropriate checkboxes to continue.  
If none of the names below match, see other options below for a "Nothing On File" response.*

NAME
<input type="checkbox"/> 1 ACK TEST
<input type="checkbox"/> 12 ACK TEST
<input type="checkbox"/> 3 21 2018 ACK DATE TEST
<input type="checkbox"/> ABC TESTING
<input type="checkbox"/> ACK TESTING MIN
<input type="checkbox"/> ADVANTAGE TESTING BT
<input type="checkbox"/> ATTACHMENTTESTMD
<input type="checkbox"/> AUTOTESTS04

1 2 3 4 5 6 7 8 9 10

Displaying results 1 - 20 of 197 | Page 1 of 10

OR — Exact match to party name not displayed above?  
Select ONE option below:

Selecting one of the options below will provide you with a response, certified or non-certified, stating no party names matched your search criteria.

"No Results Found" Document Request (Choose ONE):

☐ Non-Certified Search Response

☐ Certified Search Response


CANCEL

BACK

CONTINUE

If no matches are located, the user will be informed that no documents are on file that meet the search criteria.

### Search Result(s)

 No Party Name(s) matched your searched criteria.

Searched Details:-  
Name Type: Organization  
Party: Debtor  
Search Type: Non Standard Search  
Organization Name:  
Individual Last Name:  
Individual First Name:  
Individual Middle Name:  
Filing Status: All Filings (Lapsed & Unlapsed)  
Filing Type: All

"No Results Found" Document Request

☐ Non-Certified Search Response

☐ Certified Search Response

CANCEL

BACK

CONTINUE



## 10.03 – SELECT FILINGS FOR RETRIEVAL

If the search results included a debtor match, the user will be provided with records on file that match the search criteria used.

All UCC-1 filings and, if applicable, their UCC-3 and/or UCC-5 associated filings will display. The user has the option to request a search response only, copies of one or more documents only or both a search response and copies of documents.

**Search Result(s)**

**SELECT FILINGS FOR RETRIEVAL**

<input type="checkbox"/>	Filing Number	Filing Type	Filing Date	Lapse Date	Film	Folio	# of Pages
<input type="checkbox"/>	190305-1206000	UCC-1 Financing Statement	3/5/2019 12:06:00 PM	3/5/2024			

**DEBTOR/SECURED PARTY LIST**

Party Type	Party Name Type	Party Name
Debtor	Organization	1 ACK TEST
Secured Party	Organization	ASSIGNEE SECURED

No associated filing(s) found.

<input type="checkbox"/>	190328-1213000	UCC-1 Financing Statement	3/28/2019 12:13:00 PM	3/28/2024			
--------------------------	----------------	---------------------------	-----------------------	-----------	--	--	--

**DEBTOR/SECURED PARTY LIST**

Party Type	Party Name Type	Party Name
Debtor	Organization	1 ACK TEST
Secured Party	Organization	ASSIGNEE SECURED

No associated filing(s) found.

Total documents found: 2

**Certified Document Request**

☐ I want certified copies of the selected filings above

☐ I want a certified search response

**Information Options**

☒ **Search Response and Copies**  
Report of all filings associated with your search and copies of the filing.

☐ **Search Response Only**  
Report of all filings associated with your search.

☐ **Selected Copies Only**  
Copies of the selected filing(s) only.

**CANCEL**


**BACK**

**CONTINUE**

## 10.04 – ORDER SUMMARY AND CONTACT INFORMATION

The user has an opportunity to review and check the search request before submitting the request to the Maryland State Department of Assessments and Taxation's Office. The user must also provide their contact information and verify that the request information is correct. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, and **Verify Contact Email Address** are all required fields.

### Summary

 Your UCC Search Filing is not yet complete. Please review the information below for accuracy.

ITEMS SELECTED FOR PURCHASE	
Item	Price
Certified Search Response Report	\$7.00
<b>Total Amount to be Charged</b>	<b>\$7.00</b>

•Send Acknowledgment To (Name)

Contact Name

Contact Phone Number

( ) - - - - -

Contact Phone Extension

•Contact Email Address

•Verify Contact Email Address

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCEL

BACK

CONTINUE

## 10.05 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a Payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

**Cancel**

**Transaction Summary**

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

**Need Help?**  
Please complete the Customer Information Section.

## 10.06 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user will see a Payment Successful screen. The user will be able to view/print/save the search response and any requested document(s) as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the search response and document(s).



### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)

TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

## 11.0 –SEARCH BY FILING NUMBER

Each filing related to the Uniform Commercial Code, or a lien of record is given a filing number to be indexed and searchable. Filing numbers have evolved through various formats over the years. Effective July 1, 2001, Revised Article 9 changed the formats of filing numbers to be consistent nationwide; however, the filing numbers existing prior to that time were not updated to this format, so searchers need to be aware that filing numbers in older formats will exist as long as they remain on the system.


### 11.01 – SEARCH CRITERIA

The Search by Number option allows the user to look up and view information by any UCC-1 or UCC-3 filing number. A search for a UCC-1 filing will also display any associated records. A search for a UCC-3 filing will display the associated UCC-1 record and any additional UCC-3 or UCC-5 filings.

Enter up to six filing numbers below, each with a maximum of sixteen (16) digits.

### Filing Search

<input type="text"/>	UCC-1 ▼	<input type="text"/>	UCC-1 ▼
<input type="text"/>	UCC-1 ▼	<input type="text"/>	UCC-1 ▼
<input type="text"/>	UCC-1 ▼	<input type="text"/>	UCC-1 ▼

☐ I'm not a robot   
reCAPTCHA  
Privacy • Terms

CANCELBACKSEARCH

## 11.02 – SEARCH RESULTS AND SELECT FILINGS FOR RETRIEVAL

If the search result includes at least one match, the application will display all matching documents on file for the search. The user has the option to select one or more matching names from the returned results. All UCC-1 filings and, if applicable, their UCC-3 and/or UCC-5 associated filings will display. The user has the option to request a search response only, copies of one or more documents only, or both a search response and copies of documents.

### Search Result(s)

SELECT FILINGS FOR RETRIEVAL

☐

Filing Number	Filing Type	Filing Date	Lapse Date	Film	Folio	# of Pages
<input type="checkbox"/> 0000000181392939	UCC-1 Financing Statement	4/12/2010 8:54:00 AM	4/12/2025			

DEBTOR/SECURED PARTY LIST

Party Type	Party Name Type	Party Name
Debtor	Organization	John Doe Corporation
Secured Party	Organization	Jane Doe Corporation
Secured Party	Organization	James Doe Corporation

ASSOCIATED FILINGS

Filing Number	Filing Type	Filing Date	Film	Folio	# of Pages
<input type="checkbox"/> 1000362007725668	UCC-3 Continuation	3/24/2015 9:06:00 AM			
<input type="checkbox"/> 210726-1202000	UCC-3 Amendment	7/26/2021 12:02:00 PM			
<input type="checkbox"/> 211110-1135000	UCC-3 Amendment	11/10/2021 11:35:00 AM			
<input type="checkbox"/> 220118-1602000	UCC-3 Termination	1/18/2022 4:02:00 PM			

Total documents found: 15

Certified Document Request

☐ I want certified copies of the selected filings above

☐ I want a certified search response

Information Options

☒ Search Response and Copies  
Report of all filings associated with your search and copies of the filing.

☐ Search Response Only  
Report of all filings associated with your search.

☐ Selected Copies Only  
Copies of the selected filing(s) only.


CANCEL

BACK

CONTINUE

If no matches are located, the user will be informed that no documents are on file that meet the search criteria.

### Search Result(s)

 No UCC Filings matched your searched criteria.

**Filing Number** 000000018139293 returned no record(s). A printed copy of this page does not represent an official record of the Maryland Department of Assessments and Taxation Business Services. To order an official Search Response, select a document below.


\*No Results Found\* Document Request ☐ Non-Certified Search Response  
☐ Certified Search Response

CANCELBACKCONTINUE

### 11.03 – ORDER SUMMARY AND CONTACT INFORMATION

The user has an opportunity to review and check the search request before submitting the request to the Maryland State Department of Assessments and Taxation's Office. The user must also provide their contact information and verify that the request information is correct. Note that **Send Acknowledgment To (Name)**, **Contact Email Address**, and **Verify Contact Email Address** are all required fields.

### Summary

 Your UCC Search Filing is not yet complete. Please review the information below for accuracy.

ITEMS SELECTED FOR PURCHASE						
File ID	Filing Type	Filing Date	Film	Folio	# of Pages	Price
0000000181392939	UCC-1 Financing Statement	4/12/2010			3	
					Certified Search Response Report	\$7.00
					<b>Total Amount to be Charged</b>	<b>\$7.00</b>

•Send Acknowledgment To (Name)

Contact Name

Contact Phone Number

( ) - -

Contact Phone Extension

•Contact Email Address

•Verify Contact Email Address

**Please Confirm**

☐ I have verified that all of the above information is correct and complete.

CANCELBACKCONTINUE

## 11.04 – FILING FEES PAYMENT

### PAYMENT

When submitting the filing, you will be taken to a payment screen. Payment may be made by using any American Express, Visa, MasterCard or Discover debit or credit card.

**Payment**

Payment Type ✓

**Credit/Debit Card**

**Customer Information**

Country \*  
United States

First Name \*  
Last Name \*

Company Name

Address \*

Address 2

City \*  
State \*  
Select State

ZIP/Postal Code \*

Phone Number

Email

**Next >**

**Payment Information**

**Cancel**

**Transaction Summary**

UCC-1 Filing Fee	\$25.00
<b>Transaction Summary</b>	<b>\$25.00</b>

**Need Help?**  
Please complete the Customer Information Section.



## 11.05 – ACKNOWLEDGMENT COPY AND RECEIPT

After the filing is submitted and processed, the user sees a Payment Successful screen. The user will be able to view/print/save the search response and any requested document(s) as well as the receipt by selecting the appropriate link on this page.

**Note:** You must have Adobe Reader installed on your PC to view these documents.

The user will also receive an email confirmation and receipt of the filing. This email will contain the link to the search response and document(s).

**Payment Successful - Complete Transaction Below.**

Documents are PDF files. [Get the Adobe Acrobat Reader here.](#)

Viewing or printing your documents is as easy as...

**Step 1**  
[View/Print Documents](#)

→


**Step 2**  
[View/Print Receipt](#)

[RETURN TO MAIN MENU](#)

### SAMPLE RECEIPT

**Receipt** [Print Receipt](#)


TRANSACTION HISTORY	
File ID Number	160311-1218075
Acknowledge Copy To	test
Email Address	Test@test.com
Subscriber Account Name	John Doe
Subscriber Account Number	2692462
Filing Date/Time	3/11/2016 12:18 PM

 Your Subscriber account will reflect that the charge was made by Maryland.gov.

ITEMS PURCHASED		
Item	# of Pages	Price
UCC Assignment Filing Fee	1	\$25.00
Total Amount Charged		\$25.00

[BACK](#)

SAMPLE CERTIFIED DOCUMENT

UCC-1	
<b>UCC FINANCING STATEMENT</b> FOLLOW INSTRUCTIONS	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;"><p><b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b></p><p><b>B. E-MAIL CONTACT AT FILER (optional)</b></p><p><b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b></p><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Mr. Spock 234 Winslow Gardens Annapolis, MD 21401</div></div><div style="width: 35%; text-align: right;"><p><b>MD DEPT. OF ASSESSMENTS &amp; TAXATION</b></p><p>160316-1608298 NS</p><p>Lapse Date: 03/16/2021</p><p>Date: 3/16/2016 Time: 4:08 PM Page Count: 1 Pg Debtor Count: 1 Filing Fee: \$25.00 Electronic Records Access: \$0.00 <b>Total:</b> \$25.00 <b>Order ID#</b> 16161562</p></div></div>	
<b>CERTIFICATION</b>	
	
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	
<p><b>1. DEBTOR'S NAME:</b> Provide only <u>one</u> 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 <input checked="" type="checkbox"/> and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p>	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;"><p><b>1a. ORGANIZATION'S NAME</b></p><p>OR</p><p><b>1b. INDIVIDUAL'S SURNAME</b></p><p>Kirk</p></div><div style="width: 35%; text-align: right;"><p><b>FIRST PERSONAL NAME</b></p><p>James</p><p><b>ADDITIONAL NAME(S) INITIAL(S)</b></p><p>Tiberius</p><p><b>SUFFIX</b></p></div></div>	
<p><b>1c. MAILING ADDRESS</b></p> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">2345 Enterprise Drive</div><div style="width: 20%; text-align: right;"><b>CITY</b></div><div style="width: 10%; text-align: right;"><b>STATE</b></div><div style="width: 15%; text-align: right;"><b>POSTAL CODE</b></div><div style="width: 15%; text-align: right;"><b>COUNTRY</b></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Starfleet</div><div style="width: 10%; text-align: right;">MD</div><div style="width: 15%; text-align: right;">21401</div><div style="width: 15%; text-align: right;">US</div></div>	
<p><b>2. DEBTOR'S NAME:</b> Provide only <u>one</u> 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 <input type="checkbox"/> and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)</p>	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;"><p><b>2a. ORGANIZATION'S NAME</b></p><p>OR</p><p><b>2b. INDIVIDUAL'S SURNAME</b></p></div><div style="width: 35%; text-align: right;"><p><b>FIRST PERSONAL NAME</b></p><p><b>ADDITIONAL NAME(S) INITIAL(S)</b></p><p><b>SUFFIX</b></p></div></div>	
<p><b>2c. MAILING ADDRESS</b></p> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><b>CITY</b></div><div style="width: 10%; text-align: right;"><b>STATE</b></div><div style="width: 15%; text-align: right;"><b>POSTAL CODE</b></div><div style="width: 15%; text-align: right;"><b>COUNTRY</b></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;"></div><div style="width: 10%; text-align: right;"></div><div style="width: 15%; text-align: right;"></div><div style="width: 15%; text-align: right;"></div></div>	
<p><b>3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY):</b> Provide only <u>one</u> Secured Party name (3a or 3b)</p>	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;"><p><b>3a. ORGANIZATION'S NAME</b></p><p>Starfleet</p><p>OR</p><p><b>3b. INDIVIDUAL'S SURNAME</b></p></div><div style="width: 35%; text-align: right;"><p><b>FIRST PERSONAL NAME</b></p><p><b>ADDITIONAL NAME(S) INITIAL(S)</b></p><p><b>SUFFIX</b></p></div></div>	
<p><b>3c. MAILING ADDRESS</b></p> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">234 Winslow Gardens</div><div style="width: 20%; text-align: right;"><b>CITY</b></div><div style="width: 10%; text-align: right;"><b>STATE</b></div><div style="width: 15%; text-align: right;"><b>POSTAL CODE</b></div><div style="width: 15%; text-align: right;"><b>COUNTRY</b></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Annapolis</div><div style="width: 10%; text-align: right;">MD</div><div style="width: 15%; text-align: right;">21401</div><div style="width: 15%; text-align: right;">US</div></div>	
<p><b>4. COLLATERAL:</b> This financing statement covers the following collateral:</p> <p>Collateral</p>	
<p><b>5. Check <u>only</u> if applicable and check <u>only</u> one box. Collateral is</b> <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative</p>	
<p><b>6a. Check <u>only</u> if applicable and check <u>only</u> one box:</b> <input type="checkbox"/> Public Finance Transaction <input type="checkbox"/> Manufactured Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility</p>	
<p><b>6b. Check <u>only</u> if applicable and check <u>only</u> one box:</b> <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing</p>	
<p><b>7. ALTERNATIVE DESIGNATION (if applicable):</b> <input type="checkbox"/> Lessor/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailor <input type="checkbox"/> Licensee/Licensee</p>	
<p><b>8. OPTIONAL FILER REFERENCE DATA:</b></p>	

(Rev. 04/20/11)

SAMPLE SEARCH RESPONSE

**Maryland Department of Assessments and Taxation Business Services**

Search Response

Dated: 3/17/2016 10:05 AM

Search Criteria Entered:

Filing Number Search

Filing Number1 (UCC1): 160316-1608298

Filing Number2 (UCC3): 160316-1552417

Filing Number3 (UCC3): 160316-1600121

Filing Number4 (UCC3): 160316-1548013

Filing Number5 (UCC3): 160316-1557025

Filing Number6 (UCC1):



Filing Number	Filing Type	Filing Date	Lapse Date	Electronic Image Available
160316-1608298	UCC-1 Financing Statement	3/16/2016 4:08 P M	3/16/2021	Yes
000000181417450	UCC-1 Financing Statement	4/1/2011 10:48 A M	4/1/2021	Yes
160316-1604034	UCC-5 Information Statement	3/16/2016 4:04 P M	N/A	Yes
160316-1600121	UCC-3 Amendment	3/16/2016 4:00 P M	N/A	Yes
160316-1557025	UCC-3 Assignment	3/16/2016 3:57 P M	N/A	Yes
160316-1552417	UCC-3 Continuation	3/16/2016 3:52 P M	N/A	Yes
160316-1548013	UCC-3 Termination	3/16/2016 3:48 P M	N/A	Yes
160304-1413379	UCC-3 Termination	3/4/2016 2:13 P M	N/A	Yes

## APPENDIX A – INFORMATION YOU SHOULD KNOW

PDF Files: Acknowledgment copies, search responses and documents will be presented to the user as hyperlinks. The hyperlink will open a PDF file. The user then has the opportunity to print and/or save the file. When saving the file, be sure to include the “.pdf” extension on the file name.

“Back” Button on Browser: We suggest that the user utilize the “Back” button provided within the application rather than the Back button on the web browser.

Entering Data: Data entry is case sensitive. Therefore, the format used in keying information into the application is how the information will be stored.

Collateral Field: If a long collateral description is desired, the user first should type that description in a word processing program (i.e., Word or WordPerfect) or a text editor (i.e., Notepad or Wordpad). That description can then be copied and pasted into the collateral field.

Browser Auto Complete: Many web browsers have a feature called “Auto Complete” which is turned on by default. Auto Complete stores information you have previously entered and will provide you with a drop-down box from which you can select an item. If you wish to have this feature turned off, consult with your IT help desk.

Navigating Through the Screens: All of the screens have a tab order set within them so the user can simply “Tab” through each field. The user can also use the mouse to click into specific fields.

Radio Buttons: The radio buttons displayed in the application are part of the tab order for that screen. To change a selection from one radio button to another, use the arrow keys on the keyboard.

Check Boxes: To place a check mark in a check box on any given screen, the user simply needs to tab into that field and hit the spacebar on the keyboard.

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