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ETAS ID: TM577905

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

SUBMISSION TYPE:NEW ASSIGNMENTNATURE OF CONVEYANCE:SECOND LIEN PAYOFF LETTER AND LIEN RELEASESEQUENCE:2

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
MORGAN STANLEY SENIOR FUNDING, INC., AS COLLATERAL AGENT		04/23/2019	BANK: UNITED STATES

RECEIVING PARTY DATA

Name:	APPRISE SOFTWARE, INC.
Street Address:	3101 EMRICK BLVD.
City:	BETHLEHEM
State/Country:	PENNSYLVANIA
Postal Code:	18020
Entity Type:	Corporation: PENNSYLVANIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2104543	APPRISE

CORRESPONDENCE DATA

Fax Number: 2124464900

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Email: susan.zablocki@kirkland.com

Correspondent Name: SUSAN ZABLOCKI Address Line 1: Kirkland & Ellis LLP

Address Line 2:601 LEXINGTON AVENUEAddress Line 4:New York, NEW YORK 10022

NAME OF SUBMITTER:	Susan Zablocki
SIGNATURE:	/susan zablocki/
DATE SIGNED:	05/25/2020

Total Attachments: 33

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MORGAN STANLEY SENIOR FUNDING, INC. 1585 Broadway New York, New York 10036

Payoff Letter

April 23, 2019

Aptean, Inc. 4325 Alexander Drive, Suite 100 Alpharetta, Georgia 30022 Attention: Telukutla Reddy

Ladies and Gentlemen:

Reference is made to the Second Lien Credit Agreement dated as of December 20, 2016 among Aptean, Inc., a Delaware corporation, as Borrower, Aptean Parent Co S.à r.l., a Luxembourg société à responsabilité limitée, with registered office at 19, rue de Bitbourg, L-1273 Luxembourg, registered with the Luxembourg Trade and Companies Register under number B 169191, with a share capital of the Companies, as Holdings, the Guarantors party thereto and the Lenders and Agents party thereto, including us, Morgan Stanley Senior Funding, Inc., as Administrative Agent and as Collateral Agent (the "Credit Agreement"). Capitalized terms used herein that are defined in the Credit Agreement and not otherwise defined herein have the meanings given in the Credit Agreement.

You have delivered to us a notice of termination of all Commitments and prepayment of all outstanding Loans effective on April 23, 2019 (the "Payoff Date").

Subject to your acceptance of this Payoff Letter (this "Payoff Letter") by execution of a counterpart of this Payoff Letter in the space provided below, you and we (acting in our capacity as Administrative Agent and Collateral Agent) hereby confirm and agree as follows:

- 1. You hereby confirm and agree that on the Payoff Date:
- (a) all Commitments under the Credit Agreement will be automatically and irrevocably terminated and all obligations of the Lenders in respect of the Commitments or any extensions of credit under the Credit Agreement will be automatically and forever discharged; and
- (b) you will prepay in full all Obligations owing as of such time under the Credit Agreement and the other Loan Documents as set forth below (such amount, the "Payoff Amount"):

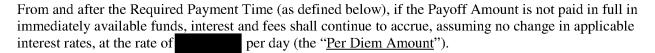
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Principal amount of outstanding Loans:

Accrued and unpaid interest on outstanding Loans:

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Payoff Amount:



2. If no later than 2:00 p.m., New York Time, on the Payoff Date (the "Required Payment Time") we receive, as Administrative Agent and Collateral Agent, payment of the Payoff Amount plus any applicable Per Diem Amount by wire transfer (together with notification to it of the applicable federal funds wire reference number) of freely and immediately available funds to:

Bank: CITIBANK, N.A.

NEW YORK, NY 10043

ABA Number: 021-000-089

Account Name: MORGAN STANLEY SENIOR FUNDING, INC.

Account Number: 406-99-776
Reference: Aptean, Inc.
Attention: Agency Team

, then pursuant to Section 10.02(c)(iii) of the Credit Agreement, the undersigned in its capacity as Collateral Agent will hereby:

- (A) release, absolutely, unconditionally, irrevocably and forever, all security interests and other liens granted to the undersigned as Collateral Agent under the Security Documents (the "Security Interests") and agrees that all of the Security Interests will automatically be, and hereby are, forever discharged;
- (B) authorize you (or any person or entity designated by you as your delegate (including Davies Ward Phillips & Vineberg LLP, Lawson Lundell LLP) for this purpose) to file the releases attached hereto as Exhibit A in respect of the recordation of intellectual property;
- (C) authorize you (or any person or entity designated by you as your delegate (including Davies Ward Phillips & Vineberg LLP, Lawson Lundell LLP) for this purpose) to file all Uniform Commercial Code termination statements and PPSA termination and discharge statements attached hereto as Exhibit B, it being understood and agreed that the discharges, terminations and releases described in Section 2(B) and this Section 2(C) shall be filed in order to evidence such discharge, termination and release of the Security Interests in public record; and
- (D) deliver to Milbank LLP, 55 Hudson Yards, New York, NY 10001-2163, Attention: Jonathan Edwards, the pledged collateral listed on <u>Annex I</u> attached hereto, and you hereby irrevocably authorize and direct us to make such delivery and agree that acknowledgement of receipt of such delivery by such counsel will discharge all of our obligations in respect of the redelivery of such pledged collateral to you.

You acknowledge and agree that our obligations under this Section 2 will not become effective or enforceable and the delivery provided for in clause (D) above will not be made or effective, in each case until the conditions set forth in this Section 2 are satisfied, and for this purpose time will be of the essence. Notwithstanding anything herein (or in any other document, communication or filing relating

hereto by any person) to the contrary, the Collateral Agent is authorizing solely the release of the Liens granted to it pursuant to the Loan Documents in connection with the Credit Agreement and not any other Liens or security interests at any time granted by any Loan Party in favor of Morgan Stanley Senior Funding, Inc. pursuant to any other document that is not a Loan Document or in favor of any other person.

- 3. The undersigned as Collateral Agent agrees that if you at any time determine and notify the undersigned as Collateral Agent in writing that the delivery of any additional instrument executed by the undersigned as Collateral Agent or any other additional steps are required to release, discharge or terminate (a) any Security Interest, (b) any other Lien securing the payment of Loans under the Credit Agreement granted to the undersigned as Collateral Agent pursuant to any security agreement, mortgage, deed of trust, deed to secure debt, collateral assignment or other grant of security (an "Other Lien") or (c) any notice, filing or registration of any Security Interest or Other Lien, the undersigned will, at your expense and as reasonably requested by you in such notice, execute and deliver (and if requested acknowledge) such other instruments effecting or confirming the release, discharge or termination of any Security Interest or Other Lien on the terms set forth in Section 2 hereof and otherwise in form and substance reasonably satisfactory to the undersigned, unless any of the foregoing actions would expose the Collateral Agent or any of its officers, directors, employees, agents, attorneys and other representatives to personal liability or would be contrary to applicable law or the Loan Documents.
- 4. The payment of the Payoff Amount (and any applicable Per Diem Amount) and the release of Security Interests and delivery of pledged collateral provided for herein will not discharge or in any manner affect or impair the enforceability of any outstanding Obligations and provisions that survive the termination of the Loan Documents, including those arising under Sections 2.12(a), 2.13, 2.15(c), 10.03(a) and 10.03(b) of the Credit Agreement.
- 5. You confirm and agree that the indemnification provisions set forth in Section 10.03(b) of the Credit Agreement will apply and be enforceable by us in respect of our execution and delivery of this Payoff Letter and the other instruments and agreements provided for herein, all actions taken or omitted by us and all claims based upon or arising in connection with any of the foregoing. We reserve the right to enforce, in respect of such execution, delivery, actions or claims, each and all of the rights, benefits, immunities, exculpatory provisions and indemnities enforceable by us as Administrative Agent and Collateral Agent under Section 10.03(b) and Article IX of the Credit Agreement.

6. [Reserved].

- 7. The Borrower acknowledges and agrees that its obligations and liabilities under the Credit Agreement and the other Loan Documents shall be reinstated with full force and effect, if at any time on or after the Payoff Date, all or any portion of the Payoff Amount (and any applicable Per Diem Amount) paid to the Lenders is voided or rescinded or must otherwise be returned by the Lenders to the Borrower or any other Credit Party upon such Borrower's or any other Credit Party's insolvency, bankruptcy or reorganization or otherwise, all as though such payment had not been made.
- 8. The parties hereto further agree that if the Payoff Amount (and any applicable Per Diem Amount) specified in Section 1 hereof is not received by the Administrative Agent on or prior to April 25, 2019, this Payoff Letter shall terminate and be of no further force and effect.
- 9. This Payoff Letter shall be governed by, and shall be construed and interpreted in accordance with, the internal laws of the State of New York. This Payoff Letter may be executed by the parties hereto in separate counterparts and the executed counterparts may be delivered by facsimile transmission, PDF or other electronic transmission, all of which will be enforceable as an original. The

provisions of Sections 1.03, 10.09 and 10.10 of the Credit Agreement (including, without limitation, waiver of the right to trial by jury) will apply with like effect to this Payoff Letter and any dispute arising hereunder.

[Remainder of page intentionally left blank]

Very truly yours,

MORGAN STANLEY SENIOR FUNDING, INC., as Administrative Agent and Collateral Agent

By:

Name: Lisa Hanson

Title: Vice President

Accepted and agreed to as of the date first written above:

APTEAN, INC.,

as Borrower

Bv:

Name: Telukutla Reddy

Title: Chief Executive Officer

APTEAN PARENT CO S.À R.L.,

as Holdings

By:

Name: Brian Niranjan Sheth

Title: Class A Manager

ACTIVPLANT CORPORATION
APPRISE SOFTWARE, INC.
APTEAN SYSTEMS, LLC
ASSETPOINT LLC
AXENTIA SOLUTIONS CORP.
CSI-2, INC.
GQ LIFE SCIENCES, INC.
INDUSTRI-MATEMATIK HOLDINGS, INC.
INDUSTRYBUILT SOFTWARE LTD.
INDUSTRYBUILT SOFTWARE CORP.
SUSITNA SOFTWARE INC.,

as Guarantors

Rv

Name: Telukutla Reddy

Title: Chief Executive Officer

first written above:
APTEAN, INC., as Borrower
By: Name: Telukutla Reddy Title: Chief Executive Officer
APTEAN PARENT CO S.À R.L., as Holdings
By: Name: Brian Niranjan Sheth Title: Class A Manager
ACTIVPLANT CORPORATION APPRISE SOFTWARE, INC. APTEAN SYSTEMS, LLC ASSETPOINT LLC AXENTIA SOLUTIONS CORP. CSI-2, INC. GQ LIFE SCIENCES, INC.
INDUSTRI-MATEMATIK HOLDINGS, INC. INDUSTRYBUILT SOFTWARE LTD. INDUSTRYBUILT SOFTWARE CORP. SUSITNA SOFTWARE INC., as Guarantors

Name: Telukutla Reddy
Title: Chief Executive Officer

By:

[Signature Page to Payoff Letter]

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	LOW INSTRUCTIONS	* 1				
	NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000	00000 0000 0000			
8.	E-MAIL CONTACT AT FILER (optional)	*******************				
•	jmurphy@cahill.com SEND ACKNOWLEDGMENT TO: (Name and Address)					
))	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
0000000	80 Pine Street New York, NY 10005					
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3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected			of Assignor	in item 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	at to the security interest(s) of Sec	ured Party	authorizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	***************************************	00000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
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	5a, ORGANIZATION'S NAME					
OR	8b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. 0	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform	nation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not or	nit, modify, or abbreviate any part of	the Debtor's name)
	7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME					
	NORWOLAND ADDITIONAL MARK (OWNERS) (C)					Tourny
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7e.	L MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
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i.	Indicate collateral:		inner			

	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	AMENDMENT: name of authoriz		name of As	signor, if this is an Assignme	nt)
11	9a. ORGANIZATION'S NAME.					
OR	Morgan Stanley Senior Funding, Inc., as (Collateral .		TADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		- ANOT HEROO	, , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·	
	OPTIONAL FILER REFERENCE DATA: bfor: Apprise International Sales Corporation - To be filed with	the Secretary o	of State of Delaware. "Secon	d Lient I	16270.1005) (01)	

Debtor: Apprise International Sales Corporation - To be filed with the Secretary of State of Delaware. [Second Lien] [16270.1005] [01]

International Association | Intern

UCC FINANCING STATEMENT AMENDMEN	-				
FOLLOW INSTRUCTIONS		_			
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345					
B. E-MAIL CONTACT AT FILER (optional)	***************************************				
jmurphy@cahill.com		80000000000000000000000000000000000000			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	q	D0000000			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		00000000			
80 Pine Street		50000000000000000000000000000000000000			
New York, NY 10005	ı	00000000			
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1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016 7925215, filed 12/21/2016		(or recorded) in the RE	AL ESTATE	INDMENT is to be filed [for a RECORDS m UCC3Ad) <u>and</u> provide Debto	•
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ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affected of			of Assignor	in item 9	000000000000000000000000000000000000000
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This Change affects Debtor or Secured Party of record Item 6 6. CURRENT RECORD INFORMATION: Complete for Party Information Chan	*********	***************************************	b, <u>and</u> item 7	to be deleted in it	em ba or bo
6a, ORGANIZATION'S NAME					
OR 85. INDIVIDUAL'S SURNAME.	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat 7a. ORGANIZATION'S NAME	tion Change - provide o	only <u>one</u> name (7a or 7b) (use exact, ful	name; do not or	nit, modify, or abbreviate any part of	the Debtor's name)
75. 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. COLLATERAL CHANGE: Also check one of these four boxes: ADI	O collateral	DELETE collateral	RESTATE 0	overed collateral A	SSIGN collateral
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI If this is an Amendment authorized by a DEBTOR, check here and provide if 19a. ORGANIZATION'S NAME. 19b. ORGANIZATION'S NAME.	MENDMENT: P		(name of As	signor, if this is an Assignmer	nt)
Morgan Stanley Senior Funding, Inc., as C	ollateral A	Agent			
OR ВЬ. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	, , , , , , ,	000000000000000000000000000000000000000		000000000000000000000000000000000000000	000000000000000000000000000000000000000
Debtor: Aptean Systems, LLC - To be filed with the Secretary of Sta	te of Delaware	***************************************			***************************************
FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDM	ENT (Form UC	International As C3) (Rev. 04/20/11)	sociatiRA		trators (IACA)

UCC FINANCING STATEMENT AMENDME	NT			
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000			
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com	***************************************			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		ondinance and in the state of t		
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street		500000000000000000000000000000000000000		
New York, NY 10005	,	2000000000		
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1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016 7925348, filed 12/21/2016	***************************************	(or recorded) in the RE	TEMENT AMENDMENT is to be filed EAL ESTATE RECORDS	
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CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of 8	Secured Party authorizing this Continu	uation Statement is
5. PARTY INFORMATION CHANGE:	one of these three be	ixes to:		
Check one of these two boxes.	HANGE name and/or a m 6a or 6b; <u>and</u> item	ddress: CompleteADD	name: Complete itemDELETE nar 7b, <u>and</u> item 7cto be deleted	ne: Give record name Lin item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information C [58. ORGANIZATION'S NAME]	hange - provide only	one name (6a or 6b)		
DR. ORGANIZATION & NAME				
OR 85. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	rmation Change - provide	only <u>one</u> name (7a or 7b) (use exact, fu	all name; do not omit, modify, or abbreviate any p	ant of the Debtor's name)
7a. ORGANIZATION'S NAME				
OR 75. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
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98. ORGANIZATION'S NAME Morgan Stanley Senior Funding, Inc., as		\gent		
Morgan Stanley Senior Funding, Inc., as 9b. INDIVIDUAL'S SURNAME			ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
Morgan Stanley Senior Funding, Inc., as	Collateral A		ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0761

UCC FINANCING STATEMENT AMENDMEN	magar.				
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000				
James P. Murphy (212) 701-3345	*****************	××××××××××××××××××××××××××××××××××××××			
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com		0000000			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street					
New York, NY 10005		000000			
		THE ABOVE SPA	CE IS FOR	R FILING OFFICE USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2018 3665326, Filed 05/30/2018		1b. This FINANCING STATE (or recorded) in the REAL		NDMENT is to be filed [for re RECORDS	cord]
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ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affected or			f Assignor	in item 9	000000000000000000000000000000000000000
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This Change affects Debtor or Secured Party of record Item 6 6. CURRENT RECORD INFORMATION: Complete for Party Information Chan	a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c7a or 7b,	<u>and</u> item 7c	to be deleted in ite	m 6a or 6b
6a. ORGANIZATION'S NAME	ge - provide only	one name (oa or ob)			
OR 8b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat	ior Changa provida	only one pares (7a or 7b) (yes exact full or	obsessessessessessessessessessessessesses	it readily or abbreviate any part of the	ne Debteris name)
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INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
***************************************		<u>20002</u> 00000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	
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Indicate collateral:					
000000000000000000000000000000000000000	000000000000000000000000000000000000000	10000000000000000000000000000000000000	300000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	MENDMENT: F name of authorizing		name of Ass	signor, if this is an Assignment)
98. ORGANIZATION'S NAME MORGAN Stanley Sonior Funding Inc. as C	allataval	Agant			
Morgan Stanley Senior Funding, Inc., as C	Oliateral A	·	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:			obaccaccaccaccac	***************************************	000000000000000000000000000000000000000
Debtor: Aptean Sapphire, LLC - To be filed with the Secretary of Sta	ate of Delawar	e. [Second Lien] [16270.10	05] [04]		

International AssociTRADEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	900				
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345					
B. E-MAIL CONTACT AT FILER (optional)	**************	0000000			
jmurphy@cahill.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
80 Pine Street New York, NY 10005		000000000			
New 101K, N 1 10005	1	10000000			
1a. INITIAL FINANCING STATEMENT FILE NUMBER		•8.000000000000000000000000000000000000	000000000000000000000000000000000000000	R FILING OFFICE USE NDMENT is to be filed ifor	
2016 7925629, filed 12/21/2016		(or recorded) in the	REAL ESTATE F		•
TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated v	vith respect to the security i	nterest(s) of Sec	sured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9 and also indicate affected or			ame of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law	ove with respect	to the security interest(s) o	f Secured Party	authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:		000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes: AND Check one CHAN This Change affects Debtor or Secured Party of record item 6s		ddress: CompleteAD	D name: Comple or 7b, <u>and</u> item 7c		Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	******	************************************			
OR 85. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	ori Change - provide	only <u>one</u> name (7a or 7b) (use exact	, full name; do not on	nit, modify, or abbreviate any part o	if 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. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE 0	overed collateral	ASSIGN collateral
Indicate collateral:					
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000		000000000000000000000000000000000000000
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM If this is an Amendment authorized by a DEBTOR, check here and provide n 9a. ORGANIZATION'S NAME	MENDMENT: Pame of authorizing		9b) (name of Ass	signor, if this is an Assignme	ent)
Morgan Stanley Senior Funding, Inc., as Co		·			
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Dishter: AssetPaint LLC. To be filed with the Secretary of State of D.	Alamaana 18 a	20nd Lion 112370 1005	. 10 <i><</i> 1	000000000000000000000000000000000000000	0000 ⁰ 0000000000000000000000000000000
Debtor: AssetPoint LLC - To be filed with the Secretary of State of De	***************************************	International.		(DEMARK ^{minis}	strators (IACA)
FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDME	:NT (Form UC	(C3) (INEV. 04/20/11)		045 FRAME:	

UC	C FINANCING STATEMENT AMENDMEN	DOGGE STATE OF THE				
FOL	LOWINSTRUCTIONS	000000000000000000000000000000000000000	9			
	NAME & PHONE OF CONTACT AT FILER (optional) Iames P. Murphy (212) 701-3345		2000			
8	E-MAIL CONTACT AT FILER (optional)	*****************	Q			
<u> </u>	imurphy@cahill.com					
000000000000000000000000000000000000000	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
000000	80 Pine Street New York, NY 10005		D000000			
0000000	THEN ROLLING IN R. LOUDS		0000000			
12	NITIAL FINANCING STATEMENT FILE NUMBER	000000000000000000000000000000000000000		****************	OR FILING OFFICE USE C	
	016 7925793, filed 12/21/2016		(or recorded) in the REAI	L ESTATE		•
2.	TERMINATION: Effectiveness of the Financing Statement identified abov Statement	re is terminated w	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	00000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7i For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected of			of Assigno	r in item 9	000000000000000000000000000000000000000
4.	CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	ove with respect	to the security interest(s) of Sec	cured Party	r authorizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
		g of these three bo GE name and/or a	ddress: Complete ADD nai	me: Comple	ete itemDELETE name: 0	Rive record name
****	his Change affects Debtor or Secured Party of record Firem 6	***************************************	***************************************	, <u>and</u> item 7	c to be deleted in its	em 6a or 6b
-	6a. ORGANIZATION'S NAME	g- p, 3	(0.000)			
OR	86. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIC	DNAL NAME(S)/INITIAL(S)	SUFFIX
7. 0	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	ion Change - provide o	only one name (7a or 7b) (use exact, full n	ame: do not o	mit, modify, or abbreviate any part of	he 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
7e.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8.	COLLATERAL CHANGE: Also check one of these four boxes:) collateral	DELETE collateral	RESTATE (covered collateral	SIGN collateral
1	Indicate collateral:					
0000000		000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AT this is an Amendment authorized by a DEBTOR, check here and provide r 9a. ORGANIZATION'S NAME	MENDMENT: P	•	name of As	signor, if this is an Assignmer	t)
	Morgan Stanley Senior Funding, Inc., as Co	ollateral A	Agent			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
20000000		***************************************		000000000000000000000000000000000000000	20000000000000000000000000000000000000	
	OPTIONAL FILER REFERENCE DATA: btor: Computron Software, LLC - To be filed with the Secretary o	f State of Dela	ware. [Second Lien] [1627	70.1005]	[06]	

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

UCC FINANCING STATEMENT AMENDM	ENT			
FOLLOW INSTRUCTIONS	000000000000000000000000000000000000000	00000		
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345		700 700 700 700		
B. E-MAIL CONTACT AT FILER (optional)	**********************			
jmurphy@cahill.com		900		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		00000000000		
80 Pine Street				
New York, NY 10005	,	90000		
E AMANANA				
1a. INITIAL FINANCING STATEMENT FILE NUMBER		0,000.00000000000000000000000000000000	SPACE IS FOR FILING OFFICE ATEMENT AMENDMENT is to be f	***************************************
2016 7926130, filed 12/21/2016		(or recorded) in the F	ATEMENT AMENDMENT IS TO BE T REAL ESTATE RECORDS nt Addendum (Form UCC3Ad) <u>and</u> provi	
TERMINATION: Effectiveness of the Financing Statement identifies statement	d above is terminated	with respect to the security in	nterest(s) of Secured Party authoriz	ting this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7 For partial assignment, complete items 7 and 9 and also indicate affections.			ime of Assignor in item 9	200200200200200000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement identic continued for the additional period provided by applicable law	000000000000000000000000000000000000000	***************************************	f Secured Party authorizing this Co	ntinuation Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
hanned	ock <u>one</u> of these three t			
This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item			Ename: Give record name leted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information	***************************************	***************************************		***************************************
5a. ORGANIZATION'S NAME				
OR 85. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITI/	AL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change - provide	e only <u>one</u> 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 THE WORK OF THE PROPERTY OF				
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
	T		Toning Toning Cons	
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
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8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
Indicate collateral:				
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 NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and pre- and pre- 			9b) (name of Assignor, if this is an A	ssignment)
9a. ORGANIZATION'S NAME.				
Morgan Stanley Senior Funding, Inc., a	c Callataral	Agent		
	S COMMENTAL STATES			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO		ADDITIONAL NAME(S)/INITIA	AL(S) SUFFIX
OR 9b. INDIVIDUAL'S SURNAME			ADDITIONAL NAME(S)/INITI/	AL(S) SUFFIX
OR 9b. INDIVIDUAL'S SURNAME 10. OPTIONAL FILER REFERENCE DATA:			ADDITIONAL NAME(S)/INITIA	AL(S) SUFFIX

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0765

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	
B. E-MAIL CONTACT AT FILER (optional) imurphy@cahill.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP	
80 Pine Street	
New York, NY 10005	
THE ABOVE SPACE IS FOR FILING OFF 12. INITIAL FINANCING STATEMENT FILE NUMBER 1b. This FINANCING STATEMENT AMENDMENT is to it.	***************************************
2016 7926825, filed 12/21/2016 Grecorded) in the REAL ESTATE RECORDS Filer: stack Amendment Addendum (Form UCC3Ad) and I	000000000000000000000000000000000000000
2. [] TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party auth Statement	rizing this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assigner in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this continued for the additional period provided by applicable law	Continuation Statement is
5. PARTY INFORMATION CHANGE: AND Check one of these has beyon: AND Check one of these three boxes to:	>00000000000000000000000000000000000000
CHANGE name and/or address: CompleteADD name: Complete itemDEL	TE name: Give record name deleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) [6a, ORGANIZATION'S NAME]	
OR 85. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/IN	TIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only gag name (7a or 7b) (use exact, full name; do not omit, modify, or abbrev 7a. ORGANIZATION'S NAME	te any part of the Debtor'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. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral Indicate collateral:	ASSIGN collateral
	50000050000000000000000000000000000000
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is a lifthis is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor [9a. ORGANIZATION'S NAME]	Assignment)
Morgan Stanley Senior Funding, Inc., as Collateral Agent	
OR 9b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/IN	TIAL(S) SUFFIX

UCC FINANCING STATEMENT AMENDMEN	ogra	_			
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345					
B. E-MAIL CONTACT AT FILER (optional) imurphy@cahill.com	***************************************				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street	-				
New York, NY 10005					
1a. INITIAL FINANCING STATEMENT FILE NUMBER	000000000000000000000000000000000000000	b. This FINANCING STATE	VENT AME	R FILING OFFICE USE O	000000000000000000000000000000000000000
2018 3164668, filed 05/09/2018	000000000000000000000000000000000000000	(or recorded) in the REAL Filer: <u>attach</u> Amendment Add		RECORDS m UCC3Ad) <u>and</u> provide Debtor	s name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated w	ith respect to the security interes	st(s) of Se	cured Party authorizing this T	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7th For partial assignment, complete items 7 and 9 and also indicate affected complete.			f Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	ove with respect	to the security interest(s) of Sec	ured Party	authorizing this Continuation	ı Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
CHECK ONE OF THESE IN O BOXES.	of these three bo GE name and/or a	ddress: Complete ADD nan	ne: Comple and item 7	te item DELETE name: G	Rive record name
CURRENT RECORD INFORMATION: Complete for Party Information Changes. ORGANIZATION'S NAME	***************************************	***************************************	and nem r	to be deleted in the	
OR 86, INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informati 7a. ORGANIZATION'S NAME	on Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full na	ame; do not or	nit, modify, or abbreviate any part of t	he Debtor'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
COLLATERAL CHANGE: Also check one of these four boxes:ADE	collateral	DELETE collateral F	RESTATE O	overed collateral As	SSIGN collateral
Indicate collateral:					
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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM If this is an Amendment authorized by a DEBTOR, check here and provide in [9a. ORGANIZATION'S NAME] 1. ORGANIZATION'S NAME	MENDMENT: Pr ame of authorizing		name of As	signor, if this is an Assignmen	t)
Morgan Stanley Senior Funding, Inc., as Co	ollateral A	gent			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON.		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: IndustryBuilt Software Ltd To be filed with the Secretary of	of State of Nels	ware. Second Lien] [167]	70.1005I	1091	000000000000000000000000000000000000000

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	IT				
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	000 00 00 00			
James P. Murphy (212) 701-3345 B. E-MAIL CONTACT AT FILER (optional)	************				
jmurphy@cahill.com		200000000			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	********	60000000			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		20000000			
80 Pine Street		60000000			
New York, NY 10005	ı	100000000			
			0000000000000000	R FILING OFFICE USE O	000000000000000000000000000000000000000
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016 7926916, filed 12/21/2016	000000000000000000000000000000000000000	(or recorded) in the REAL	ESTATE I	ENDMENT is to be filed [for ri RECORDS rm UCC3Ad) <u>and</u> provide Debtor	
IZ TERMINATION: Effectiveness of the Financing Statement identified ab Statement	ove is terminated	with respect to the security interes	st(s) of Sec	cured Party authorizing this 1	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected assignment.			f Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	i Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
CHECK ONE OF THESE INVO DOXES.	one of these three backers and/or	address: Complete ADD nan	ne: Comple and item 7	ste item DELETE name: G	Rive record name
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6a. ORGANIZATION'S NAME					
OR 85. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform	eation Change - provide	only one name (7a or 7b) (use exact full na	one: do not or	rit modify or abbreviate any part of t	he Debtor's name)
7a. ORGANIZATION'S NAME	g , ,				
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		TSTATE	POSTAL CODE	COUNTRY
TO MAILING ADDRESS	Cit		SIAIE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: A	DD collateral	DELETE collateral	RESTATE C	covered collateral As	SSIGN collateral
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS. If this is an Amendment authorized by a DEBTOR, check here and provide.			name of As	signor, if this is an Assignmen	t)
98. ORGANIZATION'S NAME Morgon Stanley Senior Funding Inc. 38.6	Callataval	Agant			
OR Morgan Stanley Senior Funding, Inc., as O	FIRST PERSO		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000	300000000000000000000000000000000000000	000000000000000000000000000000000000000
10. OPTIONAL FILER REFERENCE DATA: Polyters Redustri, Motomotik, Holdings, Inc., To be filed with the Se	aratary of Etat	of Delevere Cocord Fier	3 (16370	10051 1101	

Debtor: Industri-Matematik Holdings, Inc. - To be filed with the Secretary of State of Delaware. [Second Lien] [16270,1805] [10]

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	T				
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345		0000 0000 0000 0000 0000 0000 0000			
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		**************************************			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street New York, NY 10005					
		THE AROVE SE	ACE IS EO	R FILING OFFICE USE	ONII Y
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016 7927120, filed 12/21/2016	300000000000000000000000000000000000000	1b. This FINANCING STAT (or recorded) in the RE.	EMENT AME AL ESTATE	NDMENT is to be filed [for	record]
2. TERMINATION: Effectiveness of the Financing Statement identified abov Statement	e is terminated	with respect to the security inte	rest(s) of Se	cured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9 and also indicate affected complete.			of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law	eve with respec	t to the security interest(s) of S	ecured Party	authorizing this Continuatio	on Statement is
5. PARTY INFORMATION CHANGE: Chack one of those has been all these has been all the properties.	of these three t	onves to:			
CHECK ONE OF THESE INVO DOXES.	GE name and/or	address: Complete ADD n	ame: Comple /b, <u>and</u> item 7	te item DELETE name:	Give record name tem 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change	***************************************	***************************************	*************		***********
6a. ORGANIZATION'S NAME					
OR 85. INDIVIDUAL'S SURNAME.	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informati	on Change - provide	only one name (7a or 7b) (use exact, ful	name; do not or	nit, modify, or abbreviate any part o	f the Debtor's name)
7a. ORGANIZATION'S NAME					
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. COLLATERAL CHANGE: Also check one of these four boxes: ADD) collateral	DELETE collateral	RESTATE	overed collateral	SSIGN collateral
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN If this is an Amendment authorized by a DEBTOR, check here and provide n	MENDMENT:		one of As	signor, if this is an Assignme	nt)
98. ORGANIZATION'S NAME	alletare)	Agant			
Morgan Stanley Senior Funding, Inc., as Co	FIRST PERSO	·	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: Vadim Municipal Software Inc To be filed with the Secreta	ary of State of				300d0000000000000000000000000000000000
FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDME	ENT (Form U	OO3) (Nev. 04/20/11)		(DEMARK ^{minis} 945 FRAME: (

UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	900 900 900			
James P. Murphy (212) 701-3345 B. E-MAIL CONTACT AT FILER (optional)					
jmurphy@cahill.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street	Casa	000000000000000000000000000000000000000			
New York, NY 10005	-	020000000			
			00000000000000000	R FILING OFFICE USE O	000000000000000000000000000000000000000
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016132733, filed 12/21/2016	000000000000000000000000000000000000000	or recorded) in the REAL Filer: <u>attach</u> Amendment Ad	. ESTATE dendum (Fo	m UCC3Ad) <u>and</u> provide Debtor	s name in item 13
TERMINATION: Effectiveness of the Financing Statement identified statement	above is terminated v	with respect to the security intere	st(s) of Se	cured Party authorizing this I	ermination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 <u>and</u> also indicate affect			of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identifier continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of Sec	ured Party	authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:	. one of the southers is	000000000000000000000000000000000000000		000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes.	k <u>one</u> of these three b HANGE name and/or : em 6a or 6b; <u>and</u> item	address: Complete ADD nar	ne: Comple and item 7	te item DELETE name: G	ive record name m 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information C Sa. ORGANIZATION'S NAME	***************************************		***************************************		
OR 8b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info 7a. ORGANIZATION'S NAME	ormation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not or	nit, modify, or abbreviate any part of t	ne Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		TSTATE	TPOSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE o	covered collateral AS	SIGN collateral
Indicate collateral:					
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000		000000000000000000000000000000000000000	000000000000000000000000000000000000000
	S AMENDMENT: Fide name of authorizing		name of As	signor, if this is an Assignment	:)
98. ORGANIZATION'S NAME Morgan Stanley Senior Funding, Inc., as	Collateral	Agent			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	_	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:					
Debtor: ActivPlant Corporation - To be filed with the District of	Columbia, Recorc	ler of Deeds. [Second Lien]	[16270,1	005] [12]	

International AssociTRAPEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11) **REEL: 006945 FRAME: 0770**

UCC FINANCING STATEMENT AMENDA FOLLOW INSTRUCTIONS	MENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)	***************************************				
James P. Murphy (212) 701-3345	********************************	20000000000000000000000000000000000000			
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com		XXXXXX			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		2000			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP	washing the state of the state	000000000000000000000000000000000000000			
80 Pine Street		0000000			
New York, NY 10005	1	0000000			
		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE C	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016132734, filed 12/21/2016	000000000000000000000000000000000000000	(or recorded) in the REAL	ESTATE F	NDMENT is to be filed [for r RECORDS m UCC3Ad) <u>and</u> provide Debtor	
TERMINATION: Effectiveness of the Financing Statement identification Statement	ied above is terminated v	with respect to the security interes	st(s) of Sec	cured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate at			f Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement ider continued for the additional period provided by applicable law	rtified above with respect	to the security interest(s) of Secu	ured Party	authorizing this Continuation	n Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	900000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes.	heck <u>one</u> of these three b — CHANGE name and/or a	address: Complete ADD nam	ne: Comple	te item DELETE name: 0	Sive record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Informati	item 6a or 6b; and item		<u>and</u> item 7d	to be deleted in ite	em 6a or 6b
Sa. ORGANIZATION'S NAME	on Ghange - provide only	one name (oa o: ob)			
OR INDIVIDUALIS GUIDANNI-			~ , ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
8b. INDIVIDUAL'S SURNAME	FIRST PERSON	VAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Par	ty Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	me; do not on	it, modify, or abbreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
			T		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	ESTATE O	overed collateral A	SSIGN collateral
Indicate collateral:	CIII ADD CONSICIAI	L. J SECENCIO CONTROL L. J. N.	(20 17 (12 0	L. J.	Seroit odilateisi
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	THIS AMENDMENT: F provide name of authorizing		name of Ass	signor, if this is an Assignmer	rt)
98. ORGANIZATION'S NAME Morgan Stanley Senior Funding, Inc.,	as Collateral	 Loent			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
			000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
10. OPTIONAL FILER REFERENCE DATA: Debter: Antenn County Composition - To be Slad with the Di	strict of Cohembia D	ecorder of Deeds (Second)	lion 1 114	770 10051 1121	nnnnn444444999999999

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	ENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	99			
James P. Murphy (212) 701-3345					
B. E-MAIL CONTACT AT FILER (optional) imurphy@cahill.com		XXXXX			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
80 Pine Street		0000000			
New York, NY 10005	1	999999			
		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016132738, filed 12/21/2016		(or recorded) in the REAL	. ESTATE	ENDMENT is to be filed [for n RECORDS rm UCC3Ad) <u>and</u> provide Debtor	•
2. TERMINATION: Effectiveness of the Financing Statement identified Statement	l above is terminated v	with respect to the security intere	st(s) of Se	cured Party authorizing this 1	ermination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affer.			f Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law	ied above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes: AND Che	ck <u>one</u> of these three b CHANGE name and/or:		ne: Comple	ete item DELETE name: G	live record name
	item 6a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c7a or 7b,	and item 7	c to be deleted in ite	
CURRENT RECORD INFORMATION: Complete for Party Information Sa. ORGANIZATION'S NAME	Gnange - provide only	one harne (sa or sb)			
OR					
86. INDIVIDUAL'S SURNAME	FIRST PERSON	VAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party 7a. ORGANIZATION'S NAME	nformation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not o	nit, modify, or abbreviate any part of t	he Debtor's name)
OR					
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDEREDIALIO ADDITIONAL MARIE (OMBUTIALIO)					Louisely
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE O	overed collateral AS	SIGN collateral
Indicate collateral:				1	
000000000000000000000000000000000000000	000000000000000000000000000000000000000	10000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and pre- 	IIS AMENDMENT: Fovide name of authorizi	,	name of As	signor, if this is an Assignmen	t)
9a. ORGANIZATION'S NAME.					
Morgan Stanley Senior Funding, Inc., a		· · ·	-1		
95. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	j 	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	
Debtor: Aptean Parent Co S.à r.l To be filed with the District	of Columbia, Reco	order of Deeds. [Second Lie	n] [1627(0.1005] [14]	

U	CC FINANCING STATEMENT AMENDMEN					
2000000	LOW INSTRUCTIONS	000000000000000000000000000000000000000	000			
Α.	NAME & PHONE OF CONTACT AT FILER (optional)		00000			
8	James P. Murphy (212) 701-3345 E-MAIL CONTACT AT FILER (optional)	************				
8	imurphy@cahill.com		98 90 90			
•	SEND ACKNOWLEDGMENT TO: (Name and Address)					
00000000000	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
000000	80 Pine Street		XX			
000000	New York, NY 10005		300 000 000			
000000			000			
		000000000000000000000000000000000000000		00000000000000000	R FILING OFFICE USE O	
	initial financing statement file number)18046843, filed 05/10/2018	***************************************	(or recorded) in the REAL	ESTATE I	ENDMENT is to be filed [for in RECORDS in UCC3Ad) <u>and</u> provide Debtor	-
2.	TERMINATION: Effectiveness of the Financing Statement identified abo Statement	ve is terminated	with respect to the security interes	st(s) of Sec	cured Party authorizing this	Termination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected			f Assignor	in item 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	bove with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuatio	n Statement is
5.	PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	theck one of these two boxes: AND Check on	<u>ie</u> of these three b				
T	his Change affects Debtor or Secured Party of record items	NGE name and/or 6a or 6b; <u>and</u> item	address: Complete ADD nan 7a or 7b <u>and</u> item 7c 7a or 7b,	ne: Comple and item 7	te item DELETE name: 6 to be deleted in it	
6.	CURRENT RECORD INFORMATION: Complete for Party Information Chai	nge - provide only	one name (6a or 6b)			
	6a, ORGANIZATION'S NAME					
OR	8b. INDIVIDUAL'S SURNAME	FIRST PERSO	ALAN ANAME	Lannino	NAL NAME(S)/INITIAL(S)	Tsuffix
	SOLITIZISTONE O CONTINUE.	I INO! I ENGO	AUT IAUIGIT	1/20110	THE TENSELOYMAN TIPLE(O)	JOSHIA
7. (I CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informa	etion Change - provide	only one name (7a or 7b) (use exact, full na	me: do not or	rit, modify, or abbreviate any part of	the Debtor's name)
	7a. ORGANIZATION'S NAME		7			
ΩB						
OR	7b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					Tsuffix
	INDIVIDUAL O ADDITIONAL NAME(O)/INCIAL(O)					GOLLIN
7c.	MAILING ADDRESS	CITY		ISTATE	POSTAL CODE	COUNTRY
9	COLLATERAL CHANGE: Also check one of these four boxes: AD	D collateral	DELETE collateral	OCCUPATE O	overed collateral A	SSIGN collateral
O. [Indicate collateral:	L) Collected		COIAIL	Overed CollateralA	SOIGH Collaterar
	malous solution.					
9. 1	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT:	Provide only <u>one</u> name (9a or 9b) (r	name of As	signor, if this is an Assignmer	
	fithis is an Amendment authorized by a DEBTOR, check here and provide	name of authorizi				
	9a. ORGANIZATION'S NAME Morgan Stanlay Saniar Dunding Inc. as C	Metamal	Agant			
OR	Morgan Stanley Senior Funding, Inc., as C	OHATERAL .	·~	TADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	BILLING PRODUCT OF SOUTHWILE	FINOTEROU	YAL IVANIC	סוווטפא	PARE PARE (O) IN PAE (O)	SUFFIX
10	 OPTIONAL FILER REFERENCE DATA:	; 000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
1U.	OF THOUGHT HELD MEDICAND DISTRICT.		- M		61 C##0 100#1 Y1#1	

Debtor: AXENTIA SOLUTIONS CORP. - To be filed with the District of Columbia, Recorder of Deeds. [Second Lien] [16270.1005] [15]

International AssociTRAPEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11) **REEL: 006945 FRAME: 0773**

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	C FINANCING STATEMENT AMENDMEN	VT.				
20000000	NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	200g			
0000	James P. Murphy (212) 701-3345	**********************				
ĕ	E-MAIL CONTACT AT FILER (optional) murphy@cahill.com		800000			
•	SEND ACKNOWLEDGMENT TO: (Name and Address)					
Name -	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
000000	80 Pine Street		2000			
00000	New York, NY 10005	1	000000			
000000			THE ABOVE SPA	CE IS FO	R FILING OFFICE USE C	NLY
	nitial financing statement file number 117082077, filed 07/26/2017	000000000000000000000000000000000000000	(or recorded) in the REAL	. ESTATE	ENDMENT is to be filed [for r RECORDS m UCC3Ad) <u>and</u> provide Debtor	
2.	TERMINATION: Effectiveness of the Financing Statement identified abstatement	ove is terminated	with respect to the security intere	st(s) of Sec	cured Party authorizing this	Termination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected			of Assignor	in item 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	0000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	THE ON THE OF THE SE TWO DOXES.	<u>ine</u> of these three b NGE name and/or	address: Complete ADD nar	ne: Comple	ite itemDELETE name: 0	Sive record name
*****	his Change affects Debtor of Secured Party of record items: CURRENT RECORD INFORMATION: Complete for Party Information Che	***************************************		and item 7	cto be deleted in ite	em 6a or 6b
0. (68. ORGANIZATION'S NAME	ange - provide only	one name (oa o: ob)			
OR						
	6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. 0	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a. ORGANIZATION'S NAME	nation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not or	nit, modify, or abbreviate any part of	the Debtor's name)
	78. 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.	COLLATERAL CHANGE: Also check one of these four boxes: Also	DD collateral	DELETE collateral F	RESTATE O	overed collateral A	SSIGN collateral
1	Indicate collateral:		1			
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	hereni	AMENDMENT: It is name of authorizing		name of As	signor, if this is an Assignmer	rt)
	98. ORGANIZATION'S NAME Morgan Stanley Senior Funding, Inc., as (Collateral .	Agent			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSOI		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
20000000		200000000000000000000000000000000000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	000000000000000000000000000000000000000
	OPTIONAL FILER REFERENCE DATA: http:///PNM.Software.S.A.IncTo be filed with the District of Col	lumbia Dacaud	ar of Boads	116770 16	ins) (16)	

International AssociTRAPEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

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UCC FINANCING STATEMENT AMENDMI FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	2000		
James P. Murphy (212) 701-3345		9999999		
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com		20000000		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		addenses		
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP				
80 Pine Street New York, NY 10005		22000000		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	19501999		
1a. INITIAL FINANCING STATEMENT FILE NUMBER	00000000000000000000000000000000000000	&	CE IS FOR FILING OFFIC WENT AMENDMENT is to be	***************************************
2018046851, filed 05/10/2018		(or recorded) in the REAL		
TERMINATION: Effectiveness of the Financing Statement identified Statement	above is terminated w	000000000000000000000000000000000000000	000000000000000000000000000000000000000	***************************************
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 and also indicate affections.			of Assignor in item 9	200000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement identificantinued for the additional period provided by applicable law	ed above with respect	to the security interest(s) of Sec	ured Party authorizing this C	ontinuation Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes.	ck <u>one</u> of these three bo CHANGE name and/or a tem 6a or 6b; <u>and</u> item 7	ddress: Complete ADD nan	ne: Complete item DELET	TE name: Give record name leleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information	***************************************	***************************************	and remite [] to be o	cieted in item oa or op
6a, ORGANIZATION'S NAME				
OR 85. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INIT	TIAL(S) SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In 7a. ORGANIZATION'S NAME	iformation Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full na	ame; do not omit, modify, or abbreviat	e any part of the Debtor's name)
OR 75. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7e. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
200000000000000000000000000000000000000		200000000000000000000000000000000000000		***************************************
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	DELETE collateralF	RESTATE covered collateral	ASSIGN collateral
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	
 NAME OF SECURED PARTY OF RECORD AUTHORIZING TH If this is an Amendment authorized by a DEBTOR, check here and pro 	IS AMENDMENT: P		name of Assignor, if this is an	Assignment)
9a. ORGANIZATION'S NAME.				
Morgan Stanley Senior Funding, Inc., as				
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INIT	TIAL(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA:		***************************************	000000000000000000000000000000000000000	X0000000000000000000000000000000000000

Debtor: INDUSTRYBUILT SOFTWARE CORP. - To be filed with the District of Columbia, Recorder of Deeds. [Second Lien] [16270.1005] [17]

International AssociTRADEMIA: Ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

	C FINANCING STATEMENT AMENDME	NT				
\$000000000	AME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	9000 8			
J	ımes P. Murphy (212) 701-3345	**********************				
ŏ	MAIL CONTACT AT FILER (optional) nurphy@cahill.com		800000			
	END ACKNOWLEDGMENT TO: (Name and Address)					
	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
0000000	80 Pine Street		2000			
000000	New York, NY 10005	1	50000000			
			THE ABOVE SPA	CE IS FO	R FILING OFFICE USE C	NLY
	itial financing statement file number 7082078, filed 07/26/2017		(or recorded) in the REAL	. ESTATE I	:NDMENT is to be filed [for r RECORDS m UCC3Ad) <u>and</u> provide Debtor	
2. 🗾	TERMINATION: Effectiveness of the Financing Statement identified at Statement	bove is terminated	with respect to the security intere	st(s) of Sec	cured Party authorizing this	Termination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a o For partial assignment, complete items 7 and 9 <u>and</u> also indicate affecte			of Assignor	in item 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	00000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	CH	one of these three b ANGE name and/or	address: CompleteADD nar	ne: Comple	te itemDELETE name: 0	Give record name
***********	s Change affects Debtor or Secured Party of record Liter JRRENT RECORD INFORMATION: Complete for Party Information Cf	***************************************		and item 7	cto be deleted in its	em 6a or 6b
	a. ORGANIZATION'S NAME	- Arigo provide only	one name (ea e. eb)			
OR -						T2::::::::::
ľ	b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
	IANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor	mation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not or	nit, modify, or abbreviate any part of	the Debtor's name)
7	a. ORGANIZATION'S NAME					
OR 7	b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. M	AILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
x0000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000				
8	COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: <u>I</u> A Indicate collateral:	ADD collateral	DELETE collateral F	RESTATE o	overed collateral A	SSIGN collateral
	marca conactor.					
9. NA	ME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENDMENT:	Provide only <u>one</u> name (9a or 9b) (i	name of As	signor, if this is an Assignmer	it)
	nis is an Amendment authorized by a DEBTOR, check here and provic a. ORGANIZATION'S NAME	de name of authorizi	ng Debtor			
	Morgan Stanley Senior Funding, Inc., as	Collateral .	Agent			
	b. INDIVIDUAL'S SURNAME	FIRST PERSO		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
X000000000	***************************************	000000000000000000000000000000000000000				000000000000000000000000000000000000000
	PTIONAL FILER REFERENCE DATA:	Calumbia Desa	rdor of Boods (Second Vic-	N 116270	1885) (19)	

	CC FINANCING STATEMENT AMENDMEI	VT				
20000000	NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	200g			
	James P. Murphy (212) 701-3345					
8	E-MAIL CONTACT AT FILER (optional)		gg			
	jmurphy@cahill.com SEND ACKNOWLEDGMENT TO: (Name and Address)					
) .	James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		***************************************			
000000	80 Pine Street		000000			
00000	New York, NY 10005		5000000 1000000			
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	initial financing statement file number 18046859, filed 05/10/2018	000000000000000000000000000000000000000	(or recorded) in the REAL	. ESTATE	ENDMENT is to be filed [for r RECORDS m UCC3Ad) <u>and</u> provide Debtor	
2.	/ TERMINATION: Effectiveness of the Financing Statement identified ab Statement	ove is terminated	with respect to the security intere	st(s) of Se	cured Party authorizing this	Termination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected			of Assignor	in item 9	000000000000000000000000000000000000000
4.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	n Statement is
5.	PARTY INFORMATION CHANGE:					
	CH/	one of these three b ANGE name and/or	address: CompleteADD nar	ne: Comple and item 7	te item DELETE name: C	Sive record name
*****	CURRENT RECORD INFORMATION: Complete for Party Information Ch	***************************************		, <u>any</u> nem <i>i</i>	c To be deleted in the	311 68 01 60
	6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·	·			
OR		Trina Tarana		1,00000	A. A. A. A. A. C. (2)	O I I I I I I I I I I I I I I I I I I I
	8b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. 0	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Complete for Assignment Complete for Complet	nation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not o	nit, modify, or abbreviate any part of	the Debtor's name)
	78. ORGANIZATION & NAIME					
OR	7b. INDIVIDUAL'S SURNAME					
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7e	MAILING ADDRESS	CITY		ISTATE	[POSTAL CODE	COUNTRY
		000				
8.	COLLATERAL CHANGE: Also check one of these four boxes:	DD collateral	DELETE collateral	RESTATE O	overed collateral A	SSIGN collateral
1	Indicate collateral:		1			
	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS			name of As	signor, if this is an Assignmer	rt)
11	this is an Amendment authorized by a DEBTOR, check here and provid 9a. ORGANIZATION'S NAME	e name of authorizi	ng Debioi			
6.7	Morgan Stanley Senior Funding, Inc., as G	Collateral .	Agent			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSOI		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
20000000		000000000000000000000000000000000000000	***************************************		***************************************	000000000000000000000000000000000000000
	OPTIONAL FILER REFERENCE DATA: http://www.susutna.sorthwa.de/ins/to-ho-blod-with-the-Distric	t of Columbia	Recorder of Reads - (Cocand	Tion 111	(270 1005) (10)	

International AssociTRAPEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

UCC FINANCING STATEMENT AMENDME					
A. NAME & PHONE OF CONTACT AT FILER (optional)	000000000000000000000000000000000000000	0000 000 000			
James P. Murphy (212) 701-3345	***************************************				
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com		000 000			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		000000000000000000000000000000000000000			
80 Pine Street		5000000			
New York, NY 10005	3	000000			
		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 2016132791, filed 12/21/2016	300000000000000000000000000000000000000	(or recorded) in the REAL	. ESTATE	ENDMENT is to be filed [for re RECORDS rm UCC3Ad) <u>and</u> provide Debtor's	
 TERMINATION: Effectiveness of the Financing Statement identified Statement 	above is terminated v	with respect to the security interes	st(s) of Se	cured Party authorizing this T	ermination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 <u>and</u> also indicate affectives.			of Assignor	in item 9	000000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement identificant continued for the additional period provided by applicable law	ed above with respec	t to the security interest(s) of Sec	ured Party	authorizing this Continuation	Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	0000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	ck <u>one</u> of these three b CHANGE name and/or		ne: Comple	ete itemDELETE name: G	amen hannar avit
This Change affects Debtor or Secured Party of record	tem 6a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c7a or 7b,	and item 7	c to be deleted in ite	
CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME	Change - provide only	one name (6a or 6b)			
OR 85. INDIVIDUAL'S SURNAME.	FIRST PERSOR	NAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information (Complete for Assignment or Party	formation Change - provide	only <u>one</u> name (7a or 7b) (use exact, full na	ame; do not o	mit, modify, or abbreviate any part of t	he Debtor's name)
OR 75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7e. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
***************************************		200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	***************************************
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral F	RESTATE	covered collateral AS	SSIGN collateral
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	IS AMENDMENT: F	Provide only <u>one</u> name (9a or 9b) (i	name of As	signor, if this is an Assignment	00000000000000000000000000000000000000
	vide name of authorizi				
Morgan Stanley Senior Funding, Inc., as	Collateral A	Agent			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	·	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
			x0000000000000000000000000000000000000	000000000000000000000000000000000000000	
10. OPTIONAL FILER REFERENCE DATA: Debtor: Yaletown Acquiror S.à r.i To be filed with the District	of Columbia, Rec	order of Deeds. Second Lie	enj [1627	0.1005] [20]	

UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS	ENT			
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000	0000		
B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	······			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street	CAMARA	000000000000000000000000000000000000000		
New York, NY 10005	1	000000000000000000000000000000000000000		
		THE ABOVE	SPACE IS FOR FILING OFFICE USI	E ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0602016–10629, filed 12/22/2016		(or recorded) in the l	ATEMENT AMENDMENT is to be filed [fi REAL ESTATE RECORDS nt Addendum (Form UCC3Ad) <u>and</u> provide Del	
TERMINATION: Effectiveness of the Financing Statement identified Statement	l above is terminated	000000000000000000000000000000000000000	***************************************	000000000000000000000000000000000000000
ASSIGNMENT (full or partial): Provide name of Assignee in item 7. For partial assignment, complete items 7 and 9 and also indicate affer.			ame of Assignor in item 9	000000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement identificantinued for the additional period provided by applicable law	000000000000000000000000000000000000000	000000000000000000000000000000000000000	f Secured Party authorizing this Continue	ation Statement is
5. PARTY INFORMATION CHANGE:			000000000000000000000000000000000000000	***************************************
Check one of these two boxes.	ck <u>one</u> of these three CHANGE name and/or item 6a or 6b; <u>and</u> item	address: CompleteAD	D name: Complete item DELETE name or 7b, and item 7c December 1	e: Give record name n item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information [6a, ORGANIZATION'S NAME]	Change - provide on!	r <u>one</u> name (6a or 6b)		
85. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party !	nformation Change - provid	e only <u>one</u> name (7a or 7b) (use exact	, full name; do not omit, modify, or abbreviate any par	t of the Debtor's name)
7a. ORGANIZATION'S NAME				
OR 75. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		000000000000000000000000000000000000000	000000000000000000000000000000000000000	
COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: Indicate collateral.	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
mada diadi.				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	IIS AMENDMENT:	Provide only <u>one</u> name (9a or	9b) (name of Assignor, if this is an Assignr	nent)
If this is an Amendment authorized by a DEBTOR, check here and pre- ga. ORGANIZATION'S NAME	ovide name of authoriz	ing Debtor		
Morgan Stanley Senior Funding, Inc., a				
9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000d0000000000000000000000000000000

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0779

UCC FINANCING STATEMENT AMENDA	VENT						
FOLLOW INSTRUCTIONS							
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000	000000000000000000000000000000000000000					
B. E-MAIL CONTACT AT FILER (optional)	**************	************					
jmurphy@cahill.com							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP							
80 Pine Street							
New York, NY 10005							
90000							
	000000000000000000000000000000000000000		THE ABO\	/E SPACE IS FO	R FILING OFFICE	USE O	NLY
1a. initial financing statement file number 0602016-10630, filed 12/22/2016		1	(or recorded) in the	he REAL ESTATE	ENDMENT is to be fi RECORDS rm UCC3Ad) <u>and</u> provi	-	
2. TERMINATION: Effectiveness of the Financing Statement identifications.	fied above is	terminated w	000000000000000000000000000000000000	000000000000000000000000000	000000000000000000000000000000000000000	000000000000000	000000000000000000000000000000000000000
3. ASSIGNMENT (full or partial): Provide name of Assignes in item			Assignee in item 7c <u>anc</u>	I name of Assigno	r in item 9	000000000000000000000000000000000000000	000000000000000000000000000000000000000
For partial assignment, complete items 7 and 9 and also indicate at	ffected collat	eral in item 8	200000000000000000000000000000000000000	100000000000000000000000000000000000000	000000000000000000000000000000000000000	0000000000000	000000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement ider continued for the additional period provided by applicable law	ntified above	with respect	o the security interest(s) of Secured Party	r authorizing this Co	ntinuatior	n Statement is
5. PARTY INFORMATION CHANGE:							
Check one of these two boxes: AND C	heck <u>one</u> of the			ADD name: Compl	ate item DELETE	name: G	Rive record name
This Change affects Debtor or Secured Party of record				7a or 7b, <u>and</u> item 7			em 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Informati	ion Change -	provide only <u>o</u>	ne name (6a or 6b)				
6a, ORGANIZATION'S NAME							
OR 65. INDIVIDUAL'S SURNAME	FIR	RST PERSON	AL NAME	ADDITIO	DNAL NAME(S)/INITIA	AL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Par	rty Information Ch	ango provido o	dy one name (7a or 7b) (use o	vaet full name: de net e	mit modify or abhroviato	any nad of t	he Debtoris name)
7a. ORGANIZATION'S NAME	ny mornatori Gr	iange - provide o	ily <u>one</u> harne (7a of 7b) (use e.	kaut, idii marne, do not u	mit, modify, or appreviate i	any part or t	ne Debtor S hame)
OR 7b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)							Tsuffix
INDIVIDUAL & ADDITIONAL NAME(S), INTTAL(S)							SUPPIA
7c. MAILING ADDRESS	CIT	TY		ISTATE	POSTAL CODE		COUNTRY
70. IDALING NOOT		•		0.77.2			
**************************************		000000000000000000000000000000000000000	200000000000000000000000000000000000000			00000000000	
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD coil	laterai <u>L</u>	DELETE collateral	RESTATE	covered collateral	L AS	SSIGN collatera
Indicate collateral:							
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING				or 9b) (name of As	signor, if this is an As	ssignmen	t)
If this is an Amendment authorized by a DEBTOR, check here and 9a. ORGANIZATION'S NAME	provide name	or authorizing	I Deptor				
Morgan Stanley Senior Funding, Inc.,	as Call	ateral A	gent				
OR 9b. INDIVIDUAL'S SURNAME		ST PERSON	`~	ADDITIO	NAL NAME(S)/INITIA	AL(S)	SUFFIX
	1. 1.					-1-1	
	200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	0000000000000	000000000000000000000000000000000000000
10. OPTIONAL FILER REFERENCE DATA: Debtor: Aptean Canada Corporation - To be filed with Fulton	· Canata: C	laareia 19	seard Fign! [16770]	1005) (22)			
	- n correspie V. C.		. a.comes o NEWES 5 5 22 4 / 25	* 1/12, 14 1 /. /. i			

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0780

UCC FINANCING STATEMENT AMENDN FOLLOW INSTRUCTIONS	TENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000	0000000000			
B. E-MAIL CONTACT AT FILER (optional)	*******************				
jmurphy@cahill.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	w	·····			
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP		00000000			
80 Pine Street		000			
New York, NY 10005		3			
L		THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0602016-10632, filed 12/22/2016	100000000000000000000000000000000000000	(or recorded) in the	REAL ESTATE	INDMENT is to be filed [for RECORDS m UCC3Ad) <u>and</u> provide Debt	•
TERMINATION: Effectiveness of the Financing Statement identification Statement	ed above is termina	ated with respect to the security i	nterest(s) of Sec	cured Party authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate af			ame of Assignor	in item 9	000000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law	tified above with re	spect to the security interest(s) o	of Secured Party	authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:		000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes: AND Cl Change affects Debtor or Secured Party of record	neck <u>one</u> of these th CHANGE name ar	nd/or address: Complete AD	D name: Comple or 7b, <u>and</u> item 7		Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***************************************			
6a. ORGANIZATION'S NAME					
OR 85. INDIVIDUAL'S SURNAME	FIRST PE	RSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Part Tra. ORGANIZATION'S NAME	y Information Change - p	rovide only <u>one</u> name (7a or 7b) (use exact	t, full name; do not or	nit, modify, or abbreviate any part	of the Debtor's name)
FR. ORGANIZATIONS NAME					
75. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
					1
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
***************************************	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	
COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: Indicate collateral:	ADD collateral	DELETE collateral	RESTATE o	overed collateral	ASSIGN collateral
maleate conateral.					
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE SECOND AUTHORIZI	THIS AMENDMEN provide name of auti		9b) (name of As	signor, if this is an Assignm	ent)
Morgan Stanley Senior Funding, Inc.,	as Collater	al Agent			
OR 96. INDIVIDUAL'S SURNAME	FIRST PE	RSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:					
Debtor: Aptean Parent Co S.à r.l To be filed with Fulton Co	unty, Georgia.	[Second Lien] [16270.1005]	1231		

International AssociaTRADEMARK ministrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0781

UCC FINANCING STATEMENT AMENDA	WENT					
FOLLOW INSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000	000000000000000000000000000000000000000				
B. E-MAIL CONTACT AT FILER (optional)	************					
jmurphy@cahill.com		00000				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP						
80 Pine Street		999000				
New York, NY 10005		999				
900000		999900				
	000000000000000000000000000000000000000	THE AB	OVE SPACE IS FO	R FILING OFFICE	USE ON	FA
1a. INITIAL FINANCING STATEMENT FILE NUMBER 0602016-10641, filed 12/22/2016		(or recorded)	n the REAL ESTATE	ENDMENT is to be file RECORDS orm UCC3Ad) <u>and</u> provide	-	
2. TERMINATION: Effectiveness of the Financing Statement identifications.	fied above is t	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	0000000000000000	000000000000000000000000000000000000000
3. ASSIGNMENT (full or partial): Provide name of Assignee in item			and name of Assigno	r in item 9	0000000000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
For partial assignment, complete items 7 and 9 and also indicate at	ffected collate	ral in item 8	000000000000000000000000000000000000000	500000000000000000000000000000000000000	100000000000000000000000000000000000000	000000000000000000000000000000000000000
CONTINUATION: Effectiveness of the Financing Statement ider continued for the additional period provided by applicable law	ntified above	vith respect to the security intere	st(s) of Secured Part	authorizing this Cont	tinuation (Statement is
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes: AND C		ese three boxes to: ame and/or address: Complete	ADD name: Compl	ata itam DELETE	name: Civ	e record name
This Change affects Debtor or Secured Party of record	item 6a or 6	b; <u>and</u> item 7a or 7b <u>and</u> item 7c	7a or 7b, <u>and</u> item		ted in item	
6. CURRENT RECORD INFORMATION: Complete for Party Informati	ion Change - p	rovide only <u>one</u> name (6a or 6b)				
6a, ORGANIZATION'S NAME						
OR 65. INDIVIDUAL'S SURNAME	FIR	ST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL	.(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Par	rty Information Ch	anga provide only one name (7a or 7h) (y	occordence full name: do not a	occooccooccooccooccooccooccooccooccooc	w nod of the	Debtorie namoj
7a. ORGANIZATION'S NAME	ny mornaton on	arge - provide only <u>orle</u> name (72 or 76) (di	e exact, ruir name, do not t	mit, modify, or assireviate at	ly part of the	Debtor S flame)
OR 7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					1	SUFFIX
						0011111
7c. MAILING ADDRESS	CIT	 Y	STATE	POSTAL CODE		COUNTRY
8. COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes:	ADD coil	ateral DELETE collatera	DESTATE	covered collateral	1	IGN collatera
Indicate collateral:	[] ADD GOIL	ileiai DELE i E collateia	LIKESIKIE	covered consterai	LLI AGG	NGN CONATENA
indicate collateral.						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMEN	MENT: Provide calv and name	(On or Oh) (name of A	ceionar if this is an Ace	cian mant)	000000000000000000000000000000000000000
		of authorizing Debtor	(sa or ab) (trame or A	ssignor, ir mis is an Ass	signment)	
9a. ORGANIZATION'S NAME.						
Morgan Stanley Senior Funding, Inc.,	as Colla	iteral Agent				
OR 9b. INDIVIDUAL'S SURNAME		ST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL	_(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	000000000000000000000000000000000000000	000000000000000000000000000000000000000	200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
		rgia. [Second Lien] [16270.				

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

REEL: 006945 FRAME: 0782

UCC FINANCING STATEMENT AMENDING FOLLOW INSTRUCTIONS	/IENT					
A. NAME & PHONE OF CONTACT AT FILER (optional) James P. Murphy (212) 701-3345	000000000000000000000000000000000000000					
B. E-MAIL CONTACT AT FILER (optional)	**********	***********				
jmurphy@cahill.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
James P. Murphy, Senior UCC Paralegal						
Cahill Gordon & Reindel LLP		-				
80 Pine Street New York, NY 10005						
	000000000000000000000000000000000000000		***************************************	0000000000000000000000	R FILING OFFICE U	***************************************
1a. Initial financing statement file number 21983829, filed 12/27/2016		!	(or recorded) in the R	EAL ESTATE	ENDMENT is to be filed RECORDS rm UCC3Ad) <u>and</u> provide D	
2. Z TERMINATION: Effectiveness of the Financing Statement identifications.	ied above is	terminated wi	th respect to the security in	terest(s) of Se	cured Party authorizing	this Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate a			Assignee in item 7c <u>and</u> na	me of Assigno	r in item 9	
CONTINUATION: Effectiveness of the Financing Statement idea continued for the additional period provided by applicable law	ntified above	with respect t	o the security interest(s) of	Secured Party	authorizing this Contin	uation Statement is
5. PARTY INFORMATION CHANGE:	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Check one of these two boxes:		these three box		name: Compl	ete item DELETE na	me: Give record name
This Change affects Debtor of Secured Party of record	item 6a or	6b; <u>and</u> item 7a	or 7b <u>and</u> item 7c7a o	r 7b, <u>and</u> item 7		d in item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Informat 6a. ORGANIZATION'S NAME	on Change -	provide only <u>o</u>	<u>ne</u> name (5a or 6b)			
OR 85. INDIVIDUAL'S SURNAME	FIF	RST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Par [7a. ORGANIZATION'S NAME]	ty Information C	hange - provide or	ily <u>one</u> name (7a or 7b) (use exact,	full name; do not o	mit, modify, or abbreviate any p	part of the Debtor's name)
0.00						
7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7e. MAILING ADDRESS	Cf	ΤΥ		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD co	laterai	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral:	C					
000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	***************************************	000000000000000000000000000000000000000	***************************************	000000000000000000000000000000000000000
		NDMENT: Properties of authorizing		b) (name of A	signor, if this is an Assig	nment)
98. ORGANIZATION'S NAME Morgan Stanley Senior Funding, Inc.,	as Call	atoral A	cent			
OR 9b. INDIVIDUAL'S SURNAME		ALCI AL ZA		ADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: CSI-2, INC, - To be filed with the Secretary of State of	f Illinois.	(Second Lie	n] [16270,1005] [25]	***************************************		00000000000000000000000000000000000000

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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS	ĺ
\$0000000000000000000000000000000000000	0
A. NAME & PHONE OF CONTACT AT FILER (c James P. Murphy (212) 701-3345)

-AMENDMENT ptional) B. E-MAIL CONTACT AT FILER (optional) jmurphy@cahill.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) James P. Murphy, Senior UCC Paralegal Cahill Gordon & Reindel LLP 80 Pine Street New York, NY 10005 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS 2017072700456, filed 07/27/2017 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2. 🚺 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. 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 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. PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME 8b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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) 7a, ORGANIZATION'S NAME 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 COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral __ DELETE collateral RESTATE covered collateral ASSIGN collateral Indicate collateral 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 ____ and provide name of authorizing Debtor Morgan Stanley Senior Funding, Inc., as Collateral Agent 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)

10. OPTIONAL FILER REFERENCE DATA

Debtor: Apprise Software, Inc. - To be filed with the Secretary of the Commonwealth of Pennsylvania. [Second Lien] [16270.1005] [26]

RECORDED: 05/25/2020