NANCING STATEMENT FORM  NAME & DAYTIME PHONE NUMBER OF CONTACT PERSON NODUS FINANCE LLC Email Address SEND ACKNOWLEDGEMENT TO: ame NODUS FINANCE LLC ddress 1000 BRICKELL AVENUE, SUITE 540 ddress		FILED 2018 May 21 08:00 AM ****** 201805283055 ******			
City/State/Zip MIAMI FL 33131		THE ABOVE SPA	CE IS FOR I	FILING OFFICE US	E ONLY
. DEBTOR'S EXACT FULL LEGAL NAME – INSI 1.a ORGANIZATION'S NAME	ERT ONLY ONE DEBTOR NAME (12	OR 1b) – Do Not Abbrev	ate or Combin	ne Names	
1.b INDIVIDUAL'S SURNAME VALDES	FIRST PERSONAL NAM RICHARD	E ADDI'	TIONAL NAM	ME(S)/INITIAL(S)	SUFFIX
I.c MAILING ADDRESS Line One		This space not available.			
MAILING ADDRESS Line Two 1311 GENOA STREET	CITY CORAL GABLES		STATE FL	POSTAL CODE 33134	COUNTRY
ADDITIONAL DEBTOR'S EXACT FULL LEG 2.a ORGANIZATION'S NAME 2.b INDIVIDUAL'S SURNAME YUNES MARQUEZ	FIRST PERSONAL NAM OMAR			ME(S)/INITIAL(S)	SUFFIX
2.e MAILING ADDRESS Line One		This space not available.			
MAILING ADDRESS Line Two 1155 BRICKELL BAY DR. APT. 3111	CITY MIAMI	· Cul	STATE FL	POSTAL CODE 33131-4927	COUNTRY
SECURED PARTY'S NAME (or NAME of TO 3.a ORGANIZATION'S NAME NODUS FINANCE LLC., a Florida limited liability 3.b INDIVIDUAL'S SURNAME				Y (3a OR 3b) ME(S)/INITIAL(S)	SUFFIX
3.c MAILING ADDRESS Line One		This space not available.			
MAILING ADDRESS Line Two 1000 BRICKELL AVENUE, SUITE 540	CITY MIAMI		STATE FL	POSTAL CODE 33131	COUNTRY
This FINANCING STATEMENT covers the follo	_				
. ALTERNATE DESIGNATION (if applicable)	LESSEE/LESSOR CONSIG	NEE/CONSIGNOR	BAILEE/BA	AILOR	
	AG LIEN NON-UC	C FILING	SELLER/B	UYER	
Florida DOCUMENTARY STAMP TAX – YO All documentary stamps due and payable Florida Documentary Stamp Tax is not re	or to become due and payable pu		S., have be	en paid.	