

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**Yolonda Denise Thompson Entitlement Holder/Registered Own**

B. E-MAIL CONTACT AT FILER (optional)  
**yoloanddenisethompsoninc@gmail.com 484-758-9173**

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**United States Department of Commerce  
 c/o The Office of the Secretary of Commerce  
 Attn: Legal Department/Office of General Counsel  
 1401 Constitution Avenue, NW  
 Washington, District of Columbia 20230**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME <b>Pennsylvania State Registrar</b>					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
1c. MAILING ADDRESS <b>in care of 105 Nesbitt Road</b>		CITY <b>New Castle</b>	STATE <b>PA</b>	POSTAL CODE <b>16105</b>	COUNTRY <b>USA</b>

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME					
OR 3b. INDIVIDUAL'S SURNAME <b>Thompson [Registered Owner]</b>	FIRST PERSONAL NAME <b>Yolonda</b>	ADDITIONAL NAME(S)/INITIAL(S) <b>Denise</b>	SUFFIX		
3c. MAILING ADDRESS <b>c/o 4716 Upland Street</b>		CITY <b>Philadelphia</b>	STATE <b>PA</b>	POSTAL CODE <b>19143</b>	COUNTRY <b>usa</b>

4. COLLATERAL: This financing statement covers the following collateral:

**1) CERTIFICATED SECURITY & TITLE (in registered, book-entry, or bearer form) Registered Security#: [REDACTED]**  
 (NOTE) Date Valid Trust Instrument created, funded, & recorded upon books in land of Pennsylvania: **JUNE 8, 1962 -Active Trust**  
 (WITH TRUST) Grantor(s) hereby conveyed and deed to Registered Owner all rights and title to property, held in trust by Trustees, Securities Intermediary(s), or Registrar, as evidenced of ownership by the above-mentioned security instrument.  
 (a) REGISTERED OWNER: Has established a perfected claim and continuing priority rights, beneficial interest in, and equitable lien on collateral (whether now owned or hereafter acquired) to include but not limited to all accounts, security entitlements, financial assets, chattel paper, securities, real & personal property derived therefrom and all interest therein.  
 (b) REGISTERED OWNER: Is not subject to any adverse claims protected under applicable Law & UCC Article 8.  
 (c) This (Act) takes effect 06/08/1962 - hereinafter None Pro Tune (NO TRUST-PASS, AND IT IS SO ORDERED) See attached: Form UCC1 Ad & Affidavit of Ownership.

[Entitlement Holder/Registered Owner]

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input checked="" type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input checked="" type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility <input checked="" type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	

8. OPTIONAL FILER REFERENCE DATA:  
**Recording as Deed of Trust [Registered Owner Signature];**

# UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME <b>Pennsylvania State Registrar</b>	
OR	
9b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1a or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c.

10a. ORGANIZATION'S NAME	
OR	
10b. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
----------------------	------	-------	-------------	---------

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME <b>YOLANDA DENISE THOMPSON TRUST/ESTATE [Active Trust]</b>			
OR			
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

11c. MAILING ADDRESS <b>302 North Office Building, 401 Street</b>	CITY <b>Harrisburg</b>	STATE <b>PA</b>	POSTAL CODE <b>[120]</b>	COUNTRY <b>USA</b>
--	---------------------------	--------------------	-----------------------------	-----------------------

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

**SEE ATTACHED UCC1 ADDENDUM AND AFFIDAVIT OF OWNERSHIP**

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:  
 covers timber to be cut  covers as-extracted collateral  is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):  
**[REAL PROPERTY]**

16. Description of real estate:  
**SEE ATTACHED UCC1 ADDENDUM AND AFFIDAVIT OF OWNERSHIP OF CERTIFICATE**

**SEE ATTACHED UCC1 ADDENDUM AND AFFIDAVIT OF OWNERSHIP OF CERTIFICATE**

17. MISCELLANEOUS:  
**SEE ATTACHED**

**NOTICE TO AGENTS IS NOTICE TO PRINCIPAL NOTICE TO PRINCIPAL IS NOTICE TO ALL AGENTS, ASSIGNS, TRUSTEES, AND ADMINISTRATORS (FIDUCIARIES), NO TRUST-PASS!**

**All properties listed is private property of Registered Owner  
See attached: Form UCCI & Affidavit of Ownership**


**[REAL PROPERTY) All real estate or parcel of land -As original native american woman together with all hands, feet, and head, lying or being within North America in the land of the United States and/ or at Sea, consisting of the whole of Child Birth/ Plat No: 10000000-1962 as the same appears by reference to the Official Cetificate of Live Birth, the same recorded & filed as a Deed of Trust dated JUNE 25, 1962 in Office of the Clerk, County of Philadelphia, land of Pennsylvania. Said real estate is further described as the same property conveyed unto Registered Owner as set forth in above-mentioned Certificate of Title.**

**[With Trust] this estate is the property of: YoLonda Denise Thompson, Entitlement Holder/Registered Owner c/o 4716 Upland Street, Philadelphia, Pennsylvania 19143 [Recording as Deed of Trust]**

**YOLONDA D THOMPSON**

**[WITH TRUST] All colateral listed is the private property of Entitlement Holder/Registered Owner and all derivatives therefrom. Any person(s) gaining said property without consent or valuable consideration given in return is subject to penalties in Sum Amount \$10,000,000.00USD per.**

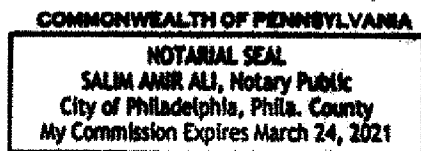
**[AND IT IS SO ORDERED]**

By:   
**(Registered Owner of Record)**

State of Pennsylvania )  
  )  
County of Philadelphia)

  
Notary Public

[SEAL]





**WITNESSES:**

*I declare that YoLonda Denise Thompson, is personally known to me (or has proven to me on the basis of convincing evidence) to be the Affiant (Registered Owner) that he signed or acknowledged this "Affidavit of Ownership of Certificate of Title & Registered Securities" in my presence, or he appears to be of sound mind and under no duress or undue pressure and/ or influence.*

By: Michèle Antoinette Peoples

PRINT NAME: Michèle Antoinette Peoples DATE 6/16/20

By: [Signature]

PRINT NAME: Lorenzo Nolasco DATE 6/16/20

**CERTIFICATE OF  
ACKNOWLEDGMENT**

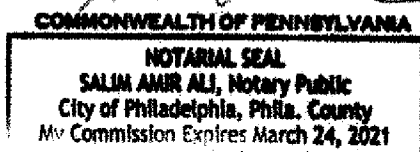
On this date the men and/or women named above, in their stated capacity, personally appeared before me and acknowledged that this instrument attached hereto was signed as a free and voluntary act and deed for the uses and purpose stated therein.

DATE: 6/16/20 BY: SALIM AMIR ALI, Notary Public

[SEAL]

SALIM AMIR ALI

My Commission Expires 3/24/2021



Recording as Deed of Trust