

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| |
|--|
| A. NAME & PHONE OF CONTACT AT FILER (optional) |
| B. E-MAIL CONTACT AT FILER (optional) |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) |
| GB |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

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 | | | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| | Toman | Jane | | | |
| 1c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| Paddock Cottage, Brixworth Hall Park, Brixworth | | Northants | | NN6 9DE | GB |

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 | |
| | Toman | Jane | | | |
| 2c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| Blaby District Council, Desford road, Narborough | | Leicester | | LE19 2EP | GB |

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 | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| | Kirk | Steven | | | |
| 3c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| 50 Salcombe Drive, Glenfield | | Leicester | | LE3 8AF | GB |

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

- 1) ALL RIGHTS RESERVED WITHOUT PREJUDICE UCC 1-308, UCC Doc# 2018-285-0154-4.
- 2) Unrebutted Affidavit Of Obligation Commercial Lien Ref: SK-16072018-BDC-NOI served by recorded delivery signed for mail service number GQ3144 8053 0GB dated six July 2018 received and served on the 09th July 2018.
- 3) All of the Lien debtors public indemnity bond and if this is insufficient all the assets, land, and personal property, real and movable and all of the Lien debtors named herein, interest in said assets, land and personal property, now owned and hereafter acquired, now existing and

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:
Commercial Lien Ref: SK-16072018-BDC-NOI

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 | |
| | |
| OR | |
| 9b. INDIVIDUAL'S SURNAME | |
| Toman | |
| FIRST PERSONAL NAME | |
| Jane | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

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 1b 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 | | | | |
| | | | | |
| OR | | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| | | | | |
| 11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| | | | | |

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

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):

16. Description of real estate:

17. MISCELLANEOUS:
 Commercial Lien Ref: SK-16072018-BDC-NOI

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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

| | |
|-------------------------------|--------|
| 18a. ORGANIZATION'S NAME | |
| | |
| OR | |
| 18b. INDIVIDUAL'S SURNAME | |
| Toman | |
| FIRST PERSONAL NAME | |
| Jane | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|---------------------|-------------------------------|-------------------------------|
| 19a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 19b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| Pennelli | Sarah | | |
| 19c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |
| Blaby District Council, Desford road, Narborough | | Leicester | LE19 2EP GB |

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---------------------------------|---------------------|-------------------------------|-------------------------------|
| 20a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 20b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| Walsh | Geoff | | |
| 20c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |
| 14 Woodbank, Glen Parva, | | Leicester | LE2 9QP GB |

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|--|---------------------|-------------------------------|-------------------------------|
| 21a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 21b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| Hack | Amanda | Jayne | |
| 21c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |
| 6 Darwin Close, Thorpe Astley, Braunstone Town, | | Leicester | LE3 3UE GB |

22. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------------------------|
| 22a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 22b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 22c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |
| | | | |

23. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------------------------|
| 23a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 23b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 23c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |
| | | | |

24. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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

| | |
|---|--------|
| 18a. ORGANIZATION'S NAME | |
| | |
| OR | |
| 18b. INDIVIDUAL'S SURNAME Toman | |
| FIRST PERSONAL NAME Jane | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|-------------------------------------|-------------------------------|--|
| 19a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 19b. INDIVIDUAL'S SURNAME Jennings | FIRST PERSONAL NAME David | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 19c. MAILING ADDRESS 122 Station Road, Countesthorpe, | | CITY Leicester | STATE POSTAL CODE LE8 5TD COUNTRY GB |

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|--------------------------------------|---|---|
| 20a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 20b. INDIVIDUAL'S SURNAME Richardson | FIRST PERSONAL NAME Louise | ADDITIONAL NAME(S)/INITIAL(S) Helen | SUFFIX |
| 20c. MAILING ADDRESS 21 The Pastures, Narborough, | | CITY Leicester | STATE POSTAL CODE LE19 3DS COUNTRY GB |

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|------------------------------------|---|---|
| 21a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 21b. INDIVIDUAL'S SURNAME Richardson | FIRST PERSONAL NAME John | ADDITIONAL NAME(S)/INITIAL(S) Terence | SUFFIX |
| 21c. MAILING ADDRESS 21 The Pastures, Narborough, | | CITY Leicester | STATE POSTAL CODE LE19 3DS COUNTRY GB |

22. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

| | | | |
|---------------------------|---------------------|-------------------------------|------------------------------------|
| 22a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 22b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 22c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |

23. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

| | | | |
|---------------------------|---------------------|-------------------------------|------------------------------------|
| 23a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 23b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 23c. MAILING ADDRESS | | CITY | STATE POSTAL CODE COUNTRY |

24. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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

| | |
|---|--------|
| 18a. ORGANIZATION'S NAME | |
| | |
| OR | |
| 18b. INDIVIDUAL'S SURNAME Toman | |
| FIRST PERSONAL NAME Jane | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|-------------------------------------|--------------------------------|----------------------|
| 19a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 19b. INDIVIDUAL'S SURNAME Richardson | FIRST PERSONAL NAME Terry | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 19c. MAILING ADDRESS 21 The Pastures, Narborough, | | | |
| CITY Leicester | STATE | POSTAL CODE LE19 3DS | COUNTRY GB |

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|-----------------------------------|-------------------------------|----------------------|
| 20a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 20b. INDIVIDUAL'S SURNAME Breckon | FIRST PERSONAL NAME Lee | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 20c. MAILING ADDRESS 5 Triumph Road, Glenfield, | | | |
| CITY Leicester | STATE | POSTAL CODE LE3 8FR | COUNTRY GB |

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|---------------------------------------|-------------------------------|----------------------|
| 21a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 21b. INDIVIDUAL'S SURNAME Blunt | FIRST PERSONAL NAME Richard | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 21c. MAILING ADDRESS Clifton Hall, Clifton Campville, | | | |
| CITY Staffordshire | STATE | POSTAL CODE B79 0BE | COUNTRY GB |

22. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

| | | | |
|---------------------------|---------------------|-------------------------------|---------|
| 22a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 22b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 22c. MAILING ADDRESS | | | |
| CITY | STATE | POSTAL CODE | COUNTRY |

23. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

| | | | |
|---------------------------|---------------------|-------------------------------|---------|
| 23a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 23b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 23c. MAILING ADDRESS | | | |
| CITY | STATE | POSTAL CODE | COUNTRY |

24. MISCELLANEOUS:

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. 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

| | |
|-------------------------------|--------|
| 18a. ORGANIZATION'S NAME | |
| | |
| OR | |
| 18b. INDIVIDUAL'S SURNAME | |
| Toman | |
| FIRST PERSONAL NAME | |
| Jane | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | |

Date of Filing : 11/09/2018
Time of Filing : 03:22:00 AM
File Number : 2018-313-7685-6
Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---|---------------------|-------------------------------|----------------|
| 19a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 19b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| White | Ernie | | |
| 19c. MAILING ADDRESS | | STATE | POSTAL CODE |
| 4 Middleton Close, Stoney Stanton, | | | LE9 4TS |
| | | CITY | COUNTRY |
| | | Leicester | GB |

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------|
| 20a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 20b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 20c. MAILING ADDRESS | | STATE | POSTAL CODE |
| | | | |
| | | CITY | COUNTRY |
| | | | |

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------|
| 21a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 21b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 21c. MAILING ADDRESS | | STATE | POSTAL CODE |
| | | | |
| | | CITY | COUNTRY |
| | | | |

22. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------|
| 22a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 22b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 22c. MAILING ADDRESS | | STATE | POSTAL CODE |
| | | | |
| | | CITY | COUNTRY |
| | | | |

23. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

| | | | |
|---------------------------|---------------------|-------------------------------|-------------|
| 23a. ORGANIZATION'S NAME | | | |
| | | | |
| OR | | | |
| 23b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | |
| 23c. MAILING ADDRESS | | STATE | POSTAL CODE |
| | | | |
| | | CITY | COUNTRY |
| | | | |

24. MISCELLANEOUS:

4. This FINANCING STATEMENT covers the following collateral:

hereafter arising, and wherever located until said debt is paid in full to the value set out in the un rebutted Affidavit Of Obligation Commercial Lien served by recorded delivery mail number GQ3144 8053 OGB addressed to the following men and women that take responsibility for their names.

1. Jane Toman.
2. Sarah Pennelli.
3. John Terrence Richardson.
4. Terry Richardson.
5. Louise Helen Richardson.
6. Geoff Welsh.
7. Amanda Jayne Hack.
8. David Jennings.
9. Lee Martin Breckon.
10. Ernie White.
11. Richard Blunt.

Therefore this true bill in commerce is valued at Eighty Eight Million GBP (£88,000,000.00) in total, Eight Million GBP (£8,000,000.00) per Lien debtor.

4) After serving the said affidavit of obligation commercial lien Ref: SK-16072018-BDC-NOI and given the commercial grace of thirty (30) days to reply with substance and rebut the allegations no lawful reply has been received and a further Notice Of Fault And Opportunity To Cure was then served.

5) The said Notice Of Fault And Opportunity To Cure recorded delivery signed for service number GQ3144 8072 OGB dated the 09th August 2018 received and served on the 10th August 2018 and the Lien debtors was given a further opportunity to rebut the allegations with substance and three (3) days were given as a courtesy.

6) No reply to the Notice Of Fault And Opportunity To Cure has been received as of the date of this filing and therefore by law the Lien debtors are in total admission of the allegation and claims made in the Affidavit Of Obligation Commercial Lien Ref: SK-16072018-BDC-NOI and also in total agreement of the fees for damages as stated herein and within said affidavit of obligation commercial lien Ref: SK-16072018-BDC-NOI.

7) An Unrebutted Affidavit stands as Truth in

4. This FINANCING STATEMENT covers the following collateral:

commerce.

8) An Unrebutted Affidavit becomes a Judgment in commerce.

9) The Truth is expressed in the form of an affidavit.

10) In commerce truth is sovereign.

11) All are equal under the law.

12) This commercial lien and true bill in commerce is valued at Eighty Eight Million GBP (£88,000,000.00), Eight Million GBP (£8,000,000.00) per Lien debtor named herein and a Default certificate has been witnessed and is now on public record until payment is received in full and it is from farther to son to the seventh generation, until paid and settled.

13) This commercial lien is due to the Lien debtors ignoring their own due process of law and by acquiescence and tacit admission therefore in total agreement of said Affidavit Of Obligation Commercial Lien Ref: SK-16072018-BDC-NOI is now matured and a perfected commercial lien an account receivable, an account collectible.

14) This Affidavit Of Obligation Commercial Lien Ref: SK-16072018-BDC-NOI has been witnessed under my full unlimited commercial liability with the penalty of perjury, sworn and subscribed under oath to be true, correct , not misleading, and complete.

**NON-NEGOTIABLE
COVERING LETTER TO NOTICE OF DEFAULT**



Jane Toman



Sarah Pennelli



Terry Richardson
21 The Pastures
Narborough
Leicestershire
LE19 3DS



John Terence Richardson
21 The Pastures,
Narborough,
Leicestershire,
LE19 3DS



Louise Helen Richardson
21 The Pastures,
Narborough,
Leicester,
LE19 3DS



Amanda Jayne Hack
6 Darwin Close,
Thorpe Astley,
Braunstone Town,
Leicester,
LE3 3UE



Geoff Welsh
14 Woodbank,
Glen Parva,
Leicestershire,
LE2 9QP



David Jennings
122 Station Road,
Countesthorpe,
Leicester,
LE8 5TD



Ernie White
4 Middleton Close, Stoney
Stanton,
Leicestershire,
LE9 4TS

Lien Debtors

C/o
Blaby District Council
Council Offices
Desford Road
Narborough
Leicester
LE19 2EP
Company No: 236643755



Lee Martin Breckon
5 Triumph Road,
Glenfield,
Leicester,
LE3 8FR



Richard Blunt
Clifton Hall,
Clifton Campville,
Staffordshire,
B79 0BE

**THE REST OF THE PAGE IS
INTENTIONALLY LEFT BLANK.**