

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME OF CONTACT AT FILER [optional]		Account No.
B. SEND ACKNOWLEDGMENT TO: (Name and Address)		
Please Return To:		
CT CORPORATION SYSTEM		
Attn: Matt McEwen		
208 S. LaSalle Street, Ste. 814		
Chicago, IL 60604		

FLORIDA SECURED TRANSACTION REGISTRY

FILED

2008 Jan 04 AM 12:00

***** 20080735983X *****

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) do not abbreviate or combine names

1a. ORGANIZATION'S NAME OCEAN 4660, LLC					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 40800 WOODWARD AVENUE			CITY BLOOMFIELD HILLS	STATE MI	POSTAL CODE 48304
1d. TAX ID# SSN OR EIN			1e. TYPE OF ORGANIZATION LLC		1f. JURISDICTION OF ORGANIZATION FLORIDA
1g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE L07000104436					

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE
2d. TAX ID# SSN OR EIN			2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION
2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE					

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE or ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME COMERICA BANK					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 39200 SIX MILE ROAD			CITY LIVONIA	STATE MI	POSTAL CODE 48152-2689
			COUNTRY USA		

4. This FINANCING STATEMENT covers the following collateral:

All of the following property now owned or later acquired by Debtor, wherever located: all personal property of Debtor, including, without limitation, all accounts (including without limit health care insurance receivables), chattel paper (including without limit tangible and electronic chattel paper), commercial tort claims, contract rights, deposit accounts, documents, equipment, fixtures, general intangibles (including without limit payment intangibles and software), instruments, inventory (including without limit returns and repossessions), letter of credit rights, supporting obligations, all investment property (including without limit securities, security entitlements and financial assets), and all additions, attachments, accessions, parts, replacements, substitutions, renewals, interest, dividends, distributions, rights of any kind and records (including without limit computer software) pertaining to the foregoing property, and all products and proceeds of any of the foregoing (whether cash or non-cash proceeds), including without limit insurance and condemnation proceeds. A reference to a type of collateral shall not be limited by a separate reference to a more specific or narrower type of that collateral. All terms herein have the meanings assigned to them in the Uniform Commercial Code, as those meanings may be amended, revised or replaced from time to time. "Uniform Commercial Code" means Act No. 174 of the Michigan Public Acts of 1962, as amended, revised or replaced from time to time, including without limit as amended by Act No. 348 of the Michigan Public Acts of 2000. The terms used herein which are defined in the Uniform Commercial Code shall have, at all times, the broadest and most inclusive meanings possible.

NO DOCUMENTARY STAMP TAX IS REQUIRED.

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR <input type="checkbox"/>	CONSIGNEE/CONSIGNOR <input type="checkbox"/>	BAILEE/BAILOBR <input type="checkbox"/>	SELLER/BUYER <input type="checkbox"/>	AG. LIEN <input type="checkbox"/>	NON-UCC FILING <input type="checkbox"/>
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/> Attach Addendum (if applicable)			7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) <input type="checkbox"/> [ADDITIONAL FEE] [optional]		All Debtors <input type="checkbox"/>	Debtor 1 <input type="checkbox"/>
					Debtor 2 <input type="checkbox"/>	

8. OPTIONAL FILER REFERENCE DATA

HANNA KARCHO-POLSELLI (20884-2 LRS)

FILE WITH FLORIDA SECRETARY OF STATE 7121681-50-2

FILING OFFICER COPY - NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/2007)

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