

**UCC FINANCING STATEMENT**

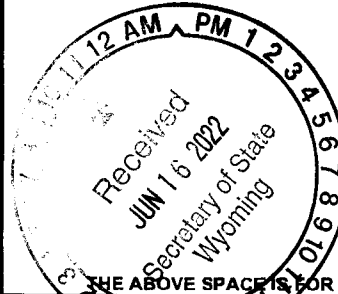
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

General Professional Indemnity Ltd, For and on behalf of Cell NPSLA2018-02  
 Butterfield Bank Building  
 6th Floor  
 65 Front Street  
 Hamilton  
 Bermuda



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 NPFC SPV 1 Inc						
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 30 N Gould Street			CITY Sheridan	STATE WY	POSTAL CODE 82801	COUNTRY USA

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 General Professional Indemnity Ltd, For and on behalf of Cell NPSLA2018-02						
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS Butterfield Bank Building, 6th Floor, 65 Front Street			CITY Hamilton	STATE	POSTAL CODE	COUNTRY Bermuda

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

Secured Party and Debtor entered into a Note Issuance Agreement in which Debtor has issued 3 individual Notes in the amount of USD \$5 million each represented by CUSIP# 65172Q AA5 / ISIN # US65172QAA58. Notes are identified as NPFC/UST/CN/2021/01-11, NPFC/UST/CN/2021/01-12 and NPFC/UST/CN/2021/01-13. Pursuant to the Note Issuance Agreement and Notes, Debtor has pledged to Secured Party as Collateral all of its rights to the principal corpus of the United States Treasury Bonds registered under CUSIP 912810QZ4. The terms of this Collateral Pledge and Security Agreement are reflected in the agreement between Secured Party and Debtor.

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:

**STATE OF WYOMING \* SECRETARY OF STATE**  
**EDWARD A. BUCHANAN**  
**BUSINESS DIVISION**

Herschler Bldg East, Ste.100 & 101 , Cheyenne, WY 82002-0020

Phone: 307-777-7311

Email: UCC@wyo.gov

GENERAL PROFESSIONAL INDEMNITY LTD, FOR AND ON BI  
BUTTERFIELD BANK BUILDING  
6TH FLOOR 65 FRONT STREET  
HAMILTON  
BERMUDA

June 16, 2022

**UCC Financing Statement Acknowledgement**

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**FILING INFORMATION**

Document #: 2022-22087322  
Filing Date: 06/16/2022  
Lapse Date: 06/16/2032  
Record Type: UCC  
Receipt #: 002613968  
Alternate Designation: Debtor / Secured Party

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**DEBTOR INFORMATION**

Debtor Name: NPFC SPV 1 INC  
Address: 30 N GOULD STREET  
SHERIDAN, WY 82801

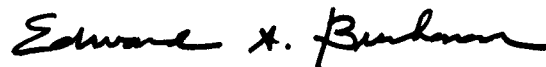
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**SECURED PARTY INFORMATION**

Secured Party Name: GENERAL PROFESSIONAL INDEMNITY LTD, FOR AND ON  
BEHALF OF CELL NPSLA2018-02  
Address: BUTTERFIELD BANK BUILDING  
6TH FLOOR, 65 FRONT STREET  
HAMILTON BERMUDA

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This acknowledges the filing of the attached document. If we may be of any further service to you, please contact us at the number noted above.



EDWARD A. BUCHANAN  
SECRETARY OF STATE  
State of Wyoming

Enclosures: Original Documents

# RECEIPT



Secretary of State  
Herschler Bldg East, Ste.100 & 101  
Cheyenne, WY 82002-0020

CYNDY JACKSON  
1507 LAMPMAN CT  
CHEYENNE, WY 82007

## RECEIPT INFORMATION

Receipt #: **002613968**  
Receipt Date: **06/16/2022**  
Processed By: **Bailey Johnson**

**DO NOT PAY!**  
**This is not a bill.**

Description of Charges	Reference	Quantity	Unit Price	Total
UCC1 - Initial Filing	2022-22087322	1	\$30.00	\$30.00
<b>TOTAL CHARGES PAID</b>				<b>\$30.00</b>

Description of Payment	Reference	Amount
Payment-PAD Account	00271	\$30.00
<b>TOTAL PAYMENT</b>		<b>\$30.00</b>

PAD Account: <b>00271 - CYNDY JACKSON</b>	PAD Begin Balance:	<b>\$431.35</b>
	PAD End Balance:	<b>\$401.35</b>

**In Reference To:**  
Initial Filing Doc ID: 2022-22087322

PAD or Billing Questions?  
(307) 777-5343  
SOSAdminServices@wyo.gov