

**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) <b>Newpoint Financial Corp</b> <b>30 N Gould Street</b> <b>Sheridan</b> <b>Wyoming, 82801</b>



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>NMS Special Opportunity Fund LP</b>				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
1c. MAILING ADDRESS <b>433 N. Camden Drive, Suite 725</b>				
CITY <b>Beverly Hills</b>	STATE <b>CA</b>	POSTAL CODE <b>90210</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 <b>Newpoint Financial Corp.</b>				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
3c. MAILING ADDRESS <b>30 N. Gould St.</b>				
CITY <b>Sheridan</b>	STATE <b>WY</b>	POSTAL CODE <b>82801</b>	COUNTRY <b>USA</b>	

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

**The Secured Party has been granted an irrevocable pledge and assignment to all rights and redemption to the principal corpus of the United States Treasury registered under CUSIP: 912810QZ4 pursuant to the Collateral Pledge Agreement between the Debtor and the Assigning Party dated December 28, 2021 as referenced and in the amounts shown in the senior secured notes numbers 0021-12-101 pursuant to the rights granted by the Grantor to the Assigning Party as described in the Collateral Pledge Agreement dated April 20, 2017 and as amended on March 30, 2020 as confirmed under the original and all amended and updated UCC Financing Statements on file.**

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

NEWPOINT FINANCIAL CORP  
30 N GOULD STREET  
SHERIDAN, WY 82801

March 10, 2022

**UCC Financing Statement Acknowledgement**

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**FILING INFORMATION**

Document #: 2022-21302520  
Filing Date: 03/10/2022  
Lapse Date: 03/10/2032  
Record Type: UCC  
Receipt #: 002500606  
Alternate Designation: Debtor / Secured Party

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**DEBTOR INFORMATION**

Debtor Name: NMS SPECIAL OPPORTUNITY FUND LP  
Address: 433 N. CAMDEN DRIVE, SUITE 725  
BEVERLY HILLS, CA 90210

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**SECURED PARTY INFORMATION**

Secured Party Name: NEWPOINT FINANCIAL CORP.  
Address: 30 N. GOULD ST.  
SHERIDAN, WY 82801

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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 #: **002500606**  
Receipt Date: **03/10/2022**  
Processed By: **Celia Alvarado**

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

Description of Charges	Reference	Quantity	Unit Price	Total
UCC1 - Initial Filing	2022-21302520	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: **00271 - CYNDY JACKSON**

PAD Begin Balance: **\$1,724.60**

PAD End Balance: **\$1,694.60**

### **In Reference To:**

Initial Filing Doc ID: 2022-21302520

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