



UCC

LIEN NO. 94180355

AESTHETIC REVOLUTION

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Sophia Guernsey 442-218-2550					
B. E-MAIL CONTACT AT SUBMITTER (optional)					
fulfillment@middesk.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
					,
^I Middesk, Inc.	1				
85 2nd Street, Suite 710					
_I San Francisco, CA 94105	1	Duint			_
SEE DELOW FOR SECURED PARTY CONTACT INFORM		Print		Reset	
SEE BELOW FOR SECURED PARTY CONTACT INFOR				R FILING OFFICE USE	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, functifit in line 1b, leave all of item 1 blank, check here					Debtor's name will
	vide the Individual Debtor Inforr	nation in item 10 of the Financi	ng Statemer	nt Addendum (Form UCC (Ad)	181
Aesthetic Revolution LLC dba ASRV					
OR 15 INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	М	TADDITIO	ISUFFIX	
10. INDIVIDUAL S SUMMANIC	FIRST PERSONAL NA	MC	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2251 Rutherford Rd # 150	Carlsbad		CA	92008-8815	USA
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, fu not fit in line 2b, leave all of item 2 blank, check here and prov	vide the Individual Debtor inform				Deptor's name will
2a. ORGANIZATION'S NAME					
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC	CURED PARTY): Provide onl	one Secured Party name (3	la or 3b)	I	
3a. ORGANIZATION'S NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, (,		
Middesk, Inc. as Representative					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME.	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
56 Broad St, STE 14033	Boston		MA	02109	USA
4. COLLATERAL: This financing statement covers the following collateral:					

All assets of the Debtor, whether now owned or hereafter acquired or arising, wheresoever located, and all proceeds thereof

5. Check only if applicable and check only one box:	Collateral is held in a Trus	st (see UCC1Ad, item 17 and Inst	ructions)	being adm	inistered by a Dece	dent's Personal Representative		
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:							
Public-Finance Transaction Man	ance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility				Agricultural Lien Non-UCC Filing			
7. ALTERNATIVE DESIGNATION (if applicable):	Lessee/Lessor	Consignee/Consignor	Seller/Buy	er	Bailee/Bailor	Licensee/Licensor		
8. OPTIONAL FILER REFERENCE DATA:								
shopify_financing_579039								