SPENCER J. COX
Governor
DEIDRE M. HENDERSON
Lieutenant Governor

UTAH DEPARTMENT OF COMMERCE
Division of Corporations and Commercial Code

MARGARET W. BUSSE
Executive Director

G. SCOTT WHITTAKER
Division Director

June 02, 2026

Justin Watson
9837 Peach Street
Wetumpka, AL 36092 - USA

UCC-11 Information Request

Your Request for Information has been processed by the Utah Division of Corporations and Commercial Code matching filing(s) in the Division's computerized database with the following search parameter(s) and the "Exact" filter:

Search Number : 2606021254563-0

Debtor Name: BAM FRANCHISING, INC.
Debtor Type: Organization
Date Range: All Available Filings

Search Response: All (Lapsed and Unlapsed)
Copies: All (Lapsed and Unlapsed)
City:

The Utah Division of Corporations and Commercial Code herby certifies that the attached information is filed and of Record in the Offices of the Division as of 05/31/2026 at 18:00 MST.

Sincerely,
FILING OFFICER

UTAH DEPARTMENT OF COMMERCE
Division of Corporations and Commercial Code

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Liens Filing Search Report

The Utah Division of Corporations and Commercial Code hereby certifies that the attached list is a true and exact list of all financing statements or CFS liens and related subsequent documentation for the debtor below as filed with the Division of Corporations and Commercial Code office, Uniform Commercial Code Division, as of the Through Date below.

Date Searched: 6/2/2026 1:05:31 PM **Search Criteria:**
Searched by: Justin Watson
Filing Chains: 1

Good Through Filing Date: 05/31/2026

Cities:
Date Range: All Available Filings
Include Filings Outside Range?: All Available Filings

June 02, 2026
Filing Status:ALL(Lapsed and Unlapsed)
Include Records: N/A

Organization Name: BAM FRANCHISING, INC.

Filing Chain#: 1
Original File#: 2023970648-7

Lapse Date: 06/26/2028
Lien Type:UCC Lien

Filing #: 2023970648-7 **Filing Date:** 06/26/2023 **Filing Type:** Initial Financing Statement UCC-1 **Page Count:**1

Debtors

Name	Type	Action Type	Address
BAM FRANCHISING, INC.	Organization	N/A	225 W 520 N OREM, UT 84057, USA

Secured Parties

Name	Type	Action Type	Address
JPMORGAN CHASE BANK, NA	Organization	N/A	P.O. BOX 6026, IL1-1145 CHICAGO, IL 60680, USA

Collateral

All Inventory, Chattel Paper, Accounts, Equipment and General Intangibles; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds)

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
Wolters Kluwer Lien Solutions 800-331-3282

B. E-MAIL CONTACT AT FILER (optional)
uccfilingreturn@wolterskluwer.com

C. SEND ACKNOWLEDGEMENT TO: (Name and Address)

Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071 USA

Filed in the Office of	Initial Filing Number
L. Veillette	**2023970648-7**
Director, Division of Corporations and Commercial Code	Filed On **6/26/2023 8:28:38 PM**
	Lapse Date **6/26/2028**
	Number of Pages **1**

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
BAM FRANCHISING, INC.

OR

1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
225 W 520 N	**OREM**	**UT**	**84057**	**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
JPMorgan Chase Bank, NA

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
P.O. Box 6026, IL1-1145	**Chicago**	**IL**	**606806026**	**USA**

4. COLLATERAL: This financing statement covers the following collateral:
All Inventory, Chattel Paper, Accounts, Equipment and General Intangibles; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoin g (including insurance, general intangibles and other accounts proceeds)

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/Licensor

8. OPTIONAL FILER REFERENCE DATA:
93710231

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/20/11)