LOW INSTRUCTIONS (front and back) CAREFULLY AME & PHONE OF GONTACT (Deponel) FILING OFFICE ACCT#	FORMATION REQ	UEST			
ECHANTO: (Name and Address) Edward G. Avila, Esquire Roberts, Carroll, Feldstein & Peirce 10 Weybosset Street Providence, RI 02903 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY EBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do no abbreviate or combine names 1a ORGANIZATION S NAME LOT-Sher Apartments, LLC 1b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFICE FORMATION OPTIONS RELATING TO UCC FILINGS & OTHER NOTICES ON FILE IN FILING OFFICE THAT INCLUDE AS A DEBTOR NAME THE NAME IDENTIFIED IN ITEM 1: SEARCH RESPONSE INFORMATION REQUEST RESPONSE WITHOUT COPIES — Filing office requested to furnish a search report listing all reported records, but to furnish NO COPIES reported records. COPY REQUEST VERTIFIED (Optional) INFORMATION REQUEST RESPONSE WITH FULL COPIES — Filing office requested to furnish a search report listing all financing statements and related records at and terms of liting and nume and address of each Secured Party number and also furnish an exact COPY of ALL reported records (including all attachments). SPECIFIED COPIES ONLY CERTIFIED (Optional) Record Number Date Record Filed (if required) Type of Record and Additional Identifying Information (if required)					
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