B. SEND ACKNOWLE	DOMENT TO MI	58-5294	ſ			
		ne and Address)				
27521710 CSC Dilig 6500 Harl Mukilteo,	enz, Inc.	kwy, Suite 400				
L		Filed In: Rhode Is	· ————————————————————————————————————			
. DEBTOR'S EXACT	FULLLEGAL NAME-	insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or combine names	E ABOVE SPACE IS F	FOR FILING OFFICE (JSE ONLY
Daniele Interr	_					
16. INDIVIDUAL'S LAS	TNAME		FIRST NAME	MIDDL	E NAME	SUFFIX
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2a. ORGANIZATION'S	OR'S EXACT FULL	LEGAL NAME - insert only s	ane debtor name (2a or 2b) - do not abbrevia	ate or combine names		
2a. ORGANIZATION'S R 2b. INDIVIDUAL'S LAS	NONE	LEGAL NAME - insert only <u>s</u>	ane debtor name (2a or 2b) - do not abbrevia	ate or combine names		SUFFIX
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