

# UCC-3 Form - Continuation

Original File Number: **200907867700** Original File Date: **9/17/2009 3:35:00 PM**

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## FILER INFORMATION

Full name: **CT LIEN SOLUTIONS** Phone: **(800)331-3282**

## CONTACT INFORMATION

Contact name: **CT LIEN SOLUTIONS**

Street #1: **P.O. BOX 29071**

Street #2: **ORDER:44856724**

City: **GLENDALE** State: **CA** ZIP: **91209-9071** Country: **USA**

Notification Method: **E-MAIL** Email: **SOSACK@UCCDIRECT.COM**

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## DEBTOR INFORMATION

Org. Name: **LEGACY 111, LLC**

Org. Type: **LIMITED LIABILITY COMPANY** Jurisdiction: **MA** Org. ID: **000509821**

Mailing Address1: **318 BEAR HILL ROAD**

City: **WALTHAM** State: **MA** ZIP: **02451** Country: **USA**

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## SECURED PARTY INFORMATION

Org. Name: **CAMBRIDGE SAVINGS BANK**

Mailing Address1: **1374 MASSACHUSETTS AVENUE**

City: **CAMBRIDGE** State: **MA** ZIP: **02138** Country: **USA**

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**TRANSACTION TYPE: STANDARD**

**COLLATERAL IS / ADMINISTERED BY:**

**ALTERNATIVE DESIGNATION:**