

UCC-3 Form - Continuation

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CONTACT INFORMATION

Contact name: **BANK RHODE ISLAND**
Street #1: **ONE TURKS HEAD PLACE**
City: **PROVIDENCE** State: **RI** ZIP: **02903** Country: **USA**
Notification Method: **E-MAIL** Email: **379631233491005**

DEBTOR INFORMATION

Org. Name: **SHALVEY BROS. LANDSCAPE, INC.**
Mailing Address1: **131 CENTERVILLE ROAD**
City: **WARWICK** State: **RI** ZIP: **02886** Country: **USA**

Org. Name: **SHALVEY REALTY, LLC**
Mailing Address1: **1301 CENTERVILLE ROAD**
City: **WARWICK** State: **RI** ZIP: **02886** Country: **USA**

SECURED PARTY INFORMATION

Org. Name: **BANK RHODE ISLAND**
Mailing Address1: **ONE TURKS HEAD PLACE**
City: **PROVIDENCE** State: **RI** ZIP: **02903** Country: **USA**

TRANSACTION TYPE: STANDARD

COLLATERAL IS / ADMINISTERED BY:

ALTERNATIVE DESIGNATION: