LOCE FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Wick De Luca & Gemma Incorporated 56 Pine Street, Suite 700 Providence, RI 02903 INE ABOVE SPACE IS FOR FILING OFFICE US THE ABOVE SPACE IS	
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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 Pers	ers Whai
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