A NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 3. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com Company 1-800-858-5294 3. E-MAIL CONTACT AT FILER (optional) SPRFilling@cscinfo.com Company SPRFilling@cscinfo.com Company 801 Addia Stevenson Drive Springfield, It. 62703 Filed In: Rhode Island (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only gog Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) Tal. ORGANIZATIONS NAME Imperial Trucking LLC To INDIVIDUAL'S SURNAME Provide only gog Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) To INDIVIDUAL'S SURNAME Provide only gog Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) DEBTOR'S NAME: Provide only gog Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name, if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) DEBTOR'S NAME: Provide only gog Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor name, if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) DEBTOR'S NAME: Provide only gog Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor name, if any part of the Individual Debtor information in item 10 of the Financing Statement Addendum, (Form UCC1Ad) DEBTOR'S NAME: Provide only gog Debt	B. EMAIL CONTACT AT FILER (poltonal) SPRFIFING@CSCInflo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) TEO 160616 Corporation Service Company 301 Adias Stevenson Drive Springfield, It. 62703 Field In: Rhode Island (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS FOR FILING O	LICC FINANCING STATEMENT				
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