

UCC-1 Form

FILER INFORMATION

Full name: **LOAN OPERATIONS** Phone: **508-946-8772**

CONTACT INFORMATION

Contact name: **ROCKLAND TRUST COMPANY**

Street #1: **30 SOUTH MAIN STREET**

Street #2: **LOAN OPERATIONS**

City: **MIDDLEBORO** State: **MA** ZIP: **02346** Country: **USA**

Notification Method: **E-MAIL** Email: **JBELLAMY@WINOKURLAW.COM**

DEBTOR INFORMATION

Org. Name: **61-67 SLATER AVENUE, LLC**

Mailing Address1: **20 WILLIAM STREET**

Mailing Address2: **SUITE 130**

City: **WELLESLEY** State: **MA** ZIP: **02481** Country: **USA**

SECURED PARTY INFORMATION

Org. Name: **ROCKLAND TRUST COMPANY**

Mailing Address1: **P.O. BOX 32**

City: **MIDDLEBORO** State: **MA** ZIP: **02346** Country: **USA**

TRANSACTION TYPE: STANDARD
COLLATERAL IS / ADMINISTERED BY:
ALTERNATIVE DESIGNATION:

COLLATERAL

All of Debtor's assets, including without limitation, all equipment, machinery, furniture, trade fixtures, inventory of every type and nature, accounts, accounts receivable, documents, instruments, chattel paper and general intangibles, whether now owned or hereafter acquired.