

# UCC-1 Form

---

## FILER INFORMATION

*Full name:* **STEPHEN RENEHAN**

*Email Contact at Filer:* **SRENEHAN@OSBDA.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **OCEAN STATE BUSINESS DEVELOPMENT AUTHORITY**

*Mailing Address:* **155 SOUTH MAIN ST, STE 403**

*City, State Zip Country:* **PROVIDENCE, RI 02903 USA**

---

## DEBTOR INFORMATION

*Org. Name:* **BRAZ REALTY, LLC**

*Mailing Address:* **421-425 WILLETT AVE**

*City, State Zip Country:* **EAST PROVIDENCE, RI 02915 USA**

---

## SECURED PARTY INFORMATION

*Org. Name:* **OCEAN STATE BUSINESS DEVELOPMENT AUTHORITY**

*Mailing Address:* **155 SOUTH MAIN ST, STE 403**

*City, State Zip Country:* **PROVIDENCE, RI 02908 USA**

---

## ASSIGNEE INFORMATION

*Org. Name:* **SMALL BUSINESS ADMINISTRATION**

*Mailing Address:* **380 WESTMINSTER ST**

*City, State Zip Country:* **PROVIDENCE, RI 02903 USA**

---

## TRANSACTION TYPE: STANDARD

---

## COLLATERAL

EQUIPMENT & FIXTURES