

UCC-1 Form

FILER INFORMATION

Full name: **RICHARD NADEAU, ESQ.**

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SEND ACKNOWLEDGEMENT TO

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Mailing Address: **40 WESTMINSTER STREET, SUITE 1100**

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

DEBTOR INFORMATION

Org. Name: **RHODE ISLAND MANUFACTURING INSTITUTE**

Mailing Address: **25 SHARPE DRIVE**

City, State Zip Country: **CRANSTON, RI 02920 USA**

SECURED PARTY INFORMATION

Org. Name: **BUSINESS DEVELOPMENT COMPANY OF RHODE ISLAND**

Mailing Address: **40 WESTMINSTER STREET, SUITE 702**

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

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 11344/63

COLLATERAL

ALL ASSETS OF DEBTOR, INCLUDING WITHOUT LIMITATION ALL TANGIBLE AND INTANGIBLE PERSONAL PROPERTY AND ALL FIXTURES.