

UCC-3 Form - TERMINATION

Original File Number: **009914**

FILER INFORMATION

Full name: **WOLPERT & ASSOCIATES, INC.**

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SEND ACKNOWLEDGEMENT TO

Contact name: **WOLPERT & ASSOCIATES, INC.**

Mailing Address: **10 DORRANCE STREET, SUITE 530**

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

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: CITIZENS BANK, NA
