

UCC-1 Form

FILER INFORMATION

Full name: **ADAM S. CLAVELL, ESQ.**

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SEND ACKNOWLEDGEMENT TO

Contact name: **CLAVELL & ASSOCIATES, P.C.**

Mailing Address: **355 UNION ST.**

City, State Zip Country: **NEW BEDFORD, MA 02740 USA**

DEBTOR INFORMATION

Org. Name: **HAIR WE ARE AND SUNRISE TANNING LLC**

Mailing Address: **311 CASS AVE**

City, State Zip Country: **WOONSOCKET, RI 02895 USA**

SECURED PARTY INFORMATION

Org. Name: **MILFORD FEDERAL BANK**

Mailing Address: **246 MAIN ST.**

City, State Zip Country: **MILFORD, MA 01757 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL ASSETS OF THE DEBTOR WHICH ARE NOW OR HEREAFTER LOCATED AT, OR WHICH ARE NOW OR HEREAFTER USED OR USEFUL IN THE DEBTOR'S OPERATION OF, THE REAL PROPERTY LOCATED AT 311 CASS AVENUE, WOONSOCKET, RHODE ISLAND, AS MORE PARTICULARLY DESCRIBED IN A CERTAIN COMMERCIAL MORTGAGE DEED, SECURITY AGREEMENT AND ASSIGNMENT OF LEASES AND RENTS, DATED AS OF JULY 30, 2018 AND RECORDED IN THE LAND EVIDENCE RECORDS OF THE CITY OF WOONSOCKET IN BOOK 2377, PAGE 96