UCC-1 Form

FILER INFORMATION

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DEBTOR INFORMATION

Org. Name: FIVE TWENTY FIVE, LLC Mailing Address: 1239 HARTFORD AVE City, State Zip Country: JOHNSTON, RI 02919 USA Org. Name: ALBERT J. MARANO, M.D., INCORPORATED Mailing Address: 1239 HARTFORD AVE City, State Zip Country: JOHNSTON, RI 02919 USA

SECURED PARTY INFORMATION

Org. Name: CENTREVILLE BANK Mailing Address: 1218 MAIN STREET City, State Zip Country: WEST WARWICK, RI 02893 USA

TRANSACTION TYPE: STANDARD

COLLATERAL

COLLATERAL MEANS: (A) ALL EQUIPMENT AND MACHINERY, INCLUDING POWER-DRIVEN MACHINERY AND EQUIPMENT, FURNITURE AND FIXTURES NOW OWNED OR HEREAFTER ACQUIRED, TOGETHER WITH ALL REPLACEMENTS THEREOF, ALL ATTACHMENTS, ACCESSORIES, PARTS AND TOOLS BELONGING THERETO OR FOR USE IN CONNECTION THEREWITH. (B) ALL PASSENGER AND COMMERCIAL MOTOR VEHICLES REGISTERED FOR USE UPON PUBLIC HIGHWAYS OR STREETS, NOW OWNED OR HEREINAFTER ACQUIRED, TOGETHER WITH ALL REPLACEMENTS THEREOF, ALL ATTACHMENTS, ACCESSORIES, PARTS, EQUIPMENT AND TOOLS BELONGING THERETO OR FOR USE IN CONNECTION THEREWITH. (C) ALL INVENTORY, RAW MATERIALS, WORK IN PROCESS AND SUPPLIES NOW OWNED OR HEREINAFTER ACQUIRED. (D) ALL ACCOUNTS RECEIVABLE NOW OUTSTANDING OR HEREAFTER ARISING. (E) ALL CONTRACT RIGHTS AND GENERAL INTANGIBLES NOW IN FORCE OR HEREAFTER ACQUIRED.