

UCC-1 Form

FILER INFORMATION

Full name: **ELICIA FERNALD**

Email Contact at Filer: **LFERNALD@CLOZERS.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **VIEIRA & DiGIANFILIPPO, LTD.**

Mailing Address: **480 TURNPIKE STREET**

City, State Zip Country: **SOUTH EASTON, MA 02375 USA**

DEBTOR INFORMATION

Org. Name: **NEWPORT HOLDINGS GROUP LLC**

Mailing Address: **840 SMITHFIELD AVENUE, SUITE 203**

City, State Zip Country: **LINCOLN, RI 02865 USA**

SECURED PARTY INFORMATION

Org. Name: **EASTERN BANK**

Mailing Address: **ONE EASTERN PLACE**

City, State Zip Country: **LYNN, MA 01901 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: NOTE SIGNED 8/26/2019

COLLATERAL

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