

UCC-1 Form

FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

Email Contact at Filer: **RISOSUCCFILINGSV3@CSCGLOBAL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

DEBTOR INFORMATION

Org. Name: **EL QUICHE BAKERY STORE INC**

Mailing Address: **1076 CHALKSTONE AVE**

City, State Zip Country: **PROVIDENCE, RI 02908 USA**

Org. Name: **EL QUICHE BAKERY**

Mailing Address: **1076 CHALKSTONE AVE**

City, State Zip Country: **PROVIDENCE, RI 02908 USA**

SECURED PARTY INFORMATION

Org. Name: **FIRST DATA MERCHANT SERVICES, LLC**

Mailing Address: **4000 CORAL RIDGE DR**

City, State Zip Country: **CORAL SPRINGS, FL 33065 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 1704 50439

COLLATERAL

THE UCC FINANCING STATEMENT WILL OUTLINE FDMS' POSITION AS PROVIDING A CASH ADVANCE IN EXCHANGE FOR A CERTAIN PERCENTAGE OF FUTURE CREDIT CARD RECEIVABLES, WITH CERTAIN RIGHTS IN THE EVENT OF DEFAULT AS OUTLINED IN THE MCA AGREEMENT.