

# UCC-3 Form - TERMINATION

*Original File Number:* **201921665970**

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## **FILER INFORMATION**

*Full name:* **BROOKE LARSEN**

*Email Contact at Filer:* **BROOKE.LARSEN@OZK.COM**

## **SEND ACKNOWLEDGEMENT TO**

*Contact name:* **BANK OZK**

*Mailing Address:* **PO Box 196**

*City, State Zip Country:* **OZARK, AR 72949 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BANK OZK**

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**CUSTOMER REFERENCE: 1780356360**

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