

UCC-3 Form - CONTINUATION

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FILER INFORMATION

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SEND ACKNOWLEDGEMENT TO

Contact name: **BLUESTONE BANK**

Mailing Address: **80 NORTH MAIN ST**

City, State Zip Country: **MANSFIELD, MA 02048 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BLUESTONE BANK

CUSTOMER REFERENCE: SHEAHAN 6 497
