RI SOS Filing Number: 202024046240 Date: 12/30/2020 2:03:00 PM

# **UCC-1 Form**

#### FILER INFORMATION

Full name: **ELLEN CORNEAU** 

Email Contact at Filer: ECORNEAU@SHSLAWFIRM.COM

### SEND ACKNOWLEDGEMENT TO

Contact name: SHECHTMAN HALPERIN SAVAGE, LLP

Mailing Address: 1080 MAIN STREET

City, State Zip Country: PAWTUCKET, RI 02860 USA

### **DEBTOR INFORMATION**

Org. Name: WESTERLY LAND TRUST

Mailing Address: 449 Westerly Bradford Road

City, State Zip Country: Westerly, RI 02891 USA

### SECURED PARTY INFORMATION

Org. Name: THE WASHINGTON TRUST COMPANY

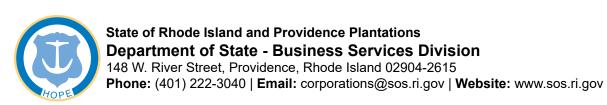
Mailing Address: 23 Broad Street

City, State Zip Country: WESTERLY, RI 02891 USA

TRANSACTION TYPE: STANDARD

## COLLATERAL

UCC-1 FINANCING STATEMENT FORM



# <u>Uniform Commercial Code (UCC) Filing Information</u>

| Hours for filing:     | Public Counter: Monday – Friday 8:30 AM to 4:30 PM Online filing – 24/7   |  |  |  |
|-----------------------|---|--|--|--|
| Information Requests: | Information on specific filings of record with this office will not be given over the Telephone; only general information will be available. UCC11 Information Requests cannot be ordered over the telephone. All filings must be communicated in writing.  |  |  |  |
| Filing Fees:          | Filings must be communicated in writing and will not be accepted unless accompanied by the minimum filing fee. Checks are to be made payable to the Rhode Island Department of State. We accept VISA, MasterCard, Discover, and American Express for all over-the-counter and online transactions. A small enhanced access fee is charged for all credit card transactions. See our website for more information on enhanced access fees. |  |  |  |
| Refunds:              | Refunds will be issued for duplicate payments and rejected documents not corrected within 30-days from the date the filing was submitted to this office. Refunds will not be issued for valid transactions and overpayments in the amount of \$10 or less. Enhanced access fees are not refundable. To request a refund or view our refund policy click <a href="https://example.com/here/">here</a> .                                    |  |  |  |
| Paper Filing Forms:   | The IACA National Filing Forms will be accepted for filing. Rhode Island does provide a state form for UCC11 Information Requests. Please carefully read all instructions prior to filing.  |  |  |  |
| Acknowledgments:      | Acknowledgements are no longer being mailed. If you would like to receive an Acknowledgement of your fling, you <b>MUST</b> provide a valid email address. Complete ITEM C of the filing form to include a valid email address. E-acknowledgements for all approved filings are emailed at 3pm and 8pm daily.   |  |  |  |
| Filing Evidence:      | If you do not receive an Acknowledgement or if you would like to obtain a copy of any recorded UCC, follow these steps:  • Go to our <u>UCC Database</u> • To search for a UCC1 – you must search by debtor name  • To search for a UCC3 – you can search by file number or debtor name  • Click on the filing number to view the filing summary page  • Click on the PDF link to view and print the filing                               |  |  |  |
| Rejected Filings:     | Paper filers will receive their filing and payment via US mail addressed to the individual/entity that submitted the paperwork. Correspondence will accompany the paperwork indicating what steps need to be taken to correct the filling.  |  |  |  |
|                       | You may also use our Rejected Filing Viewer to view the rejected document.  To search for a UCC1 – you must search by debtor name  To search for a UCC3 – you must search by file number  |  |  |  |

| UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS  |   |   |                                      |              |
|--|---|---|--------------------------------------|--------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional)   |   |   |                                      |              |
| B. E-MAIL CONTACT AT FILER (optional)  |   |   |                                      |              |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)  |   |   |                                      |              |
|  | $\neg$  |   |                                      |              |
| '  | '   |   |                                      |              |
|  |   |   |                                      |              |
|  | THE ABOVE S   | PACE IS FOR   | R FILING OFFICE USE C                | DNLY         |
| 1. DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, ful name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide | I name; do not omit, modify, or abbreviate any part |   |                                      |              |
| 1a. ORGANIZATION'S NAME  |   |   | · ·                                  | <u> </u>     |
| OR 1b. INDIVIDUAL'S SURNAME  | FIRST PERSONAL NAME                                 | ADDITION  | AL NAME(S)/INITIAL(S)                | SUFFIX       |
| 1c. MAILING ADDRESS  | CITY  | STATE   | POSTAL CODE                          | COUNTRY      |
| IC. MAILING ADDRESS  | CITY  | SIAIE   | POSTAL CODE                          | COUNTRY      |
| 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here and provide         | name; do not omit, modify, or abbreviate any part   |   |                                      |              |
| 2a. ORGANIZATION'S NAME  |   |   |                                      |              |
| OR 2b. INDIVIDUAL'S SURNAME  | FIRST PERSONAL NAME                                 | ADDITION  | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX |              |
| 2c. MAILING ADDRESS  | CITY  | STATE   | POSTAL CODE                          | COUNTRY      |
|  |   |   |                                      |              |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC 3a. ORGANIZATION'S NAME   | URED PARTY): Provide only one Secured Party n       | ame (3a or 3b)  |                                      |              |
| OR 3b. INDIVIDUAL'S SURNAME  | FIRST PERSONAL NAME                                 | ADDITION  | AL NAME(S)/INITIAL(S)                | SUFFIX       |
| 30. INDIVIDUAL 3 SURVAINE  | TINOT FEROUNAL NAME                                 | ADDITION  | AL NAME(S)/INTTIAL(S)                | 30111X       |
| 3c. MAILING ADDRESS  | CITY  | STATE   | POSTAL CODE                          | COUNTRY      |
| 4. COLLATERAL: This financing statement covers the following collateral:   |   |   |                                      |              |
|  |   |   |                                      |              |
|  |   |   |                                      |              |
|  |   |   |                                      |              |
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|  |   |   |                                      |              |
|  |   |   | ed by a Decedent's Persona           |              |
| 6a. Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home Transaction  | A Debtor is a Transmitting Utility                  | 6b. Check only if applicable and check only one box:  a Transmitting Utility  Agricultural Lien  Non-UCC Filing |                                      |              |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor  | Consignee/Consignor Seller/Buyer                    |   |                                      | see/Licensor |
| 8. OPTIONAL FILER REFERENCE DATA:  |   |   |                                      |              |

#### Instructions for UCC Financing Statement (Form UCC1)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions, especially Instruction 1; use of the correct name for the Debtor is crucial.

Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filing office cannot give legal advice.

Send completed form and any attachments to the filing office, with the required fee.

#### **ITEM INSTRUCTIONS**

A and B. To assist filing offices that might wish to communicate with filer, filer may provide information in item A and item B. These items are optional.

C. Complete item C if filer desires an acknowledgment sent to them. If filing in a filing office that returns an acknowledgment copy furnished by filer, present simultaneously with this form the Acknowledgment Copy or a carbon or other copy of this form for use as an acknowledgment copy.

- 1. **Debtor's name.** Carefully review applicable statutory guidance about providing the debtor's name. Enter <u>only one Debtor name in item 1 --</u> either an organization's name (1a) <u>or</u> an individual's name (1b). If any part of the Individual Debtor's name will not fit in line 1b, check the box in item 1, leave all of item 1 blank, check the box in item 9 of the Financing Statement Addendum (Form UCC1Ad) and enter the Individual Debtor name in item 10 of the Financing Statement Addendum (Form UCC1Ad). Enter Debtor's <u>correct name</u>. Do not abbreviate words that are not already abbreviated in the Debtor's name. If a portion of the Debtor's name consists of only an initial or an abbreviation rather than a full word, enter only the abbreviation or the initial. If the collateral is held in a trust and the Debtor name is the name of the trust, enter trust name in the Organization's Name box in item 1a.
- 1a. <u>Organization Debtor Name</u>. "Organization Name" means the name of an entity that is not a natural person. A sole proprietorship is **not** an organization, even if the individual proprietor does business under a trade name. If Debtor is a registered organization (e.g., corporation, limited partnership, limited liability company), it is advisable to examine Debtor's current filed public organic records to determine Debtor's correct name. Trade name is insufficient. If a corporate ending (e.g., corporation, limited partnership, limited liability company) is part of the Debtor's name, it must be included. Do not use words that are not part of the Debtor's name.
- 1b. Individual Debtor Name. "Individual Name" means the name of a natural person; this includes the name of an individual doing business as a sole proprietorship, whether or not operating under a trade name. The term includes the name of a decedent where collateral is being administered by a personal representative of the decedent. The term does not include the name of an entity, even if it contains, as part of the entity's name, the name of an individual. Prefixes (e.g., Mr., Mrs., Ms.) and titles (e.g., M.D.) are generally not part of an individual name. Indications of lineage (e.g., Jr., Sr., III) generally are not part of the individual's name, but may be entered in the Suffix box. Enter individual Debtor's surname (family name) in Individual's Surname box, first personal name in First Personal Name box, and all additional names in Additional Name(s)/Initial(s) box.

If a Debtor's name consists of only a single word, enter that word in Individual's Surname box and leave other boxes blank.

For both <u>organization and individual Debtors</u>. Do not use Debtor's trade name, DBA, AKA, FKA, division name, etc. in place of or combined with Debtor's correct name; filer may add such other names as additional Debtors if desired (but this is neither required nor recommended).

- 1c. Enter a mailing address for the Debtor named in item 1a or 1b.
- 2. Additional Debtor's name. If an additional Debtor is included, complete item 2, determined and formatted per Instruction 1. For additional Debtors, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP) and follow Instruction 1 for determining and formatting additional names.
- 3. **Secured Party's name.** Enter name and mailing address for Secured Party or Assignee who will be the Secured Party of record. For additional Secured Parties, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP). If there has been a full assignment of the initial Secured Party's right to be Secured Party of record before filing this form, either (1) enter Assignor Secured Party's name and mailing address in item 3 of this form and file an Amendment (Form UCC3) [see item 5 of that form]; or (2) enter Assignee's name and mailing address in item 3 of this form and, if desired, also attach Addendum (Form UCC1Ad) giving Assignor Secured Party's name and mailing address in item 11.
- 4. **Collateral.** Use item 4 to indicate the collateral covered by this financing statement. If space in item 4 is insufficient, continue the collateral description in item 12 of the Addendum (Form UCC1Ad) or attach additional page(s) and incorporate by reference in item 12 (e.g., See Exhibit A). Do not include social security numbers or other personally identifiable information.

Note: If this financing statement covers timber to be cut, covers as-extracted collateral, and/or is filed as a fixture filing, attach Addendum (Form UCC1Ad) and complete the required information in items 13, 14, 15, and 16.

- 5. If collateral is held in a trust or being administered by a decedent's personal representative, check the appropriate box in item 5. If more than one Debtor has an interest in the described collateral and the check box does not apply to the interest of all Debtors, the filer should consider filing a separate Financing Statement (Form UCC1) for each Debtor.
- 6a. If this financing statement relates to a Public-Finance Transaction, Manufactured-Home Transaction, or a Debtor is a Transmitting Utility, check the appropriate box in item 6a. If a Debtor is a Transmitting Utility <u>and</u> the initial financing statement is filed in connection with a Public-Finance Transaction or Manufactured-Home Transaction, check <u>only</u> that a Debtor is a Transmitting Utility.
- 6b. If this is an Agricultural Lien (as defined in applicable state's enactment of the Uniform Commercial Code) or if this is not a UCC security interest filing (e.g., a tax lien, judgment lien, etc.), check the appropriate box in item 6b and attach any other items required under other law.
- 7. **Alternative Designation.** If filer desires (at filer's option) to use the designations lessee and lessor, consignee and consignor, seller and buyer (such as in the case of the sale of a payment intangible, promissory note, account or chattel paper), bailee and bailor, or licensee and licensor instead of Debtor and Secured Party, check the appropriate box in item 7.
- 8. **Optional Filer Reference Data.** This item is optional and is for filer's use only. For filer's convenience of reference, filer may enter in item 8 any identifying information that filer may find useful. Do not include social security numbers or other personally identifiable information.