

# UCC-1 Form

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## FILER INFORMATION

*Full name:* **WOLTERS KLUWER LIEN SOLUTIONS**

*Email Contact at Filer:* **CTLSWEBACK@WOLTERSKLUWER.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **LIEN SOLUTIONS**

*Mailing Address:* **P.O. Box 29071**

*City, State Zip Country:* **GLENDAL, CA 91209-9071 USA**

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## DEBTOR INFORMATION

*Org. Name:* **SILVA BROTHERS WARWICK, INC.**

*Mailing Address:* **88 VALENTINE CIR**

*City, State Zip Country:* **WARWICK, RI 02886-9115 USA**

*Org. Name:* **SILVA BROTHERS WARWICK, INC.**

*Mailing Address:* **325 QUAKER LN**

*City, State Zip Country:* **WEST WARWICK, RI 02893-2122 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **BANK OF AMERICA**

*Mailing Address:* **440 KNOX ABBOTT DRIVE SC3-210-05-01**

*City, State Zip Country:* **CAYCE, SC 29033 USA**

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: RI-0-79597053-60945384**

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## COLLATERAL

A SECURITY INTEREST IN THE FOLLOWING DESCRIBED PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE PLEDGOR (THE "COLLATERAL"):