# **UCC-1 Form**

#### FILER INFORMATION

Full name: **RICHARD F. HENTZ, ESQ.** 

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#### SEND ACKNOWLEDGEMENT TO

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City, State Zip Country: CRANSTON, RI 02905 USA

## **DEBTOR INFORMATION**

Org. Name: H & S HOLDINGS, LLC Mailing Address: 32 PAINE ROAD City, State Zip Country: CUMBERLAND, RI 02864 USA Org. Name: NEUROPSYCHOLOGY PARTNERS, INC. Mailing Address: 450 VETERANS MEMORIAL PARKWAY, UNIT 8B City, State Zip Country: EAST PROVIDENCE, RI 02914 USA

#### SECURED PARTY INFORMATION

Org. Name: NAVIGANT CREDIT UNION

Mailing Address: 1005 DOUGLAS PIKE

City, State Zip Country: SMITHFIELD, RI 02917 USA

## **TRANSACTION TYPE: STANDARD**

#### CUSTOMER REFERENCE: RI SECRETARY OF STATE

## COLLATERAL

"COLLATERAL" MEANS ALL GOODS (INCLUDING WITHOUT LIMITATION INVENTORY, MACHINERY, EQUIPMENT AND FIXTURES AND ANY ACCESSIONS AND ADDITIONS THERETO AND ANY SUBSTITUTIONS OR REPLACEMENTS THEREFOR) AND INSURANCE CLAIMS AND PROCEEDS PAYABLE THEREFOR, LOCATED AT 450 VETERANS MEMORIAL PARKWAY, UNIT 8A, EAST PROVIDENCE, RHODE ISLAND 02914 AND WHETHER NOW OWNED OR HEREAFTER ACQUIRED OR ARISING AND ALL PRODUCTS AND PROCEEDS THEREOF. "EQUIPMENT" INCLUDES ALL MACHINERY, EQUIPMENT, FURNITURE AND FIXTURES AND OTHER PERSONAL PROPERTY OF ANY KIND OR NATURE NOW OWNED OR HEREAFTER ACQUIRED BY DEBTOR AND ALL SPARE AND REPLACEMENT PARTS AND TOOLS THEREFORE; AND FURTHER INCLUDING, WITHOUT LIMITATION, ALL OTHER PROPERTY CONSTITUTING "EQUIPMENT" AS SUCH TERM IS DEFINED IN THE UNIFORM COMMERCIAL CODE.