

UCC-1 Form

FILER INFORMATION

Full name: CORPORATION SERVICE COMPANY

Email Contact at Filer: RISOSUCCFILINGSV3@CSCGLOBAL.COM

SEND ACKNOWLEDGEMENT TO

Contact name: CORPORATION SERVICE COMPANY

Mailing Address: 801 ADLAI STEVENSON DRIVE

City, State Zip Country: SPRINGFIELD, IL 62703 USA

DEBTOR INFORMATION

Org. Name: BRONX CHOPPERS LLC

Mailing Address: 3 SHANNON COURT

City, State Zip Country: BRISTOL, RI 02809 USA

Last Name (i.e. Family Name or Surname): CONSTANTINDES *First Name:* GEORGE

Mailing Address: 218 CLIFF AVE

City, State Zip Country: PORTSMOUTH, RI 02871 USA

SECURED PARTY INFORMATION

Org. Name: CORPORATION SERVICE COMPANY, AS REPRESENTATIVE

Mailing Address: P.O. Box 2576 UCCSPREP@CSCINFO.COM

City, State Zip Country: SPRINGFIELD, IL 62708 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2110 48557

COLLATERAL

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