

UCC-1 Form

FILER INFORMATION

Full name: **STEVEN P. DeLUCA, ESQ.**

Email Contact at Filer: **SPLAMONDON@WDGLAW.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **WIECK DeLUCA GEMMA INCORPORATED**

Mailing Address: **ONE TURKS HEAD PLACE, SUITE 1300**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

DEBTOR INFORMATION

Org. Name: **HLM/PAG LIMITED PARTNERSHIP**

Mailing Address: **5 CATHEDRAL SQUARE**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

SECURED PARTY INFORMATION

Org. Name: **BANK RHODE ISLAND**

Mailing Address: **ONE TURKS HEAD PLACE, SUITE 13**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL BUILDING EQUIPMENT AND FIXTURES USED OR USEABLE IN CONNECTION WITH THE REAL PROPERTY AND IMPROVEMENTS LOCATED AT 1 MAIN STREET, WOONSOCKET, RHODE ISLAND.