

# UCC-3 Form - CONTINUATION

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## FILER INFORMATION

*Full name:*

*Email Contact at Filer:* **DGIAMBAZI@BAYCOASTBANK.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **BAYCOAST BANK**

*Mailing Address:* **330 SWANSEA MALL DRIVE**

*City, State Zip Country:* **SWANSEA, MA 02777 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BAYCOAST BANK**

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