

UCC-3 Form - AMENDMENT

AMENDMENT ACTION - SECURED PARTY CHANGE

Original File Number: **201110688340**

FILER INFORMATION

Full name: **CRYSTAL OLIVEIRA**

Email Contact at Filer: **COLIVEIRA@HARBORONE.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **HARBORONE BANK**

Mailing Address: **770 OAK STREET**

City, State Zip Country: **BROCKTON, MA 02301 USA**

CURRENT RECORD INFORMATION

Org. Name: **COASTWAY COMMUNITY BANK**

SECURED PARTY INFORMATION

Org. Name: **HARBORONE BANK**

Mailing Address: **770 OAK STREET**

City, State Zip Country: **BROCKTON, MA 02301 USA**

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

CUSTOMER REFERENCE: **THE BLIND KING 12201700011034**
