

UCC-1 Form

FILER INFORMATION

Full name: **ALEXANDRA W. PEZZELLO, ESQ.**

Email Contact at Filer: **DWILDGOOSE@PSH.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **PARTRIDGE SNOW & HAHN LLP**

Mailing Address: **40 WESTMINSTER ST., STE. 1100**

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

DEBTOR INFORMATION

Org. Name: **FORTY 1° NORTH, LLC**

Mailing Address: **351 THAMES STREET**

City, State Zip Country: **NEWPORT, RI 02840 USA**

SECURED PARTY INFORMATION

Org. Name: **CITIZENS BANK, N.A.**

Mailing Address: **ONE CITIZENS PLAZA**

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

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 965-1572 #4180489 (FILE WITH RI SECRETARY OF STATE)

COLLATERAL

ALL ASSETS OF THE DEBTOR, INCLUDING WITHOUT LIMITATION ALL TANGIBLE AND INTANGIBLE PERSONAL PROPERTY AND ALL FIXTURES.