

UCC-1 Form

FILER INFORMATION

Full name: **ONLINE DEPT.**

Email Contact at Filer: **SPRS@FICOSO.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **FIRST CORPORATE SOLUTIONS INC.**

Mailing Address: **914 S STREET**

City, State Zip Country: **SACRAMENTO, CA 95811 USA**

DEBTOR INFORMATION

Org. Name: **SIMS ENTERPRISES LLC**

Mailing Address: **27B ASSELIN STREET, UNIT 3**

City, State Zip Country: **WARREN, RI 02885 USA**

SECURED PARTY INFORMATION

Org. Name: **FIRST CORPORATE SOLUTIONS, AS REPRESENTATIVE**

Mailing Address: **914 S STREET / SPRS@FICOSO.COM**

City, State Zip Country: **SACRAMENTO, CA 95811 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: [UCC1-903416]

COLLATERAL

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