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: **VALLEY APPLIANCE AND MERCHANDISING COMPANY**

Mailing Address: **1725 MENDON ROAD, SUITE 207**

City, State Zip Country: **CUMBERLAND, RI 02864 USA**

SECURED PARTY INFORMATION

Org. Name: **BUSINESS DEVELOPMENT COMPANY OF RHODE ISLAND**

Mailing Address: **40 WESTMINSTER STREET, SUITE 702**

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

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: #4238740 (11344-90) - TO BE FILED WITH RI SECRETARY OF STATE

COLLATERAL

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