RI SOS Filing Number: 202226639420 Date: 4/7/2022 12:24:00 PM

UCC-1 Form

FILER INFORMATION

Full name: JOANN FERRIS

Email Contact at Filer: JOANN.FERRIS@BANKNEWPORT.COM

SEND ACKNOWLEDGEMENT TO

Contact name: BANKNEWPORT

Mailing Address: 184 John Clarke Road

City, State Zip Country: MIDDLETOWN, RI 02842 USA

DEBTOR INFORMATION

Org. Name: RHODE ISLAND MOORING SERVICES INC

Mailing Address: 15 PATROL ROAD

City, State Zip Country: NORTH KINGSTOWN, RI 02852 USA

SECURED PARTY INFORMATION

Org. Name: BANKNEWPORT

Mailing Address: 184 JOHN CLARKE ROAD

City, State Zip Country: MIDDLETOWN, RI 02842 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI MOORING SERVICES INC

COLLATERAL

The following collateral now owned or hereafter acquired: all accounts, notes, drafts, acceptances and other forms of obligations, and receivables from goods sold or services rendered, all guarantees and securities therefor, all of Debtor's rights earned or to be earned hereafter under contract(s) to sell goods or to render services, and in the proceeds thereof; all goods, merchandise and other personal property held and intended for sale or other disposition by the Debtor and materials and supplies of every nature useable in connection with the selling or furnishing of such goods, merchandise and other personal property, including leasehold buildings and improvements, and additions and successions thereto: as well as all contract rights with respect thereto and all documents representing the same: all machinery, equipment, including automotive equipment, fixtures, furniture, parts, tools, dies, attachments, supplies and all substitutions therefor and replacements thereof and any and all additions and successions thereto including general intangibles—now owner of hereafter acquired by debtor.