

# UCC-3 Form - CONTINUATION

*Original File Number:* **201717973010**

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## **FILER INFORMATION**

*Full name:* **WOLTERS KLUWER LIEN SOLUTIONS**

*Email Contact at Filer:* **CTLSWEBACK@WOLTERSKLUWER.COM**

## **SEND ACKNOWLEDGEMENT TO**

*Contact name:* **JOHN JAMES**

*Mailing Address:* **2929 ALLEN PKWY STE 3300**

*City, State Zip Country:* **HOUSTON, TX 77019 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BANK RHODE ISLAND**

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**CUSTOMER REFERENCE: RI-0-85866315-63554750**

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