

# UCC-1 Form

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## FILER INFORMATION

*Full name:* **ROBERT AMEEN**

*Email Contact at Filer:* **ROBERTJAMEEN@GMAIL.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:*

*Mailing Address:* **390 NEWPORT AVENUE**

*City, State Zip Country:* **PAWTUCKET, RI 02861 USA**

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## DEBTOR INFORMATION

*Org. Name:* **MARY CO**

*Mailing Address:* **1100 NEWPORT AVENUE**

*City, State Zip Country:* **PAWTUCKET, RI 02861 USA**

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## SECURED PARTY INFORMATION

*Last Name (i.e. Family Name or Surname):* **AYOUB** *First Name:* **MAHER**

*Mailing Address:* **810 NEWPORT AVENUE**

*City, State Zip Country:* **ATTLEBORO, MA 02703 USA**

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## TRANSACTION TYPE: STANDARD

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## COLLATERAL

ALL TANGIBLE AND INTANGIBLE ASSETS, NOW OWNED OR HEREAFTER ACQUIRED BY DEBTOR, TOGETHER WITH ALL ACCESSIONS THERETO, AND ALL SUBSTITUTIONS AND REPLACEMENTS THEREOF AND PARTS THEREFORE, AND ALL OTHER ITEMS NOT SPECIFICALLY SET FORTH HEREIN BUT WHICH CONSTITUTE "EQUIPMENT", "RECEIVABLES" OR "INVENTORY" UNDER THE UCC; AND ALL CASH AND NON-CASH PROCEEDS OF THE FOREGOING, INCLUDING INSURANCE PROCEEDS.