

UCC-1 Form

FILER INFORMATION

Full name: **PETER A. SAULINO, ESQ.**

Email Contact at Filer: **MREFFELT@SAULINOANDSILVIA.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **BAYCOAST BANK**

Mailing Address: **330 SWANSEA MALL DRIVE**

City, State Zip Country: **SWANSEA, MA 02777 USA**

DEBTOR INFORMATION

Org. Name: **THE FRANKLIN, LLC**

Mailing Address: **268 NANAQUAKET ROAD**

City, State Zip Country: **TIVERTON, RI 02878 USA**

SECURED PARTY INFORMATION

Org. Name: **BAYCOAST BANK**

Mailing Address: **330 SWANSEA MALL DRIVE**

City, State Zip Country: **SWANSEA, MA 02777 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 195 FRANKLIN STREET, BRISTOL, RI 02809

COLLATERAL

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