

UCC-3 Form - AMENDMENT

AMENDMENT ACTION - SECURED PARTY CHANGE

Original File Number: **200705386160**

FILER INFORMATION

Full name: **AIDA ARANGO**

Email Contact at Filer: **AARANGO@HARBORONE.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **HARBORONE BANK**

Mailing Address: **770 OAK STREET**

City, State Zip Country: **BROCKTON, MA 02301 USA**

CURRENT RECORD INFORMATION

Org. Name: **COASTWAY CREDIT UNION**

SECURED PARTY INFORMATION

Org. Name: **HARBORONE BANK**

Mailing Address: **770 OAK STREET**

City, State Zip Country: **BROCKTON, MA 02301 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: HARBORONE BANK

CUSTOMER REFERENCE: HOPE ALZHEIMERS 8609100091040
