

UCC-1 Form

FILER INFORMATION

Full name: **SEAN COLE**

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SEND ACKNOWLEDGEMENT TO

Contact name: **CENTREVILLE BANK**

Mailing Address: **1218 MAIN ST**

City, State Zip Country: **WEST WARWICK, RI 02893 USA**

DEBTOR INFORMATION

Org. Name: **THE QUEASTOR GROUP LLC**

Mailing Address: **1000 CHAPEL VIEW BLVD SUITE 220**

City, State Zip Country: **CRANSTON, RI 02920 USA**

SECURED PARTY INFORMATION

Org. Name: **CENTREVILLE BANK**

Mailing Address: **1218 MAIN ST**

City, State Zip Country: **WEST WARWICK, RI 02893 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

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