

UCC-1 Form

FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

Email Contact at Filer: **RISOSUCCFILINGSV3@CSCGLOBAL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

DEBTOR INFORMATION

Org. Name: **A.R.S. RESTORATION SPECIALISTS, LLC**

Mailing Address: **38 CRAFT STREET**

City, State Zip Country: **NEWTON, MA 02458 USA**

SECURED PARTY INFORMATION

Org. Name: **ROSENTHAL & ROSENTHAL, INC.**

Mailing Address: **1370 BROADWAY**

City, State Zip Country: **NEW YORK, NY 10018 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2377 86016

COLLATERAL

ALL ASSETS OF THE DEBTOR