

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: **STAR PETRO, INC**

Mailing Address: **173 DANIELSON PIKE**

City, State Zip Country: **FOSTER, RI 02825 USA**

Last Name (i.e. Family Name or Surname): **GYULESERYAN** *First Name:* **LUCINE**

Mailing Address: **173 B DANIELSON PIKE**

City, State Zip Country: **FOSTER, RI 02825 USA**

SECURED PARTY INFORMATION

Org. Name: **NATIONAL FUNDING, INC.**

Mailing Address: **9530 TOWN CENTRE DRIVE, SUITE 120**

City, State Zip Country: **SAN DIEGO, CA 92121 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2464 20685

COLLATERAL

ALL ACCOUNTS AND ACCOUNTS RECEIVABLE OF THE DEBTOR, WHETHER NOW OWNED OR HEREAFTER ACQUIRED AS SUCH TERMS MAY BE DEFINED IN THE UNIFORM COMMERCIAL CODE. FOR NEW JERSEY, THE COLLATERAL DESCRIBED IS WITHIN THE SCOPE OF ARTICLE 9 AS ADOPTED BY N.J. PURSUANT TO 12A:9-102 AND 12A:9-109.