

UCC-3 Form - TERMINATION

Original File Number: **201211300790**

FILER INFORMATION

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SEND ACKNOWLEDGEMENT TO

Contact name: **BANK RHODE ISLAND**

Mailing Address: **ONE TURKS HEAD PLACE**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: BANK RHODE ISLAND
