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# **UCC-1 Form**

#### FILER INFORMATION

Full name: WOLTERS KLUWER LIEN SOLUTIONS

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Contact name: LIEN SOLUTIONS Mailing Address: P.O. Box 29071

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## **DEBTOR INFORMATION**

Org. Name: HR PROVIDENCE INC

Mailing Address: 361 RESERVOIR AVE UNIT 1B City, State Zip Country: PROVIDENCE, RI 02907 USA

## SECURED PARTY INFORMATION

Org. Name: TD BANK, NATIONAL ASSOCIATION

Mailing Address: 1701 ROUTE 70 EAST

City, State Zip Country: CHERRY HILL, NJ 08034 USA

TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: RI-0-91245571-65862732** 

## COLLATERAL

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