

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: **CBW I, LLC**

Mailing Address: **3 KEYES WAY**

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

SECURED PARTY INFORMATION

Org. Name: **CAMP BOW WOW FRANCHISING, INC.**

Mailing Address: **7577 W 103RD AVE, UNIT 209**

City, State Zip Country: **WESTMINSTER, CO 80021 USA**

TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: LICENSEE-LICENSOR

CUSTOMER REFERENCE: 2631 62111

COLLATERAL

ALL OF THE FURNITURE, FIXTURES, ASSETS, EQUIPMENT, SIGNAGE, AND REALTY (INCLUDING ALL OF DEBTORS INTERESTS UNDER ANY REAL PROPERTY AND PERSONAL PROPERTY LEASES) USED TO OPERATE THE BUSINESS, TOGETHER WITH ALL SIMILAR PROPERTY NOW OWNED OR HEREFTER ACQUIRED.