

UCC-1 Form

FILER INFORMATION

Full name:

Email Contact at Filer: **LELAND.DUNKELMAN@SBA.GOV**

SEND ACKNOWLEDGEMENT TO

Contact name: **US SMALL BUSINESS ASSOCIATION PROCESSING AND DISBURSEMENT CENTER**

Mailing Address: **14925 KINGSPOUR RD**

City, State Zip Country: **FORT WORTH, TX 76155 USA**

DEBTOR INFORMATION

Org. Name: **CLUB SODA, INC.**

Mailing Address: **PO BOX 1262**

City, State Zip Country: **BLOCK ISLAND, RI 02807 USA**

SECURED PARTY INFORMATION

Org. Name: **US SMALL BUSINESS ADMINISTRATION**

Mailing Address: **NORTH 20TH STREET, SUITE 320**

City, State Zip Country: **BIRMINGHAM, AL 35203 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

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