

UCC-1 Form

FILER INFORMATION

Full name: **CAPITOL LIEN**

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SEND ACKNOWLEDGEMENT TO

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DEBTOR INFORMATION

Org. Name: **NETWORK AND SIMULATION TECHNOLOGIES INCORPORATED**

Mailing Address: **1 CORPORATE PLACE, 2ND FLOOR**

City, State Zip Country: **MIDDLETOWN, RI 02842 USA**

SECURED PARTY INFORMATION

Org. Name: **LIVE OAK BANKING COMPANY, AS ADMINISTRATIVE AGENT**

Mailing Address: **1741 TIBURON DRIVE**

City, State Zip Country: **WILMINGTON, NC 28403 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL ASSETS