UCC-1 Form

FILER INFORMATION

Full name: JAMES A. IACOI, ES Q

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SEND ACKNOWLEDGEMENT TO

Contact name: IACOI & IACOI, ATTORNEYS AND COUNSELORS AT LAW Mailing Address: 171 BROADWAY

City, State Zip Country: PROVIDENCE, RI 02903 USA

DEBTOR INFORMATION

Org. Name: ATLANTIC BEACH PARK, INC. Mailing Address: 4 MISQUAMICUT HILLS ROAD City, State Zip Country: WESTERLY, RI 02891 USA

SECURED PARTY INFORMATION

Org. Name: WESTERLY COMMUNITY CREDIT UNION Mailing Address: 4979 Tower Hill Road City, State Zip Country: WAKEFIELD, RI 02879 USA

TRANSACTION TYPE: STANDARD

COLLATERAL

(I) THAT CERTAIN CLASS B VICTUALER LIQUOR LICENSE NO. BUS-23-279, OWNED BY DEBTOR AND ISSUED UNDER THE NAME "WINDJAMMER" AND ISSUED BY THE TOWN OF WESTERLY, RHODE ISLAND, AND (II) ALL PRESENT AND FUTURE LICENSES, PERMITS, CONSENTS AND APPROVALS AND ALL RENEWALS, REPLACEMENTS, EXTENSION THEREOF AND ALL ADDITIONS AND AMENDMENTS THERETO (COLLECTIVELY THE "LICENSES") NECESSARY FOR OR APPROPRIATE TO THE OPERATION OF DEBTOR'S BUSINESS LOCATED AT 321 ATLANTIC AVENUE, WESTERLY, RHODE ISLAND