

UCC-3 Form - CONTINUATION

Original File Number: **201921112960**

FILER INFORMATION

Full name: **JEFF WRIGHT**

Email Contact at Filer: **JWRIGHT@HARBORONE.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **OLSON & PARENT FUNERAL HOME INC**

Mailing Address: **417 PLAINFIELD STREET**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: HARBORONE BANK
