UCC-1 Form

FILER INFORMATION

Full name: **SEAN COLE** *Email Contact at Filer:* **SCOLE@CENTREVILLEBANK.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: CENTREVILLE BANK

Mailing Address: 1218 MAIN ST

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

DEBTOR INFORMATION

Org. Name: SANDERSON COMMERCE LLC Mailing Address: 21 SANDERSON RD City, State Zip Country: SMITHFIELD, RI 02917 USA Org. Name: NELSON OIL CO INC Mailing Address: 21 SANDERSON RD City, State Zip Country: SMITHFIELD, RI 02917 USA Org. Name: DEREK YOUNG LLC Mailing Address: 21 SANDERSON RD

City, State Zip Country: SMITHFIELD, RI 02917 USA

SECURED PARTY INFORMATION

Org. Name: CENTREVILLE BANK Mailing Address: 1218 MAIN ST City, State Zip Country: WEST WARWICK, RI 02893 USA

TRANSACTION TYPE: STANDARD

COLLATERAL

COLLATERAL MEANS: (A) ALL EQUIPMENT AND MACHINERY, INCLUDING POWER-DRIVEN MACHINERY AND EQUIPMENT, FURNITURE AND FIXTURES NOW OWNED OR HEREAFTER ACQUIRED, TOGETHER WITH ALL REPLACEMENTS THEREOF, ALL ATTACHMENTS, ACCESSORIES, PARTS AND TOOLS BELONGING THERETO OR FOR USE IN CONNECTION THEREWITH. (B) ALL INVENTORY, RAW MATERIALS, WORK IN PROCESS AND SUPPLIES NOW OWNED OR HEREINAFTER ACQUIRED. (C) ALL ACCOUNTS RECEIVABLE NOW OUTSTANDING OR HEREAFTER ARISING. (D) ALL CONTRACT RIGHTS AND GENERAL INTANGIBLES NOW IN FORCE OR HEREAFTER ACQUIRED.