

UCC-1 Form

FILER INFORMATION

Full name: SEAN COLE

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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: ELEMENTARY LLC

Mailing Address: 235 BROADWAY

City, State Zip Country: PROVIDENCE, RI 02903 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

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