

UCC-1 Form

FILER INFORMATION

Full name:

Email Contact at Filer: DBREWER@BSKLLP.COM

SEND ACKNOWLEDGEMENT TO

Contact name: ROBERT A. RAGOSTA, LTD.

Mailing Address: 663 ATWOOD AVENUE

City, State Zip Country: CRANSTON, RI 02920 USA

DEBTOR INFORMATION

Org. Name: COAST TO COAST FULFILLMENT, INC.

Mailing Address: 773 VICTORY HIGHWAY ROUTE 102

City, State Zip Country: WEST GREENWICH, RI 02817 USA

SECURED PARTY INFORMATION

Org. Name: BANK RHODE ISLAND

Mailing Address: ONE TURKS HEAD PLACE, 15TH FLOOR

City, State Zip Country: PROVIDENCE, RI 02903 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: P212853.0041 (1ST)

COLLATERAL

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