

# UCC-3 Form - CONTINUATION

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## FILER INFORMATION

*Full name:*

*Email Contact at Filer:* **NDENISSEN@INCREDIBLEBANK.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **INCREDIBLEBANK**

*Mailing Address:* **327 N 17TH AVE**

*City, State Zip Country:* **WAUSAU, WI 54402 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: INCREDIBLEBANK**

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**CUSTOMER REFERENCE: COMMERCIAL SALES & MARKETING INC**

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