UCC-3 Form - TERMINATION

Original File Number: **202125548120**

FILER INFORMATION

Full name: **MICHAEL E. LEVINSON**

Email Contact at Filer: **KFORTIN@BRAINSKYLEVINSON.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **BRAINSKY LEVINSON LLC**

Mailing Address: **1543 FALL RIVER AVE, STE 1**

City, State Zip Country: **SEEKONK, MA 02771 USA**

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