## UCC-3 Form - TERMINATION

Original File Number: 202023459140

## FILER INFORMATION

Full name: **RyAN CONDON** Email Contact at Filer: CMLSERVICING@CENTREVILLEBANK.COM

## SEND ACKNOWLEDGEMENT TO

Contact name: CENTREVILLE BANK Mailing Address: 1218 MAIN STREET

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

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

**CUSTOMER REFERENCE: 501 CENTERVILLE LLC**