

UCC-1 Form

FILER INFORMATION

Full name: **MARIANNE E. BAILEY**

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SEND ACKNOWLEDGEMENT TO

Contact name: **PHILLIPS LYTLE LLP**

Mailing Address: **28 E. MAIN STREET, SUITE 1400**

City, State Zip Country: **ROCHESTER, NY 14614 USA**

DEBTOR INFORMATION

Org. Name: **GILBANE DEVELOPMENT COMPANY**

Mailing Address: **7 JACKSON WALKWAY**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

SECURED PARTY INFORMATION

Org. Name: **JPMORGAN CHASE BANK, N.A.**

Mailing Address: **875 15TH STREET NW, 8TH FLOOR**

City, State Zip Country: **WASHINGTON, DC 20005 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: STATE OF RHODE ISLAND-CHASE/BCP II LLC (ASSIGNMENT OF DEV FEES) 5639787 21(B)

COLLATERAL

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