

# UCC-3 Form - CONTINUATION

*Original File Number:* **202023012390**

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## **FILER INFORMATION**

*Full name:* **CORPSMART**

*Email Contact at Filer:* **FILINGS@CORP-SMART.COM**

## **SEND ACKNOWLEDGEMENT TO**

*Contact name:* **CORPSMART**

*Mailing Address:* **106 5TH AVE SE**

*City, State Zip Country:* **OLYMPIA, WA 98501 USA**

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**NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: FIRST SAVINGS BANK**

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