

UCC-3 Form - CONTINUATION

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FILER INFORMATION

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SEND ACKNOWLEDGEMENT TO

Contact name: **COUNTRY BANK FOR SAVINGS**

Mailing Address: **15 SOUTH STREET, SUITE C**

City, State Zip Country: **WARE, MA 01082 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: COUNTRY BANK FOR SAVINGS

CUSTOMER REFERENCE: BLUTH LLC xx3800
