

UCC-1 Form

FILER INFORMATION

Full name: **IMMACULATE WANJIRU**

Email Contact at Filer: **FULFILLMENT@MIDDESK.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **MIDDESK, INC.**

Mailing Address: **85 2ND STREET SUITE 710**

City, State Zip Country: **SAN FRANCISCO, CA 94105 USA**

DEBTOR INFORMATION

Org. Name: **BO'S BAR AND BILLARDS INC.**

Mailing Address: **33 LAMBERT LIND HWY**

City, State Zip Country: **WARWICK, RI 02886 USA**

SECURED PARTY INFORMATION

Org. Name: **WEBBANK, ITS SUCCESSORS AND ASSIGNEES**

Mailing Address: **215 SOUTH STATE STREET STE 1000**

City, State Zip Country: **SALT LAKE CITY, UT 84111 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: h7T9449J1d Q

COLLATERAL

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