

UCC-3 Form - Continuation

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FILER INFORMATION

Full name: **CT LIEN SOLUTIONS** Phone: **(800)331-3282**

CONTACT INFORMATION

Contact name: **CT LIEN SOLUTIONS**

Street #1: **P.O. BOX 29071**

Street #2: **ORDER:54196621**

City: **GLENDALE** State: **CA** ZIP: **91209-9071** Country: **USA**

Notification Method: **E-MAIL** Email: **SOSACK@UCCDIRECT.COM**

DEBTOR INFORMATION

Org. Name: **COURTESY HYUNDAI, INC.**

Org. Type: **CORPORATION** Jurisdiction: **RI** Org. ID: **000273335**

Mailing Address1: **939 NEWPORT AVENUE**

City: **PAWTUCKET** State: **RI** ZIP: **02861** Country: **USA**

SECURED PARTY INFORMATION

Org. Name: **MANUFACTURERS AND TRADERS TRUST COMPANY**

Mailing Address1: **ONE FOUNTAIN PLAZA, 3RD FLOOR**

Mailing Address2: **ATTN: COLLATERAL & DOCUMENTATION DEPT.**

City: **BUFFALO** State: **NY** ZIP: **14203** Country: **USA**

TRANSACTION TYPE: **STANDARD**

COLLATERAL IS / ADMINISTERED BY:

ALTERNATIVE DESIGNATION: