

UCC-1 Form

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:54928242

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

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

DEBTOR INFORMATION

Org. Name: POLKA KING, LLC

Mailing Address1: 1041 N. FORMOSA AVENUE

Mailing Address2: ROOM 3

City: WEST HOLLYWOOD *State:* CA *ZIP:* 90046 *Country:* USA

SECURED PARTY INFORMATION

Org. Name: SCREEN ACTORS GUILD-AMERICAN FEDERATION OF TELEVISION AND RADIO ARTISTS

Mailing Address1: 1900 BROADWAY, 5TH FLOOR

City: NEW YORK *State:* NY *ZIP:* 10023 *Country:* USA

TRANSACTION TYPE: STANDARD

COLLATERAL IS / ADMINISTERED BY:

ALTERNATIVE DESIGNATION:

COLLATERAL

AS SECURITY FOR THE PROMPT AND COMPLETE PAYMENT AND PERFORMANCE WHEN DUE OF ALL OBLIGATIONS OF DEBTOR(S) TO SECURED PARTY UNDER THE SECURITY AGREEMENT, DEBTOR(S) GRANTS TO SECURED PARTY A CONTINUING SECURITY INTEREST IN ALL PERSONAL AND INTELLECTUAL PROPERTY OF DEBTOR IN CONNECTION WITH THE MOTION PICTURE CURRENTLY ENTITLED "THE POLKA KING"(THE PICTURE").