

UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

Email Contact at Filer: **CTLSWEBACK@WOLTERSKLUWER.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **LIEN SOLUTIONS**

Mailing Address: **P.O. Box 29071**

City, State Zip Country: **GLENDALE, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **GRO TRUCKING LLC**

Mailing Address: **867 ATWELLS AVE #1**

City, State Zip Country: **PROVIDENCE, RI 02909 USA**

Last Name (i.e. Family Name or Surname): **SALMERON** *First Name:* **HOMERO**

Mailing Address: **867 ATWELLS AVE #1**

City, State Zip Country: **PROVIDENCE, RI 02909 USA**

Last Name (i.e. Family Name or Surname): **SALMERON-CASTRO** *First Name:* **HOMERO**

Mailing Address: **867 ATWELLS AVE #1**

City, State Zip Country: **PROVIDENCE, RI 02909 USA**

SECURED PARTY INFORMATION

Org. Name: **SALVEO 119 TRUST**

Mailing Address: **9300 METCALF AVENUE**

City, State Zip Country: **OVERLAND PARK, KS 66212 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-70282498-57214206

COLLATERAL

ALL ASSETS, INCLUDING, BUT NOT LIMITED TO, ALL REAL AND PERSONAL PROPERTY, ACCOUNTS AND ACCOUNTS RECEIVABLE OF DEBTOR, WHEREVER LOCATED OR SITUATED AND WHETHER NOW EXISTING OR ARISING IN THE FUTURE, AND WHETHER NOW OWNED OR AT ANY TIME IN THE FUTURE ACQUIRED BY DEBTOR, TOGETHER WITH ALL PROCEEDS AND MONIES DUE OR BECOMING DUE ON SUCH ACCOUNTS; ALL GUARANTIES, INSURANCE, AND SECURITY FOR SUCH ACCOUNTS AND OTHER ASSETS; ALL SECURITY RESERVES RELATED TO SUCH ACCOUNTS; ALL OF THE DEBTOR'S RIGHTS AND INTERESTS IN THE GOODS GIVING RISE TO SUCH ACCOUNTS, INCLUDING ANY AND ALL RELATED INSURANCE; ALL OF THE DEBTOR'S CHATTEL PAPERS, INSTRUMENTS, GENERAL INTANGIBLES, SECURITIES AND CONTRACT RIGHTS INCLUDING THOSE ASSOCIATED WITH THE ACCOUNTS OR PURCHASE ORDER CONTRACTS OF DEBTOR; ALL EQUIPMENT, INVENTORY, AND DEPOSIT ACCOUNTS; AND ALL PROCEEDS OF ANY OF THE FOREGOING ASSETS AND RELATED RIGHTS AND INTERESTS.