

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: **COMPLETE IRRIGATION SERVICES, INC.**

Mailing Address: **3 INDUSTRIAL DR**

City, State Zip Country: **SMITHFIELD, RI 02917 USA**

SECURED PARTY INFORMATION

Org. Name: **JCB FINANCE, A PROGRAM OF BANK OF THE WEST**

Mailing Address: **1625 W. FOUNTAINHEAD PKWY, AZ-FTN-10C-A AZ-FTN-10C-A**

City, State Zip Country: **TEMPE, AZ 85282 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-70453504-57282022

COLLATERAL

1 JCB 8029 S/N: 2315376 AND ALL RELATED EQUIPMENT LEASED OR FINANCED FROM JCB FINANCE, A PROGRAM OF BANK OF THE WEST INCLUDING, BUT NOT LIMITED TO THOSE ITEMS AND PROCEEDS THEREOF, SET FORTH IN THE AGREEMENT LISTED BELOW AND IN ANY AND ALL SUBSEQUENT ADDENDUMS AND SCHEDULES TO THE AGREEMENT. AGREEMENT # 1269722.