# 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:* **L & M BOISCLAIR CONSTRUCTION, INC.**

*Mailing Address:* **3070 SOUTH COUNTY TRAIL**

*City, State Zip Country:* **WEST KINGSTON, RI 02892 USA**

## SECURED PARTY INFORMATION

*Org. Name:* **KUBOTA CREDIT CORPORATION, U.S.A.**

*Mailing Address:* **PO BOX 2046**

*City, State Zip Country:* **GRAPEVINE, TX 76099 USA**

## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: RI-0-70695318-57379799**

## COLLATERAL

KUBOTA KX057-4R3A 30706 EXCAVATOR W/RUB TRKS/AC CAB/AN;KUBOTA K7937A *HYDRAULIC THUMB;