

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: **LAIRES AND SON AUTO REPAIR, INC.**

Mailing Address: **158 WATERMAN AVE**

City, State Zip Country: **EAST PROVIDENCE, RI 02914 USA**

Org. Name: **LAIRES & SON AUTO SALES & REPAIRS**

Mailing Address: **158 WATERMAN AVE**

City, State Zip Country: **EAST PROVIDENCE, RI 02914 USA**

SECURED PARTY INFORMATION

Org. Name: **NEXTGEAR CAPITAL, INC.**

Mailing Address: **1320 CITY CENTER DR. STE 100**

City, State Zip Country: **CARMEL, IN 46032 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-70701336-57382859

COLLATERAL

ALL DEBTORS ASSETS AND PROPERTIES WHEREVER LOCATED, INCLUDING WITHOUT LIMITATION ALL EQUIPMENT OF ANY KIND OR NATURE, ALL VEHICLES, VEHICLE PARTS AND INVENTORY NOW OWNED OR HEREAFTER ACQUIRED, WITHOUT LIMITATION, PURCHASE MONEY INVENTORY, THE PURCHASE OF WHICH WAS FINANCED OR FLOORPLANNED BY NEXTGEAR CAPITAL, INC. FOR DEBTOR OF WHATEVER KIND OR NATURE, AND ALL RETURNS, REPOSSESSIONS, EXCHANGES, SUBSTITUTIONS, ATTACHMENTS, ADDITIONS, ACCESSIONS, ACCESSORIES, REPLACEMENTS, AND PROCEEDS THEREOF; ALL ACCOUNTS, ACCOUNTS RECEIVABLE, CHATTEL PAPER, AND GENERAL INTANGIBLES NOW OWNED OR HEREAFTER ACQUIRED BY DEBTOR TOGETHER WITH THE PROCEEDS THEREOF; ALL OF DEBTORS DOCUMENTS, BOOKS AND RECORDS RELATING TO THE FORGOING.