

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: **F. CASSISI, INC.**

Mailing Address: **31 OAKDALE AVE**

City, State Zip Country: **JOHNSTON, RI 02919 USA**

SECURED PARTY INFORMATION

Org. Name: **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-0-71522580-57698434

COLLATERAL

1NEW LEEBOY 8520 ASPHALT PAVER SN:228594 AND ALL RELATED EQUIPMENT LEASED OR FINANCED FROM 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 # 2406764.