

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **BELLA RENOVATIONS, INC**

Mailing Address: **1241 PHENIX AVENUE**

City, State Zip Country: **CRANSTON, RI 02921 USA**

Last Name (i.e. Family Name or Surname): **FISHER** *First Name:* **JOHN** *Middle Name:* **J**

Mailing Address: **1241 PHENIX AVENUE**

City, State Zip Country: **CRANSTON, RI 02921 USA**

SECURED PARTY INFORMATION

Org. Name: **EMERALD GROUP HOLDINGS LLC**

Mailing Address: **244 5TH AVENUE, STE E 298**

City, State Zip Country: **NEW YORK, NY 10001 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-71992305-57879502

COLLATERAL

ALL PERSONAL PROPERTY OF EVERY KIND AND NATURE, INCLUDING, WITHOUT LIMITATION, ALL ACCOUNTS, CONTRACT RIGHTS, RIGHTS TO THE PAYMENT OF MONEY, INSURANCE CLAIMS AND PROCEEDS, CHATTEL PAPER, ELECTRIC CHATTEL PAPER, DOCUMENTS, INSTRUMENTS, SECURITIES AND OTHER INVESTMENT PROPERTY, DEPOSIT ACCOUNTS, SUPPORTING OBLIGATIONS OF EVERY NATURE, AND GENERAL INTANGIBLES, INCLUDING WITHOUT LIMITATION, CUSTOMER LISTS, AND ALL BOOKS AND RECORDS RELATED THERETO, AND ALL RECORDED DATA OF ANY KIND AND ANY NATURE, REGARDLESS OF THE MEDIUM OF RECORDING; TOGETHER WITH, TO THE EXTENT NOT LISTED ABOVE AS THE ORIGINAL COLLATERAL, ALL SUBSTITUTIONS AND REPLACEMENTS FOR AND PRODUCTS OF ANY OF THE FOREGOING PROPERTY, AND TOGETHER WITH PROCEEDS OF ANY AND ALL OF THE FOREGOING PROPERTY.