

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: **DR MICHAEL KACEWICZ DMD LLC**

Mailing Address: **990 MAIN ST**

City, State Zip Country: **EAST GREENWICH, RI 02818 USA**

Last Name (i.e. Family Name or Surname): **KACEWICZ** *First Name:* **MICHAEL** *Middle Name:* **J**

Mailing Address: **990 MAIN ST**

City, State Zip Country: **EAST GREENWICH, RI 02818 USA**

SECURED PARTY INFORMATION

Org. Name: **WELLS FARGO BANK, N.A.**

Mailing Address: **2000 POWELL ST., FOURTH FLOOR**

City, State Zip Country: **EMERYVILLE, CA 94608 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-72658008-58131310

COLLATERAL

(A) (1) ALL ACCOUNTS, CHATTEL PAPER, AND OTHER RIGHTS TO PAYMENT OF THE DEBTOR, WHETHER NOW OWNED OR HEREAFTER ACQUIRED; (2) ALL INVENTORY OF THE DEBTOR, WHETHER NOW OWNED OR HEREAFTER ACQUIRED; (3) ALL EQUIPMENT OF THE DEBTOR, WHETHER NOW OWNED OR HEREAFTER ACQUIRED; (4) ALL GENERAL INTANGIBLES AND CONTRACT RIGHTS OF THE DEBTOR INCLUDING WITHOUT LIMITATION ALL PATIENT RECORDS AND PATIENT CHARTS, WHETHER NOW OWNED OR HEREAFTER ACQUIRED; (B) ALL OF THE ABOVE, TOGETHER WITH ALL SUBSTITUTIONS AND REPLACEMENTS FOR AND PRODUCTS OF ANY OF THE FOREGOING PERSONAL PROPERTY, TOGETHER WITH ALL ACCESSIONS, ATTACHMENTS, PARTS, AND MODIFICATIONS, AND REPAIRS NOW OR HEREAFTER ATTACHED OR AFFIXED TO OR USED IN CONNECTION WITH ANY SUCH PERSONAL PROPERTY. (C) DEBTOR HAS ENTERED INTO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY WHICH CONTAINS A NEGATIVE PLEDGE COVENANT PROHIBITING DEBTOR FROM INCURRING ANY ADDITIONAL INDEBTEDNESS RELATING TO THE BUSINESS IN EXCESS OF \$25,000.00 WITHOUT THE EXPRESS WRITTEN CONSENT OF SECURED PARTY.