

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: **ARDEN ENGINEERING CONSTRUCTORS, LLC**

Mailing Address: **505 NARRAGANSETT PARK DRIVE**

City, State Zip Country: **PAWTUCKET, RI 02861-4323 USA**

SECURED PARTY INFORMATION

Org. Name: **ALTEC CAPITAL SERVICES, LLC**

Mailing Address: **33 INVERNESS CENTER PARKWAY SUITE 200**

City, State Zip Country: **BIRMINGHAM, AL 35242 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-76100834-59539682

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