

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: **MAGANA DELIVERY AND SERVICES INC**

Mailing Address: **336 GRAND AVE**

City, State Zip Country: **PAWTUCKET, RI 02861-1821 USA**

SECURED PARTY INFORMATION

Org. Name: **TOYOTA INDUSTRIES COMMERCIAL FINANCE, INC.**

Mailing Address: **P.O. BOX 9050**

City, State Zip Country: **DALLAS, TX 75019-9050 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-76321655-59630866

COLLATERAL

ONE (1) 20201 HINO MODEL # L6-21 SERIAL # 5PVNJ8AVXM5T51177 BODY: 26X102X103 LIFTGATE