

# UCC-1 Form

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## 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**

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## DEBTOR INFORMATION

*Org. Name:* **RGB ALLIANCE PROPERTIES, LLC**

*Mailing Address:* **13 INDUSTRIAL LANE**

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

*Last Name (i.e. Family Name or Surname):* **BAFFONI** *First Name:* **PETER** *Middle Name:* **D**

*Mailing Address:* **80 CLARK ROAD**

*City, State Zip Country:* **SMITHFIELD, RI 02917 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **KUBOTA CREDIT CORPORATION, U.S.A.**

*Mailing Address:* **PO BOX 2046**

*City, State Zip Country:* **GRAPEVINE, TX 76099 USA**

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: RI-0-76872581-59858658**

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## COLLATERAL

KUBOTA M62 50975 \*4WD - TRACTOR;KUBOTA BT1400V F0150 \*BACKHOE WAUX HYD VALVE M62;KUBOTA TL1800V F0127 \*FRONT  
LOADER W3RD FCTN VLV ;