

# 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:* **DEXTER SIGN CO.**

*Mailing Address:* **70 WATERMAN AVE**

*City, State Zip Country:* **EAST PROVIDENCE, RI 02914 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **TAKEUCHI FINANCIAL SERVICES, A PROGRAM OF BANK OF THE WEST**

*Mailing Address:* **1625 W. FOUNTAINHEAD PKWY, AZ-FTN-10C-A AZ-FTN-10C-A**

*City, State Zip Country:* **TEMPE, AZ 85282 USA**

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: RI-0-77805988-60227777**

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## COLLATERAL

TAKEUCHI TB290 SN: 185108049 AND ALL RELATED EQUIPMENT LEASED OR FINANCED FROM TAKEUCHI FINANCIAL SERVICES, A PROGRAM OF BANK OF THE WEST INCLUDING, BUT NOT LIMITED TO THOSE ITEMS AND PROCEEDS THEREOF, SET FORTH IN THE AGREEMENT LISTED BELOW AND IN ANY AND ALL SUBSEQUENT ADDENDUMS AND SCHEDULES TO THE AGREEMENT. AGREEMENT # 2647792.