

# UCC-1 Form

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## FILER INFORMATION

*Full name:* CORPORATION SERVICE COMPANY

*Email Contact at Filer:* RISOSUCCFILINGSV3@CSCGLOBAL.COM

## SEND ACKNOWLEDGEMENT TO

*Contact name:* CORPORATION SERVICE COMPANY

*Mailing Address:* 801 ADLAI STEVENSON DRIVE

*City, State Zip Country:* SPRINGFIELD, IL 62703 USA

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## DEBTOR INFORMATION

*Org. Name:* WHEELS OF FREEDOM, INC.

*Mailing Address:* 121 BENEFIT STREET

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

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## SECURED PARTY INFORMATION

*Org. Name:* NORTHPOINT COMMERCIAL FINANCE LLC

*Mailing Address:* PO Box 1445

*City, State Zip Country:* ALPHARETTA, GA 30009 USA

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: 2049 64722**

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## COLLATERAL

ALL ASSETS OF DEBTOR WHETHER NOW OWNED OR HEREAFTER ACQUIRED OR ARISING.