UCC-3 Form - CONTINUATION

Original File Number: **505555**

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**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: WELLS FARGO COMMERCIAL DISTRIBUTION FINANCE, LLC

CUSTOMER REFERENCE: RI-0-80637725-61407401