

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: **ADRIAN SNACKS LLC**

Mailing Address: **243 W. SHORE ROAD**

City, State Zip Country: **WARWICK, RI 02889 USA**

SECURED PARTY INFORMATION

Org. Name: **BANC OF AMERICA LEASING & CAPITAL, LLC**

Mailing Address: **135 S. LaSALLE STREET IL4-135-10-61**

City, State Zip Country: **CHICAGO, IL 60603 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-80670704-61411235

COLLATERAL

ANY AND ALL RIGHTS THAT THE DEBTOR MAY HAVE OR ACQUIRE UNDER OR PURSUANT TO THAT CERTAIN DISTRIBUTOR AGREEMENT BETWEEN SNYDER'S-LANCE, INC. AND DEBTOR, DATED ON OR ABOUT MAY 24, 2021, AND ANY RESTATEMENT, AMENDMENT, MODIFICATION OF SAME, AND ANY AND ALL ACCESSIONS, REPLACEMENTS, ADDITIONS, AND ALL CASH OR NON-CASH PROCEEDS (INCLUDING INSURANCE PROCEEDS), TO OR OF THE FOREGOING.