

UCC-1 Form

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**

DEBTOR INFORMATION

Org. Name: **ADVANCE SIGNS, INC..**

Mailing Address: **846 BRONCO HIGHWAY**

City, State Zip Country: **MAPLEVILLE, RI 02839 USA**

SECURED PARTY INFORMATION

Org. Name: **DE LAGE LANDEN FINANCIAL SERVICES, INC.**

Mailing Address: **1111 OLD EAGLE SCHOOL ROAD**

City, State Zip Country: **WAYNE, PA 19087 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2145 92634

COLLATERAL

ONE(1) NATIONAL 8100 CRANE;S/N 302224; ONE(1) PETERBILT 348 TRUCK; VIN 2NP3LJ0X4MM742376 TOGETHER WITH ALL COMPONENTS, ADDITIONS, UPGRADES, ATTACHMENTS, ACCESSIONS, SUBSTITUTIONS, REPLACEMENTS AND PROCEEDS OF THE FOREGOING. THIS FILING RELATES ONLY TO THE AFOREMENTIONED COLLATERAL, AND IS NOT INTENDED TO CREATE OR PERFECT A LIEN ON ALL OF THE DEBTOR'S ASSETS.