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: | FINN AUTO BODY LLC |
|---|-----------------------------|
| Mailing Address: | 405 WASHINGTON ST |
| City, State Zip Country: | COVENTRY, RI 02816-5460 USA |
| Last Name (i.e. Family Name or Surname): | MARSOCCI First Name: FRED |
| Mailing Address: | 270 Shipper Plat Rd |
| City, State Zip Country: | COVENTRY, RI 02816 USA |

SECURED PARTY INFORMATION

Org. Name: NEWLANE FINANCE COMPANY

Mailing Address: 123 S BROAD STREET, 17TH FLOOR

City, State Zip Country: PHILADELPHIA, PA 19109 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2157 71159

COLLATERAL

ALL EQUIPMENT AND OTHER PERSONAL PROPERTY, NOW OR HEREAFTER THE SUBJECT OF THE CERTAIN EQUIPMENT FINANCE AGREEMENT RELATING TO APPLICATION #APP-0000013263 BETWEEN LENDER AND BORROWER AND ANY APPLICABLE PERSONAL GUARANTOR(S). "AND ALL REPLACEMENTS, SUBSTITUTIONS, ACCESSIONS, ADD-ONS, AND ALL PROCEEDS AND ACCOUNTS OF THE DEBTOR(S) ARISING OUT OF OR RELATED TO THE FOREGOING. THIS FINANCING STATEMENT RELATES TO AN EQUIPMENT FINANCE AGREEMENT BETWEEN THE DEBTOR(S) AND THE SECURED PARTY. THIS FINANCING STATEMENT IS FILED TO GIVE NOTICE OF SECURED PARTY'S OWNERSHIP INTEREST IN THE COLLATERAL."