

# 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:* **HIP CONSTRUCTION, LLC**

*Mailing Address:* **2C MORGAN MILL ROAD**

*City, State Zip Country:* **JOHNSTON, RI 02919 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **HYG FINANCIAL SERVICES, INC.**

*Mailing Address:* **PO Box 35701**

*City, State Zip Country:* **BILLINGS, MT 59107 USA**

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## TRANSACTION TYPE: STANDARD

**ALTERNATIVE DESIGNATION:** LESSEE-LESSOR

**CUSTOMER REFERENCE:** 400-0004970-000 2214 20200

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## COLLATERAL

ALL OF THE EQUIPMENT NOW OR HEREAFTER LEASED BY LESSOR TO LESSEE; AND ALL ACCESSIONS, ADDITIONS, REPLACEMENTS, AND SUBSTITUTIONS THERETO AND THEREFORE; AND ALL PROCEEDS INCLUDING INSURANCE PROCEEDS THEREOF.