

UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

Email Contact at Filer: **CTLSWEBACK@WOLTERSKLUWER.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **JOHN JAMES**

Mailing Address: **2929 ALLEN PKWY STE 3300**

City, State Zip Country: **HOUSTON, TX 77019 USA**

DEBTOR INFORMATION

Org. Name: **BRIDEN NURSERIES AND LANDSCAPE MANAGEMENT, INC.**

Mailing Address: **1075 SCITUATE AVENUE**

City, State Zip Country: **CRANSTON, RI 02921-1812 USA**

SECURED PARTY INFORMATION

Org. Name: **CATERPILLAR FINANCIAL SERVICES CORPORATION**

Mailing Address: **2120 WEST END AVE**

City, State Zip Country: **NASHVILLE, TN 37203 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-85259459-63309773

COLLATERAL

ONE(1) CATERPILLAR 906M COMPACT WHEEL LOADER S/N: H6605204 AND SUBSTITUTIONS, REPLACEMENTS, ADDITIONS AND ACCESSIONS THERETO, NOW OWNED OR HEREAFTER ACQUIRED AND PROCEEDS THEREOF. THE ABOVE COLLATERAL IS WITHIN THE SCOPE OF ARTICLE 9 OF THE UNIFORM COMMERCIAL CODE (IF THIS STATEMENT IS FILED IN NEW JERSEY, SPECIFICALLY CHAPTER 9 OF TITLE 12A, PURSUANT TO 12A:9-102 AND 12A:9-109).