

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: **ABRI CONSTRUCTION, L.L.C.**

Mailing Address: **93 HEMLOCK RD**

City, State Zip Country: **WAKEFIELD, RI 02879 USA**

SECURED PARTY INFORMATION

Org. Name: **JCB FINANCE**

Mailing Address: **655 BUSINESS CENTER DRIVE SUITE 250**

City, State Zip Country: **HORSHAM, PA 19044 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2290 41779

COLLATERAL

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