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: **EAST BAY HOME IMPROVEMENTS LLC**

Mailing Address: **16 MEADOW LN.**

City, State Zip Country: **BRISTOL, RI 02809 USA**

SECURED PARTY INFORMATION

Org. Name: **C T CORPORATION SYSTEM, AS REPRESENTATIVE**

Mailing Address: **330 N BRAND BLVD, SUITE 700; ATTN: SPRS**

City, State Zip Country: **GLENDALE, CA 91203 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-85633714-63461671

COLLATERAL

(1) 2013 JLG G9-43A TELESCOPIC FORKLIFT SN: 0160049620