

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: **VANDERSCAPES, INC.**

Mailing Address: **51 PINE KNOLL LN**

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

SECURED PARTY INFORMATION

Org. Name: **KUBOTA CREDIT CORPORATION, U.S.A.**

Mailing Address: **PO Box 2046**

City, State Zip Country: **GRAPEVINE, TX 76099 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-85783668-63519266

COLLATERAL

KUBOTA U48-5R3A KBCDZ47CEM3M10691 EXCAVATOR WRUB TKSAC CABANG;KUBOTA K7252 NA *12" TRENCH BUCKET;KUBOTA K7256 NA *36" GRADE BUCKET;KUBOTA K7262 NA *HYD THUMB;