

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: **RHODE ISLAND NURSERIES, INC.**

Mailing Address: **736 EAST MAIN ROAD**

City, State Zip Country: **MIDDLETOWN, RI 02842-7245 USA**

SECURED PARTY INFORMATION

Org. Name: **CNH INDUSTRIAL CAPITAL AMERICA LLC**

Mailing Address: **5729 WASHINGTON AVENUE**

City, State Zip Country: **RACINE, WI 53406 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2314 92744

COLLATERAL

2021, CASE, 321F, SERIAL No.: FNH321FHNMHP03040, COMPACT WHEEL LOADER THIS FINANCING STATEMENT IS BEING FILED SOLELY AS A PRECAUTION IF, CONTRARY TO THE INTENTION OF THE PARTIES DESCRIBED ABOVE AS LESSEE AND LESSOR, THE TRANSACTION RELATING TO THE PROPERTY DESCRIBED HEREIN IS DEEMED TO BE A SECURITY AGREEMENT RATHER THAN A LEASE WITHIN THE MEANING OF 1-201 (37) OF THE UNIFORM COMMERICAL CODE..