

UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

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

SEND ACKNOWLEDGEMENT TO

Contact name: **LIEN SOLUTIONS**

Mailing Address: **P.O. Box 29071**

City, State Zip Country: **GLENDALE, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **ASLC RI II, LLC**

Mailing Address: **180 LOG RD**

City, State Zip Country: **SMITHFIELD, RI 02917 USA**

SECURED PARTY INFORMATION

Org. Name: **LCA BANK CORPORATION**

Mailing Address: **1441 W. UTE BLVD SUITE 250**

City, State Zip Country: **PARK CITY, UT 84098 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-88261834-64606872

COLLATERAL

THIS FINANCING STATEMENT COVERS THE FOLLOWING COLLATERAL: "ALL OF THE EQUIPMENT REFERENCED IN THE LEASE AGREEMENT #145456-002, WHICH EQUIPMENT IS GENERALLY DESCRIBED AS: RAULAND R5K AUDIO VISUAL SYSTEM AND ALL PROCEEDS (INCLUDING CASH, NON-CASH AND INSURANCE PROCEEDS), ALL ACCESSIONS, ADDITIONS AND ATTACHMENTS, AND ALL SUBSTITUTIONS AND REPLACEMENTS."