

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: **LDC, INC.**

Mailing Address: **22 FIRST ST**

City, State Zip Country: **EAST PROVIDENCE, RI 02914 USA**

SECURED PARTY INFORMATION

Org. Name: **MACQUARIE EQUIPMENT CAPITAL INC.**

Mailing Address: **1301 RIVERPLACE BLVD LEVEL 4**

City, State Zip Country: **JACKSONVILLE, FL 32207 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2381 21515

COLLATERAL

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