

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **ATLANTIC GUTTER LLC**

Mailing Address: **82 S UNION ST.**

City, State Zip Country: **PAWTUCKET, RI 02860-3920 USA**

SECURED PARTY INFORMATION

Org. Name: **TOYOTA INDUSTRIES COMMERCIAL FINANCE, INC.**

Mailing Address: **P.O. Box 9050**

City, State Zip Country: **DALLAS, TX 75019-9050 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-88930927-64897404

COLLATERAL

ONE (1) TOYOTA FORKLIFT MODEL # 8BWS132F28 SERIAL # 8BWS13-13323