

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: **(D) ALL NEGOTIABLE AND NONNEGOTIABLE DOCUMENTS OF TITLE COVERING ANY COLLATERAL., CA (E)
ALL ACCESS USA**

DEBTOR INFORMATION

Org. Name: **ENCON L.L.C.**

Mailing Address: **11 AUBURN ST**

City, State Zip Country: **CRANSTON, RI 02910-2907 USA**

SECURED PARTY INFORMATION

Org. Name: **BANK OF AMERICA**

Mailing Address: **440 KNOX ABBOTT DRIVE SC3-210-05-01**

City, State Zip Country: **CAYCE, SC 29033 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-89415019-65089488

COLLATERAL

A SECURITY INTEREST IN THE FOLLOWING DESCRIBED PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE PLEDGOR (THE "COLLATERAL"):