

UCC-1 Form

FILER INFORMATION

Full name: **NATIONAL OAK DISTRIBUTORS INC**

Email Contact at Filer: **NODCREDIT@NATIONALOAK.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **NATIONAL OAK DISTRIBUTORS INC**

Mailing Address: **6529 SOUTHERN BLVD**

City, State Zip Country: **WEST PALM BEACH, FL 33413 USA**

DEBTOR INFORMATION

Org. Name: **SHAW ENTERPRISES LLC**

Mailing Address: **441 WASHINGTON ST**

City, State Zip Country: **COVENTRY, RI 02816 USA**

SECURED PARTY INFORMATION

Org. Name: **NATIONAL OAK DISTRIBUTORS INC**

Mailing Address: **6529 SOUTHERN BLVD**

City, State Zip Country: **WEST PALM BEACH, FL 33413 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: CARS PAINT PLUS SHAW ENTERPRISES 001-822-3660

COLLATERAL

COLLATERAL: THE TERM "COLLATERAL" MEANS ALL GOODWILL OF THE DEBTOR, ALL INVENTORY OF THE DEBTOR, WHEREVER LOCATED AND WHETHER NOW OWNED OR HEREAFTER ACQUIRED, PURCHASED FROM THE SECURED PARTY, INCLUDING, WITHOUT LIMITATION, PAINTS, SOLVENTS, ADHESIVES, FILLER COMPOUNDS, ABRASIVES TOOLS AND EQUIPMENT AND ALL PROCEEDS THEREOF.