

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: **FCG ASSOCIATES, LIMITED PARTNERSHIP**

Mailing Address: **1533 CHALKSTONE AVE**

City, State Zip Country: **PROVIDENCE, RI 02909-4917 USA**

SECURED PARTY INFORMATION

Org. Name: **DLL FINANCE LLC**

Mailing Address: **P.O. BOX 2000**

City, State Zip Country: **JOHNSTON, IA 50131-0020 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2575 92042

COLLATERAL

TORO GR3150 RIDING GREENS MWR