

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: **KEARFLEX ENGINEERING COMPANY**

Mailing Address: **66 CYPRESS ST**

City, State Zip Country: **WARWICK, RI 02888 USA**

SECURED PARTY INFORMATION

Org. Name: **CNC ASSOCIATES, INC.**

Mailing Address: **2900 CHALLENGER PLACE**

City, State Zip Country: **OXNARD, CA 93030 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: DBA KEARFLEX ENGINEERING 2576 54328

COLLATERAL

THE FOLLOWING IS COLLATERAL INFORMATION FOR THIS CONTRACT: SCHEDULE 'A' EQUIPMENT SCHEDULE THIS SCHEDULE IS ATTACHED TO AND MADE PART OF A CERTAIN CONDITIONAL SALE AGREEMENT, NUMBER 31388001, BETWEEN CNC ASSOCIATES, INC. AS SELLER, AND KEARFLEX ENGINEERING COMPANY DBA KEARFLEX ENGINEERING, AS BUYER. QUANTITY EQUIPMENT DESCRIPTION SERIAL NUMBER (1) HAAS CNC LATHE, MODEL ST-10 THE ABOVE-LISTED EQUIPMENT TOGETHER WITH ALL ATTACHMENTS, ACCESSIONS, ACCESSORIES, FITTINGS, INCREASES, TOOLS, PARTS, SUPPLIES, ADDITIONS, REPLACEMENTS OF AND SUBSTITUTIONS FOR ALL OR ANY PART OF THE FOREGOING EQUIPMENT IS COLLECTIVELY REFERRED TO AS THE "EQUIPMENT". THE BUYER HEREBY CERTIFIES THAT THE DESCRIPTION OF PERSONAL PROPERTY SET FORTH ABOVE CONSTITUTES AN ACCURATE ACCOUNT OF THE EQUIPMENT.