

# UCC-1 Form

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## 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**

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## DEBTOR INFORMATION

*Org. Name:* **MICHAEL-JOHN CREATIONS, LLC**

*Mailing Address:* **1226 MENDON RD**

*City, State Zip Country:* **CUMBERLAND, RI 02864 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **HIGHLAND CAPITAL CORP.**

*Mailing Address:* **370 PASCACK RD**

*City, State Zip Country:* **TWP OF WASHINGTON, NJ 07676 USA**

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## TRANSACTION TYPE: STANDARD

**ALTERNATIVE DESIGNATION: LESSEE-LESSOR**

**CUSTOMER REFERENCE: 2635 60544**

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## COLLATERAL

(1) NEW C.R. ONSRUD CNC MACHINING CENTER MODEL 121M12DA TOGETHER WITH ALL PRESENT AND FUTURE ATTACHMENTS, ACCESSORIES, REPLACEMENT PARTS, REPAIRS, ADDITIONS, UPGRADES, INSURANCE PROCEEDS AND ALL PROCEEDS, PRODUCTS AND RENTS THEREFROM, PURSUANT TO THE TERMS OF A FINANCE AGREEMENT BETWEEN DEBTOR AND SECURED PARTY.