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: **A & J WELL CO., INC.**

Mailing Address: **77 NORTH MAIN STREET**

City, State Zip Country: **SLATERSVILLE, RI 02876 USA**

SECURED PARTY INFORMATION

Org. Name: **SECURED LENDER SOLUTIONS**

Mailing Address: **P.O. BOX 2576**

City, State Zip Country: **SPRINGFIELD, IL 62708 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2646 44846

COLLATERAL

ALL OF DEBTOR'S ASSETS NOW OWNED OR HEREAFTER ACQUIRED. THE SECURED PARTY NAMED IN THIS RECORD IS ACTING IN A REPRESENTATIVE CAPACITY FOR PURPOSES OF FORWARDING NOTICES AND INQUIRIES REGARDING THIS RECORD. FOR MORE INFORMATION, PLEASE CONTACT THE SECURED PARTY AT THE ADDRESS LISTED ABOVE OR AT UCCSPREP@CSCINFO.COM.