

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: **VIEIRA MARINE CONSTRUCTION, INC.**

Mailing Address: **197 OLD COACH RD**

City, State Zip Country: **CHARLESTOWN, RI 02813-3420 USA**

SECURED PARTY INFORMATION

Org. Name: **STEARNS BANK EQUIPMENT FINANCE**

Mailing Address: **PO BOX 327**

City, State Zip Country: **ALBANY, MN 56307-0327 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 25786 2684 40545

COLLATERAL

1985 LINK-BELT LS-98 CRANE SN 1RH5-0257A QTY 1 MODEL:LINK-BELT LS-98 S/N:1RH5-0257A YEAR:1985