UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

Email Contact at Filer: **CTLSWEBACK@WOLTERSKLUWER.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **LIEN SOLUTIONS**

Mailing Address: **P.O. BOX 29071**

City, State Zip Country: **GLENDALE, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **THE FLOREZ GROUP INC.**

Mailing Address: **1201 KENWOOD AVE , TX**

City, State Zip Country: **AUSTIN, TX 78704 USA**

SECURED PARTY INFORMATION

Org. Name: **CHANNEL PARTNERS CAPITAL**

Mailing Address: **11100 WAYZATA BLVD**

City, State Zip Country: **MINNETONKA, MN 55305 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-97366707-68503244

COLLATERAL

ALL ASSETS OF THE DEBTOR NOW OWNED OR HEREAFTER ACQUIRED