

UCC-1 Form

FILER INFORMATION

Full name: CORPORATION SERVICE COMPANY

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SEND ACKNOWLEDGEMENT TO

Contact name: CORPORATION SERVICE COMPANY

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DEBTOR INFORMATION

Org. Name: LA LIN ENTERPRISES, INC.

Mailing Address: 524 CRANSTON STREET

City, State Zip Country: PROVIDENCE, RI 02907 USA

SECURED PARTY INFORMATION

Org. Name: ALLIANCE LAUNDRY SYSTEMS LLC

Mailing Address: PO Box 990

City, State Zip Country: RIPON, WI 54971 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: APPLICATION # 32525 2820 09149

COLLATERAL

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