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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: LAKEWOOD AUTOBODY CORP

Mailing Address: 665 WARWICK AVE

City, State Zip Country: WARWICK, RI 02888 USA

SECURED PARTY INFORMATION

Org. Name: SANDY LANE AUTO, LLC

Mailing Address: 2672 W SHORE RD

City, State Zip Country: WARWICK, RI 02889 USA

TRANSACTION TYPE: STANDARD

ALTERNATIVE DESIGNATION: CONSIGNEE-CONSIGNOR

CUSTOMER REFERENCE: RI-0-99215263-69358150

COLLATERAL

ALL ASSETS OF THE DEBTOR NOW OWNED OR HEREAFTER ACQUIRED, INCLUDING BUT NOT LIMITED TO, ALL ACCOUNTS; ALL EQUIPMENT, GOODS, FIXTURES, AND INVENTORY, INCLUDING ALL VEHICLES, VEHICLE PARTS AND INVENTORY NOW OWNED OR HEREAFTER ACQUIRED OR WHEREVER LOCATED, WITHOUT LIMITATION, PURCHASE MONEY INVENTORY, THE PURCHASE OF WHICH WAS FINANCED OR FLOORPLANNED BY SECURED PARTY FOR DEBTOR(S); ALL DOCUMENTS, INSTRUMENTS AND CHATTEL PAPER; ALL LETTERS OF CREDIT AND LETTER-OF-CREDIT RIGHTS; ALL SECURITIES COLLATERAL; ALL INVESTMENT PROPERTY; ALL INTELLECTUAL PROPERTY COLLATERAL; ALL GENERAL INTANGIBLES; ALL MONEY AND ALL DEPOSIT ACCOUNTS; ALL BOOKS AND RECORDS, CUSTOMER LISTS, CREDIT FILES, COMPUTER FILES, PROGRAMS, PRINTOUTS AND OTHER COMPUTER MATERIALS AND RECORDS RELATING TO ANY OF THE FOREGOING; ALL MOTOR VEHICLES; AND TO THE EXTENT NOT COVERED BY THE FOREGOING, ALL PROCEEDS AND PRODUCTS OF EACH OF THE FOREGOING AND ANY AND ALL PROCEEDS OF ANY INSURANCE, INDEMNITY, WARRANTY OR GUARANTY WITH RESPECT TO ANY OF THE FOREGOING.