

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: **GLENDAL, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **TIME INDUSTRIES, LLC**

Mailing Address: **30 LIBERA ST**

City, State Zip Country: **CRANSTON, RI 02921 USA**

Org. Name: **TIME PLATING INC.**

Mailing Address: **30 LIBERA ST**

City, State Zip Country: **CRANSTON, RI 02921 USA**

SECURED PARTY INFORMATION

Org. Name: **FUNDING METRICS, LLC**

Mailing Address: **3220 TILLMAN DRIVE SUITE 200**

City, State Zip Country: **BENSALEM, PA 19020 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-100210687-69821061

COLLATERAL

ON OR ABOUT JUNE 24, 2024, FUNDING METRICS, LLC PURCHASED THE FUTURE RECEIPTS OF THE DEBTOR. FUTURE RECEIPTS INCLUDES ALL PAYMENTS MADE BY CASH, CHECK, ACH, OR OTHER ELECTRONIC TRANSFER, CREDIT CARD, DEBIT CARD, BANK CARD, CHARGE CARD OR OTHER FORM OF MONETARY PAYMENT IN THE ORDINARY COURSE OF DEBTOR'S BUSINESS, ACCOUNTS AND PAYMENT INTANGIBLES, AND ALL PROCEEDS AND PRODUCTS OF THE FOREGOING.