

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: **G&G TECHNOLOGIES INC.**

Mailing Address: **6 GRANDVIEW ST**

City, State Zip Country: **COVENTRY, RI 02816 USA**

SECURED PARTY INFORMATION

Org. Name: **LENDISTRY SBLC LLC**

Mailing Address: **767 S ALAMEDA ST SUITE 340**

City, State Zip Country: **LOS ANGELES, CA 90021 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-100313106-69871456

COLLATERAL

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