

UCC-1 Form

FILER INFORMATION

Full name: CORPORATION SERVICE COMPANY

Email Contact at Filer: RISOSUCCFILINGSV3@CSCGLOBAL.COM

SEND ACKNOWLEDGEMENT TO

Contact name: CORPORATION SERVICE COMPANY

Mailing Address: 801 ADLAI STEVENSON DRIVE

City, State Zip Country: SPRINGFIELD, IL 62703 USA

DEBTOR INFORMATION

Org. Name: RHODE ISLAND NURSERIES, INC.

Mailing Address: 736 EAST MAIN ROAD

City, State Zip Country: MIDDLETOWN, RI 02842 USA

SECURED PARTY INFORMATION

Org. Name: CNH INDUSTRIAL CAPITAL AMERICA LLC

Mailing Address: 5729 WASHINGTON AVENUE

City, State Zip Country: RACINE, WI 53406 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2916 05091

COLLATERAL

2024, CASE, 1021G, SERIAL No.: FNH1021GNZHE22428, WHEEL LOADER SECURED CREDITOR ASSERTS A FIRST PRIORITY PURCHASE MONEY SECURITY INTEREST IN THE FOREGOING EQUIPMENT, AND INCLUDING BUT NOT LIMITED TO, ALL ITS IMPROVEMENTS, PARTS, ACCESSORIES, SUBSTITUTIONS, REPLACEMENTS, PRODUCTS, PROCEEDS, INSURANCE PROCEEDS, PREMIUM REFUNDS AND ACCESSIONS. THE EQUIPMENT MAY DISPLAY A SERIAL NUMBER OR OTHER IDENTIFYING NUMBER, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING - PRODUCT IDENTIFICATION NUMBER, TRACTOR NUMBER OR CHASSIS NUMBER..