

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: **JAMES W. SMITH, JR., INC.**

Mailing Address: **52 LONG HWY**

City, State Zip Country: **LITTLE COMPTON, RI 02837 USA**

SECURED PARTY INFORMATION

Org. Name: **KUBOTA CREDIT CORPORATION, U.S.A.**

Mailing Address: **PO Box 2046**

City, State Zip Country: **GRAPEVINE, TX 76099 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-100741009-70070979

COLLATERAL

KUBOTA LX2620HSDC KBUBFAHCHR1D13309 4WD TRACTOR WAIR CONDITIONED ;KUBOTA B2372 NA *BUCKET;KUBOTA B7345 NA *REAR LIGHT;KUBOTA BL7522 NA *CHUTEDEFLTR;KUBOTA LA535 E1426 LOADER WGRILL GUARD & 2LVR QC;KUBOTA LX2940B NA *4 PT HITCH;KUBOTA LX2941 NA *MID PTO;KUBOTA LX2963 22214967 63" RESIDENTIAL SNOWBLOWER;LAND PRIDE PFL1242 2270032 PALLET FORK, 1200LBS;