

# UCC-1 Form

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## 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**

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## DEBTOR INFORMATION

*Org. Name:* **DULAN, LLC**

*Mailing Address:* **141 RESERVOIR AVENUE APT. 24**

*City, State Zip Country:* **LINCOLN, RI 02865 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **PACCAR FINANCIAL CORP**

*Mailing Address:* **240 GIBRALTAR ROAD, SUITE 200**

*City, State Zip Country:* **HORSHAM, PA 19044 USA**

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## TRANSACTION TYPE: STANDARD

## CUSTOMER REFERENCE: 2962 97962

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## COLLATERAL

2025 KENWORTH T880 1XKZD40X4SJ134866 WITH 2-LINE WET SYSTEM AND/OR ANY SUBSTITUTION OR REPLACEMENT UNIT FOR THE COLLATERAL DESCRIBED HEREIN.