

UCC-1 Form

FILER INFORMATION

Full name: **KATIE BOUGHNER**

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SEND ACKNOWLEDGEMENT TO

Contact name: **UNIBANK FOR SAVINGS**

Mailing Address: **49 CHURCH STREET**

City, State Zip Country: **WHITINSVILLE, MA 01588 USA**

DEBTOR INFORMATION

Org. Name: **AMERICAN MUSCLE CAR RESTORATIONS, INC.**

Mailing Address: **65 FOLIAGE DRIVE**

City, State Zip Country: **NORTH KINGSTOWN, RI 02852 USA**

SECURED PARTY INFORMATION

Org. Name: **UNIBANK FOR SAVINGS**

Mailing Address: **49 CHURCH STREET**

City, State Zip Country: **WHITINSVILLE, MA 01588 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

PURCHASE MONEY SECURITY INTEREST IN THE EQUIPMENT DESCRIBED BELOW AND ALL EQUIPMENT PARTS, ACCESSORIES, SUBSTITUTIONS, ADDITIONS, ACCESSIONS AND REPLACEMENTS THERETO AND THEREOF, NOW OR HEREAFTER INSTALLED IN, AFFIXED TO, OR USED IN CONJUNCTION THEREWITH AND THE PROCEEDS THEREOF, TOGETHER WITH ALL INSTALLMENT PAYMENTS, INSURANCE PROCEEDS, OTHER PROCEEDS AND PAYMENTS DUE AND TO BECOME DO ARISING FROM OR RELATING TO SAID EQUIPMENT: REFURBISHED GYSPOT 13000 BP.LG INVERTER SPOT WELDER WITH AUTO TECHNOLOGY SERIAL # 20.10.023567.000661