

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: **BMD INCORPORATED**

Mailing Address: **1170 BALD HILL RD**

City, State Zip Country: **WARWICK, RI 02886 USA**

SECURED PARTY INFORMATION

Org. Name: **SECURED LENDER SOLUTIONS, LLC**

Mailing Address: **P.O. BOX 2576**

City, State Zip Country: **SPRINGFIELD, IL 62708 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 1912257 3023 24424

COLLATERAL

SEE THE BELOW COLLATERAL DESCRIPTION: MIMAKI JFX200-2513EX UV FLATBED PRINTER VALIANI INTEGRA V250 FLATBED PLOTTER/ROUTER THE COLLATERAL ALSO INCLUDES ALL CURRENTLY EXISTING AND FUTURE ATTACHMENTS, PARTS, ACCESSORIES AND ADD-ONS FOR ALL OF THE FOREGOING EQUIPMENT, AND ALL PRODUCTS AND PROCEEDS THEREOF. ALL DESCRIBED COLLATERAL HEREIN FALLS WITHIN THE SCOPE OF ARTICLE 9 OF THE UNIFORM COMMERCIAL CODE.