

UCC-3 Form - ASSIGNMENT

Original File Number: **201718417540**

FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

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SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

SECURED PARTY INFORMATION

Org. Name: **WELLS FARGO COMMERCIAL DISTRIBUTION FINANCE, LLC**

Mailing Address:

City, State Zip Country: **, USA**

ASSIGNEE INFORMATION

Org. Name: **HUNTINGTON DISTRIBUTION FINANCE, INC.**

Mailing Address: **P.O. Box 59376**

City, State Zip Country: **SCHAUMBURG, IL 60159-0376 USA**

NAME OF THE SECURED PARTY OF RECORD AUTHORIZING THE AMENDMENT: WELLS FARGO COMMERCIAL DISTRIBUTION FINANCE, LLC

CUSTOMER REFERENCE: RHODE ISLAND GRINDING SERVICE, INC. 3036 11549
