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UCC-1 Form

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

DEBTOR INFORMATION

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Mailing Address: 3666 QUAKER LANE

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

SECURED PARTY INFORMATION

Org. Name: CORPORATION SERVICE COMPANY, AS REPRESENTATIVE

Mailing Address: P.O. BOX 2576

City, State Zip Country: SPRINGFIELD, IL 62708 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 1915137 3039 37231

COLLATERAL

SEE THE BELOW COLLATERAL DESCRIPTION: (1) 2020 RAMMER 4099E S/N: 4099EA0054 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.