

# UCC-1 Form

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**FILER INFORMATION**

*Full name:* **WOLTERS KLUWER LIEN SOLUTIONS**

*Email Contact at Filer:* **CTLSWEBACK@WOLTERSKLUWER.COM**

**SEND ACKNOWLEDGEMENT TO**

*Contact name:* **LIEN SOLUTIONS**

*Mailing Address:* **P.O. Box 29071**

*City, State Zip Country:* **GLENDALe, CA 91209-9071 USA**

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**DEBTOR INFORMATION**

*Org. Name:* **CASSISI II LANDSCAPING CONSTRUCTION, INC.**

*Mailing Address:* **PO BOX 19959**

*City, State Zip Country:* **JOHNSTON, RI 02919 USA**

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**SECURED PARTY INFORMATION**

*Org. Name:* **KUBOTA CREDIT CORPORATION, U.S.A.**

*Mailing Address:* **PO Box 2046**

*City, State Zip Country:* **GRAPEVINE, TX 76099 USA**

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**TRANSACTION TYPE: STANDARD**

**CUSTOMER REFERENCE: RI-0-102879657-71074975**

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**COLLATERAL**

KUBOTA RTV-X1100CWL-H A5KC2GDBHRG095406 UV WORKSITE WCAB HDWS TIRES;