

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: **RHODE ISLAND COUNTRY CLUB**

Mailing Address: **150 NAYATT ROAD**

City, State Zip Country: **BARRINGTON, RI 02806 USA**

SECURED PARTY INFORMATION

Org. Name: **WELLS FARGO FINANCIAL LEASING, INC.**

Mailing Address: **800 WALNUT STREET, MAC N0005-044**

City, State Zip Country: **DES MOINES, IA 50309 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 603-0138150-005 3044 90517

COLLATERAL

ALL EQUIPMENT HERETOFORE, NOW OR HEREAFTER LEASED OR FINANCED BY SECURED PARTY (LESSOR) TO OR FOR DEBTOR (LESSEE), TOGETHER WITH ALL PARTS, ACCESSORIES, ATTACHMENTS, SUBSTITUTIONS, ADDITIONS THERETO AND REPLACEMENTS THEREOF, NOW OR HEREAFTER INSTALLED IN, AFFIXED TO, OR USED IN CONJUNCTION THEREWITH AND THE PROCEEDS THEREOF, TOGETHER WITH ALL PERIODIC PAYMENTS, INSURANCE PROCEEDS, OTHER PROCEEDS AND PAYMENTS DUE, AND TO BECOME DUE, ARISING FROM OR RELATING TO SAID EQUIPMENT.