

UCC-1 Form

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**

DEBTOR INFORMATION

Org. Name: **POTOWOMUT GOLF CLUB, INC.**

Mailing Address: **439 IVES RD**

City, State Zip Country: **EAST GREENWICH, RI 02818 USA**

SECURED PARTY INFORMATION

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

Mailing Address: **PO Box 2046**

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

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-103371304-71302889

COLLATERAL

KUBOTA MX5400HST KBUL3BHRCp8E30662 *4WD HST TRACTOR WFOLDABLE RO;KUBOTA LA1065A D5403 *FRONT
LOADER MX SERIES WO VA;