

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: EASTERN RECOVERY, INC.

Mailing Address: 10 A ENTERPRISE LANE

City, State Zip Country: SMITHFIELD, RI 02917 USA

SECURED PARTY INFORMATION

Org. Name: COMMERCIAL CREDIT GROUP INC. ON BEHALF OF ITSELF AND ON BEHALF OF ALL AFFILIATES OF CCI

Mailing Address: 400 ESSJAY ROAD, SUITE 340

City, State Zip Country: WILLIAMSVILLE, NY 14221 USA

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 42161 3087 91184

COLLATERAL

(1) 2025 HINO L6-25 TRUCK WITH VULCAN BODY 5PVNJ7AN1S5T50961 AND ALL ATTACHMENTS, ACCESSIONS, IMPROVEMENTS, TOOLING, REPLACEMENTS, REPLACEMENT PARTS, SOFTWARE AND SOFTWARE UPGRADES AND ALL CASH AND NON-CASH PROCEEDS (INCLUDING RENTAL PROCEEDS, INSURANCE PROCEEDS, ACCOUNTS AND CHATTEL PAPER ARISING OUT OF OR RELATED TO THE SALE, USE, RENTAL OR OTHER DISPOSITION THEREOF) OF AND TO ALL OF THE FOREGOING. IN ADDITION TO THE FOREGOING COLLATERAL, ALL ASSETS NOW OWNED OR HEREAFTER ACQUIRED. SECURED PARTY INCLUDES COMMERCIAL CREDIT GROUP INC. ON BEHALF OF ITSELF AND ON BEHALF OF ALL AFFILIATES OF COMMERCIAL CREDIT, INC.