

# UCC-1 Form

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## 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**

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## DEBTOR INFORMATION

*Org. Name:* **LIMA'S AUTO SALES, INC.**

*Mailing Address:* **1657 MAIN ST**

*City, State Zip Country:* **WEST WARWICK, RI 02893 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **ACV CAPITAL LLC**

*Mailing Address:* **640 ELLICOTT ST SUITE 321**

*City, State Zip Country:* **BUFFALO, NY 14203 USA**

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## TRANSACTION TYPE: STANDARD

## CUSTOMER REFERENCE: 3105 84017

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## COLLATERAL

WHETHER NOW OWNED OR EXISTING OR HEREAFTER ACQUIRED OR ARISING, AND WHERESOEVER LOCATED, ANY AND ALL OF DEBTOR'S ASSETS, INCLUDING, WITHOUT LIMITATION, ALL ACCOUNTS, EQUIPMENT, INVENTORY, VEHICLES, GENERAL INTANGIBLES, GOODS, DEPOSIT ACCOUNTS, DOCUMENTS, INSTRUMENTS, FIXTURES, MONIES, INVESTMENT PROPERTY, LETTER-OF-CREDIT RIGHTS AND CHATTEL PAPER, ALL SUPPORTING OBLIGATIONS, AND ALL OF THE PRODUCTS AND PROCEEDS THEREFROM.