

# 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:* LEXTAL, INC.

*Mailing Address:* 34 APPIAN WAY

*City, State Zip Country:* SMITHFIELD, RI 02917 USA

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## SECURED PARTY INFORMATION

*Org. Name:* WELLS FARGO EQUIPMENT FINANCE, INC.

*Mailing Address:* 600 SOUTH 4TH STREET, MAC N9300-100

*City, State Zip Country:* MINNEAPOLIS, MN 55415 USA

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: 001-0025484-001 3116 81656**

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## COLLATERAL

ONE (1) 2025 MACK MODEL GR84FM DUMP TRUCK S/N 1M2GR4NC2SM005657 ONE (1) 2025 MACK MODEL GR84FM DUMP TRUCK S/N 1M2GR4NC4SM005658 TOGETHER WITH ALL ATTACHMENTS AND ACCESSORIES, TOGETHER WITH ALL PRODUCTS AND PROCEEDS THEREOF.