| | | | | | • |
|------|--|---|-------------|-------------------------------------|--|
| Fill | in this information to identify | y your case: | | | |
| Uni | ted States Bankruptcy Court fo | or the: | | | |
| EAS | STERN DISTRICT OF CALIFO | DRNIA, SACRAMENTO DIVISION | = | | |
| Cas | se number (if known) | | Chapter | 11 | |
| | | | | | ☐ Check if this an amended filing |
| | | | | | |
| Of | ficial Form 201 | | | | |
| V | oluntary Petitic | on for Non-Individua | als Fi | ling for Bank | ruptcy 4/16 |
| | | | | | ebtor's name and case number (if known). For |
| mor | e information, a separate do | cument, Instructions for Bankruptcy Fol | rms for Nor | n-Individuals, is available. | |
| 1. | Debtor's name | Lone Pine Motel LLC | | | |
| 2. | All other names debtor used in the last 8 years | | | | |
| | Include any assumed names, trade names and doing business as names | | | | |
| 3. | Debtor's federal Employer Identification Number (EIN) | 94-3393215 | | | |
| 4. | Debtor's address | Principal place of business | | Mailing addres business | ss, if different from principal place of |
| | | 864 Stateline Ave South Lake Tahoe, CA 96150-691 | 2 | | |
| | | Number, Street, City, State & ZIP Code | | P.O. Box, Num | ber, Street, City, State & ZIP Code |
| | | El Dorado County | | Location of pripage of busing | incipal assets, if different from principal ess |
| | | | | 864 Stateline 96150-6912 | e Ave South Lake Tahoe, CA |
| | | | | Number, Street | , City, State & ZIP Code |
| 5. | Debtor's website (URL) | | | | |
| | | | | | |
| 6. | Type of debtor | Corporation (including Limited Liabilit | y Company | (LLC) and Limited Liability | Partnership (LLP)) |
| | | Partnership (excluding LLP) | | | |
| | | Other. Specify: | | | |

| Debt | or Lone Pine Motel LLC | LC Case number (if known) | | | | | | | |
|--|--|---|-----------------------|---|---|---|----------------------|--|--|
| | Name | | | | | | | | |
| 7. | Describe debtor's business | _ | ` | ed in 11 U.S.C. § 10 | · // | | | | |
| | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | | | |
| | | ☐ Railroad (as defined in 11 U.S.C. § 101(44)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | | | |
| | | | | n 11 U.S.C. § 101(55A)) | 1) | | | | |
| | | ☐ Clearing Bank | , | - ' |)) | | | | |
| | | ☐ None of the al | • | 0.0.0. 3 70 1(0)) | | | | | |
| | | B. Check all that a | vlaar | | | | | | |
| ☐ Tax-exempt entity (as described in 26 U.S.C. §501) | | | | | | | | | |
| | | ☐ Investment co | mpany, including | hedge fund or poole | d investment vehicle | (as defined in 15 U.S.C. §80a- | -3) | | |
| | | ☐ Investment ad | visor (as defined | in 15 U.S.C. §80b-2 | (a)(11)) | | | | |
| | C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes . 7213 | | | | | | | | |
| | | | | | | | | | |
| 8. | Under which chapter of the Bankruptcy Code is the | Check one: | | | | | | | |
| | debtor filing? | ☐ Chapter 7 | | | | | | | |
| | | ☐ Chapter 9 | | | | | | | |
| | | Chapter 11. Check all that apply: | | | | | | | |
| | | Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after | | | | | | | |
| | | The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a sm business debtor, attach the most recent balance sheet, statement of operations, cash-flow state and federal income tax return or if all of these documents do not exist, follow the procedure in 1 U.S.C. § 1116(1)(B). | | | | | cash-flow statement, | | |
| | | | ☐ A plan is | being filed with this | petition. | | | | |
| | | | • | nces of the plan were nce with 11 U.S.C. § | | from one or more classes of c | reditors, in | | |
| | | | ☐ The debt Exchang | or is required to file per Commission according | periodic reports (for ding to § 13 or 15(d) | example, 10K and 10Q) with th) of the Securities Exchange Acals Filing for Bankruptcy under | t of 1934. File the | | |
| | | | _ | 1A) with this form. | | 0 ''' 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 0.4.5.1.4.01.0 | | |
| | | ☐ Chapter 12 | ☐ The debt | or is a sneil compai | ny as defined in the | Securities Exchange Act of 19 | 34 Rule 120-2. | | |
| 9. | Were prior bankruptcy | ■ No. | | | | | | | |
| | cases filed by or against the debtor within the last 8 years? | ☐ Yes. | | | | | | | |
| | If more than 2 cases, attach a separate list. | District | | Wher | 1 | Case number | | | |
| | • | District | | When | 1 | Case number | | | |
| 10. | Are any bankruptcy cases | □ No | | | | | | | |
| | pending or being filed by a business partner or an affiliate of the debtor? | ■ Yes. | | | | | | | |
| | List all cases. If more than 1, attach a separate list | Debtor | Monaco Mot | el LLC | | Relationship | Cross-collatera | | |
| | , 2- | District | Eastern CA | When | 2/26/17 | Case number, if known | 17-21177 | | |
| | | | | | | | | | |

| Dep. | Lone Pine Motel LLC Case number (# known) | | | | | | | |
|--|---|-----------------|--|--|-----------------------------------|--|--|--|
| | Name | | | | | | | |
| 11. | Why is the case filed in this district? | Check al | ll that apply: | | | | | |
| | uns district: | | · • | cipal place of business, or principal assets i or for a longer part of such 180 days than in | , , | | | |
| | | □ A1 | bankruptcy case concerning del | btor's affiliate, general partner, or partnership | o is pending in this district. | | | |
| 12. | Does the debtor own or | ■ No | | | | | | |
| | have possession of any real property or personal property that needs immediate attention? | ☐ Yes. | Answer below for each property that needs immediate attention. Attach additional sheets if needed. | | | | | |
| | | | Why does the property need immediate attention? (Check all that apply.) | | | | | |
| | | | ☐ It poses or is alleged to pos | se a threat of imminent and identifiable hazar | rd to public health or safety. | | | |
| | | | What is the hazard? | | | | | |
| | | | ☐ It needs to be physically se | ecured or protected from the weather. | | | | |
| | | | | ls or assets that could quickly deteriorate or l meat, dairy, produce, or securities-related as | | | | |
| | | | ☐ Other | 3, , | • • | | | |
| | | | Where is the property? | | | | | |
| Number, Street, City, State & ZIP Code | | | | | | | | |
| Is the property insured? | | | | | | | | |
| | | | □ No | | | | | |
| | | | ☐ Yes. Insurance agency | | | | | |
| | | | Contact name | | | | | |
| | | | Phone | | | | | |
| | | | | | | | | |
| | Statistical and admin | istrative in | nformation | | | | | |
| 13. | Debtor's estimation of available funds | | Check one: | | | | | |
| | available funds | | Funds will be available for dis | tribution to unsecured creditors. | | | | |
| | | | After any administrative expe | nses are paid, no funds will be available to u | nsecured creditors. | | | |
| 14. | Estimated number of | 1 -49 | | □ 1,000-5,000 | ☐ 25,001-50,000 | | | |
| | creditors | □ 50-99 | | ☐ 5001-10,000 | 5 0,001-100,000 | | | |
| | | ☐ 100-1 | 99 | □ 10,001-25,000 | ☐ More than100,000 | | | |
| | | □ 200-9 | 999 | | | | | |
| 15. | Estimated Assets | □ \$0 - \$ | 650,000 | ■ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | |
| | | | 001 - \$100,000 | ☐ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion | | | |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$50,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion | | | |
| | | ப \$500, | 1001 - \$1 million | ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion | | | | |
| 16. | Estimated liabilities | □ \$0 - \$ | 550,000 | ■ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | |
| | | | 001 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion | | | |
| | | | ,001 - \$500,000 | ☐ \$50,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion | | | |
| | | □ \$500, | ,001 - \$1 million | ☐ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |

| _ | |
|----------|------|
| Γ | htor |
| | |

Lone Pine Motel LLC

| Case num | ber (<i>if</i> | known |
|----------|-----------------|-------|
|----------|-----------------|-------|

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is trued and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

March 8, 2017

| X | /s/ | Syed | М. | Chowdaury |
|---|-----|------|----|-----------|
| | | | | |

Syed M. Chowdaury

Printed name

Signature of authorized representative of debtor

Title Managing Member

18. Signature of attorney

X /s/ Robert P. Huckaby

Date March 8, 2017

MM / DD / YYYY

Signature of attorney for debtor

Robert P. Huckaby

Printed name

Robert Huckaby

Firm name

3330 Lake Tahoe Blvd Ste 10 South Lake Tahoe, CA 96150-7911

Number, Street, City, State & ZIP Code

•

Contact phone (530) 544-4697

Email address bobhuckaby@aol.com

097633 CA

Bar number and State

| Fill in this information to identify the case: | |
|---|---|
| Debtor name Lone Pine Motel LLC | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVIS | ION |
| | |
| Case number (if known) | ☐ Check if this is an |
| | amended filing |
| | |
| Official Form 202 | |
| Declaration Under Penalty of Perjury for Non-Indi | vidual Debtors 12/15 |
| he date. Bankruptcy Rules 1008 and 9011. VARNING Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 yeard 3571. | |
| Declaration and signature | |
| I am the president, another officer, or an authorized agent of the corporation; a member or an authorized serving as a representative of the debtor in this case. | agent of the partnership; or another individual |
| I have examined the information in the documents checked below and I have a reasonable belief that the | information is true and correct: |
| Schedule A/B: Assets–Real and Personal Property(Official Form 206A/B) | |
| Schedule D: Creditors Who Have Claims Secured by Property(Official Form 206D) | |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | |
| Schedule G: Executory Contracts and Unexpired Leases(Official Form 206G) | |
| Schedule H: Codebtors (Official Form 206H) | |
| Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum) | |
| Amended Schedule | |
| ■ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claim | s and Are Not Insiders (Official Form 204) |
| Other document that requires a declaration | |
| I declare under penalty of perjury that the foregoing is true and correct. | |
| Executed on March 8, 2017 X /s/ Syed M. Chowdaury | |
| Signature of individual signing on behalf of debtor | |
| Syed M. Chowdaury | |
| Printed name | |

Managing Member
Position or relationship to debtor

| Fill in this information to identify the case: | | |
|--|------------------------|---------------------|
| Debtor name Lone Pine Motel LLC | | |
| United States Bankruptcy Court for the: E | ASTERN DISTRICT OF | Check if this is an |
| C | CALIFORNIA, SACRAMENTO | |
| <u>D</u> | DIVISION | |
| Case number (if known): | | amended filing |
| | | |

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and
Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | | |
|---|--|---|---|---|-----------------|--------------|--|
| | contracts) | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim | | |
| Christopher Dale Mitchell Trust 1630 Challenge Dr # 110 Concord, CA 94520-5207 | | | Disputed | \$250,000.00 | \$1,200,000.00 | \$250,000.00 | |
| City of South Lake Tahoe 1901 Airport Rd South Lake Tahoe, CA 96150-7009 | | | | | | \$0.00 | |
| Franchise Tax Board Bankruptcy Unit PO Box 945827 Sacramento, CA 94257 | | | | | | \$0.00 | |
| Franchise Tax Board Bankruptcy Unit PO Box 942857 Sacramento, CA 94257 | | | | | | \$0.00 | |
| Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 | | | | | | \$0.00 | |
| Lakeside Park Association 4077 Pine Blvd South Lake Tahoe, CA 96150-6942 | | | | | | \$0.00 | |

| | Case | 11 21024 1 1100 00/00/11 | D00 1 | |
|---------------------|---|--|---|---|
| Fill in t | this information to identify the case: | | | |
| Debtor | name Lone Pine Motel LLC | | | |
| United | States Bankruptcy Court for the: EASTERN | DISTRICT OF CALIFORNIA, SACRAMENTO | DIVISION | |
| Case n | umber (if known) | | | |
| | | | | Check if this is an amended filing |
| | | | | |
| Offic | cial Form 206A/B | | | |
| _ | edule A/B: Assets - R | eal and Personal Pro | perty | 12/15 |
| all prop no bool | e all property, real and personal, which the detry in which the debtor holds rights and pok value, such as fully depreciated assets or a Also list them on Schedule G: Executory Co | wers exercisable for the debtor's own ben assets that were not capitalized. In Schedu | efit. Also include assets a le A/B, list any executory | nd properties which have |
| debtor | omplete and accurate as possible. If more sp s name and case number (if known). Also ide s attached, include the amounts from the atta | entify the form and line number to which the | | |
| schedu debtor | rt 1 through Part 11, list each asset under the ule or depreciation schedule, that gives the c 's interest, do not deduct the value of secure | details for each asset in a particular catego | ry. List each asset only o | nce. In valuing the |
| Part 1: 1. Does | Cash and cash equivalents the debtor have any cash or cash equivalen | uts? | | |
| | lo. Go to Part 2. | | | |
| | 'es Fill in the information below. | | | |
| All c | eash or cash equivalents owned or controlled Cash on hand | d by the debtor | | Current value of debtor's interest \$100.00 |
| | | | | |
| 3. | Checking, savings, money market, or finar Name of institution (bank or brokerage firm) | ncial brokerage accounts (Identify all) Type of account | Last 4 digits of account number | |
| | 3.1. US Bank | checking | | \$100.00 |
| 4. | Other cash equivalents (Identify all) | | | |
| E | Total of Part 1. | | | **** |
| 5. | Add lines 2 through 4 (including amounts on a | any additional sheets). Copy the total to line | 80. | \$200.00 |
| Part 2: | Deposits and Prepayments | | | |
| 6. Does | the debtor have any deposits or prepaymen | nts? | | |
| ■ N | lo. Go to Part 3. | | | |
| ΠY | es Fill in the information below. | | | |
| Part 3: | Accounts receivable | | | |
| | s the debtor have any accounts receivable? | | | _ |
| | lo. Go to Part 4. | | | |
| ■ Y | es Fill in the information below. | | | |

11. Accounts receivable

| Debto | Lone Pine Motel LLC | | Case number (If known) | | | |
|------------------|---|-------------------------------------|---|---|------------------------------------|--|
| | Name | | | | | |
| | 11a. 90 days old or less: | face amount | doubtful or uncollect | tible accounts | \$800.00 | |
| 12. | Total of Part 3. | | | | ¢200.00 | |
| 12. | | - 11b = line 12. Copy the total | to line 82. | _ | \$800.00 | |
| Part 4: | Investments | | | | | |
| 13. Doe s | s the debtor own any invest | ments? | | | | |
| ■ N | o. Go to Part 5. | | | | | |
| ☐ Y | es Fill in the information below | | | | | |
| Part 5: | Inventory, excluding a | griculture assets | | | | |
| | - | ory (excluding agriculture as | ssets)? | | | |
| □N | o. Go to Part 6. | | | | | |
| ■ Y | es Fill in the information below | | | | | |
| | General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest | |
| 19. | Raw materials | | | | | |
| 20. | Work in progress | | | | | |
| 21. | Finished goods, including | goods held for resale | | | | |
| 22. | Other inventory or supplie motel supplies | es | \$300.00 | | \$300.00 | |
| 23. | Total of Part 5. | | | | \$300.00 | |
| | Add lines 19 through 22. Co | opy the total to line 84. | | L | · | |
| 24. | Is any of the property lister No | d in Part 5 perishable? | | | | |
| | Yes | | | | | |
| 25. | Has any of the property lis ■ No | sted in Part 5 been purchased | d within 20 days before the | e bankruptcy was filed? | | |
| | ☐ Yes. Book value | Valuation i | method | Current Value | | |
| 26. | Has any of the property lis ■ No | sted in Part 5 been appraised | by a professional within t | the last year? | | |
| | ☐ Yes | | | | | |
| Part 6: | | elated assets (other than title | | - | | |
| 27. Does | s the debtor own or lease ar | y farming and fishing-related | d assets (other than titled | motor vehicles and land)? | | |
| | o. Go to Part 7.es Fill in the information below | | | | | |
| , L | 55 i iii iii die iiiioiiiiadoii below | | | | | |
| Part 7: | | es, and equipment; and collec | | | | |
| 38. Doe s | s the debtor own or lease ar | y office furniture, fixtures, e | quipment, or collectibles? | • | | |

■ No. Go to Part 8. Official Form 206A/B

| r Lone Pine Motel LLC | | Case | number (If known) | |
|--|---|---|--|---|
| Name | | | | |
| es Fill in the information below. | | | | |
| | | | | |
| * | | | | |
| s the debtor own or lease any mac | hinery, equipment, or v | ehicles? | | |
| No. Go to Part 9. | | | | |
| es Fill in the information below. | | | | |
| General description | | Net book value of | Valuation method used | Current value of |
| | entification numbers (i.e., | debtor's interest (Where available) | for current value | debtor's interest |
| Automobiles, vans, trucks, moto | rcycles, trailers, and tit | led farm vehicles | | |
| Watercraft, trailers, motors, and homes, personal watercraft, and fisl | related accessories Exa | amples: Boats, trailers, moto | rs, floating | |
| Aircraft and accessories | | | | |
| | | | | |
| Other machinery, fixtures, and equipment) | quipment (excluding far | rm | | |
| motel furniture and fixtures | | \$5,000.00 | | \$5,000.00 |
| | | | | |
| | | | _ | |
| Total of Part 8. | | | _ | \$5,000.00 |
| Add lines 47 through 50. Copy the | total to line 87. | | L | |
| | ble for any of the prope | erty listed in Part 8? | | |
| | | | | |
| | | | | |
| | Part 8 been appraised b | by a professional within th | ne last year? | |
| ■ No □ Yes | | | | |
| Pool property | | | | |
| | property? | | | |
| lo Co to Bort 10 | | | | |
| | | | | |
| | | | | |
| Any building, other improved rea | al estate, or land which | the debtor owns or in whi | ch the debtor has an interes | t |
| Description and location of property | Nature and extent of debtor's | Net book value of debtor's interest | Valuation method used for current value | Current value of debtor's interest |
| Include street address or other | interest in | (Where available) | | |
| Parcel Number (APN), and type of | | | | |
| property (for example, acreage, | | | | |
| factory, warehouse, apartment or | | | | |
| factory, warehouse, apartment or office building, if available. | | | | |
| | | | | |
| | Machinery, equipment, and vest the debtor own or lease any machiners and description and idea vine. General description and idea vine, HIN, or N-number. Automobiles, vans, trucks, motors, and homes, personal watercraft, and fist aircraft and accessories Other machinery, fixtures, and emachinery and equipment, motel furniture and fixtures Total of Part 8. Add lines 47 through 50. Copy the list a depreciation schedule availation in No yes Has any of the property listed in No yes Real property s the debtor own or lease any real in the information below. Any building, other improved real description and location of property Include street address or other description such as Assessor | Machinery, equipment, and vehicles s the debtor own or lease any machinery, equipment, or v lo. Go to Part 9. General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) Automobiles, vans, trucks, motorcycles, trailers, and tit Watercraft, trailers, motors, and related accessories Examples, personal watercraft, and fishing vessels Aircraft and accessories Other machinery, fixtures, and equipment (excluding farmachinery and equipment) motel furniture and fixtures Total of Part 8. Add lines 47 through 50. Copy the total to line 87. Is a depreciation schedule available for any of the propertion in the property listed in Part 8 been appraised to not property Real property s the debtor own or lease any real property? Io. Go to Part 10. Yes Real property Include street address or other description such as Assessor property Include street address or other description such as Assessor property | Machinery, equipment, and vehicles s the debtor own or lease any machinery, equipment, or vehicles? Io. Go to Part 9. General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motohomes, personal watercraft, and fishing vessels Aircraft and accessories Other machinery, fixtures, and equipment (excluding farm machinery and equipment) motel furniture and fixtures Total of Part 8. Add lines 47 through 50. Copy the total to line 87. Is a depreciation schedule available for any of the property listed in Part 8? No Yes Has any of the property listed in Part 8 been appraised by a professional within the No Yes Real property sthe debtor own or lease any real property? Io. Go to Part 10. Ges Fill in the information below. Any building, other improved real estate, or land which the debtor owns or in whit Description and location of property Include street address or other description such as Assessor Nature and extent of debtor's interest in property Include street address or other description such as Assessor | Machinery, equipment, and vehicles s the debtor own or lease any machinery, equipment, or vehicles? Jo. Go to Part 9. Ser Fill in the information below. General description Include year, make, model, and identification numbers (i.e., Where available) Automobiles, vans, trucks, motoreycles, trailers, and titled farm vehicles Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels Aircraft and accessories Other machinery, fixtures, and equipment (excluding farm machinery and equipment) motel furniture and fixtures \$5,000.00 Total of Part 8. Add lines 47 through 50. Copy the total to line 87. Is a depreciation schedule available for any of the property listed in Part 8? No Yes Has any of the property listed in Part 8 been appraised by a professional within the last year? Real property s the debtor own or lease any real property? Jo. Go to Part 10. Ser Fill in the information below. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest of debtor's interest (Where available) Valuation method used for current value for current value. |

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$1,200,000.00

Official Form 206A/B

| Debtor | Lone Pine Motel LLC | Case number (If known) |
|-----------------|--|---|
| | Name | |
| 57. | Is a depreciation schedule available for any of the ☐ No | property listed in Part 9? |
| | ■ Yes | |
| 58. | Has any of the property listed in Part 9 been appr | aised by a professional within the last year? |
| | No | |
| | □Yes | |
| Part 10: | Intangibles and intellectual property | |
| 59. Does | s the debtor have any interests in intangibles or int | ellectual property? |
| ■ No | o. Go to Part 11. | |
| □ Ye | es Fill in the information below. | |
| | | |
| Part 11: | All other assets | |
| | s the debtor own any other assets that have not yet de all interests in executory contracts and unexpired lea | |
| ■ No | o. Go to Part 12. | |
| □Y€ | es Fill in the information below. | |

Lone Pine Motel LLC Case number (If known) Debtor

| Part | 12: Summary | | |
|-------|---|------------------------------------|--------------------------------|
| In Pa | rt 12 copy all of the totals from the earlier parts of the form Type of property | Current value of personal property | Current value of real property |
| 80. | Cash, cash equivalents, and financial assets. Copy line 5, Part 1 | \$200.00 | |
| 81. | Deposits and prepayments. Copy line 9, Part 2. | \$0.00 | |
| 82. | Accounts receivable. Copy line 12, Part 3. | \$800.00 | |
| 83. | Investments. Copy line 17, Part 4. | \$0.00 | |
| 84. | Inventory. Copy line 23, Part 5. | \$300.00 | |
| 85. | Farming and fishing-related assets. Copy line 33, Part 6. | \$0.00 | |
| 86. | Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7. | \$0.00 | |
| 87. | Machinery, equipment, and vehicles. Copy line 51, Part 8. | \$5,000.00 | |
| 88. | Real property. Copy line 56, Part 9 | ·····> | \$1,200,000.00 |
| 89. | Intangibles and intellectual property. Copy line 66, Part 10. | \$0.00 | |
| 90. | All other assets. Copy line 78, Part 11. | +\$0.00_ | |
| 91. | Total. Add lines 80 through 90 for each column | \$6,300.00 + 9 | 91b. \$1,200,000.00 |
| 92. | Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$1,206,300.00 |

| Fill in this information to identify the | case: | | |
|--|--|--|--|
| Debtor name Lone Pine Motel L | LC | | |
| United States Bankruptcy Court for the | EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO I | DIVISION | |
| Case number(if known) | | | |
| \ | | _ | Check if this is an |
| | | | amended filing |
| Official Form 206D | | | |
| Schedule D: Creditors | s Who Have Claims Secured by Pr | operty | 12/15 |
| Be as complete and accurate as possible. | | | |
| 1. Do any creditors have claims secured by | | h.t | ant an this famou |
| ■ Yes. Fill in all of the information | page 1 of this form to the court with debtor's other schedules. De | btor has nothing else to repo | ort on this form. |
| Part 1: List Creditors Who Have S | | | |
| | who have secured claims. If a creditor has more than one secured | Column A | Column B |
| claim, list the creditor separately for each cl | aim. | Amount of claim | Value of collateral that supports this |
| Christopher Dale Mitchell | | Do not deduct the value of collateral. | claim |
| 2.1 Christopher Dale Mitchell Trust | Describe debtor's property that is subject to a lien | \$250,000.00 | \$1,200,000.00 |
| Creditor's Name | 864 Stateline Ave, South Lake Tahoe, CA 96150-6912 | | |
| 1630 Challenge Dr # 110 | | | |
| Concord, CA 94520-5207 Creditor's mailing address | | | |
| - | latha andita an incides a salatad anti-0 | | |
| | Is the creditor an insider or related party? ■ No | | |
| Creditor's email address, if known | Yes | | |
| Date debt was incurred | Is anyone else liable on this claim? ☐ No | | |
| | Yes. Fill out Schedule H: Codebtors (Official Form 206H) | | |
| Last 4 digits of account number | | | |
| Do multiple creditors have an | As of the petition filing date, the claim is: | | |
| interest in the same property? ☐ No | Check all that apply ☐ Contingent | | |
| Yes. Specify each creditor, | ☐ Unliquidated | | |
| including this creditor and its relative priority. | Disputed | | |
| 1. PCD Asset Group 2. Christopher Dale | | | |
| Mitchell Trust | _ | | |
| | | | |
| 2.2 El Dorado County Creditor's Name | Describe debtor's property that is subject to a lien | unknown | \$0.00 |
| | | | |
| 360 Fair Lane Placerville, CA 95667-8002 | | | |
| Creditor's mailing address | Describe the lien | | |
| | Is the creditor an insider or related party? | - | |
| | No | | |
| Creditor's email address, if known | ☐ Yes Is anyone else liable on this claim? | | |
| Date debt was incurred | ■ No | | |
| | ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H) | | |

Last 4 digits of account number

| Debto | | Lone Pine Motel LLC | Case | number (if kno | ow) | |
|----------------------|-------------------------|---|---|------------------|---|---|
| i | Do m intere | es. Specify each creditor, ding this creditor and its relative | As of the petition filing date, the claim is: Check all that apply Contingent Unliquidated Disputed | | | |
| | Credit | D Asset Group or's Name | Describe debtor's property that is subject to a lien 864 Stateline Ave, South Lake Tahoe, CA 96150-6912 | | \$1,200,000.00 | \$1,200,000.00 |
| \ <u>!</u> | Wal 945 | 0 Camino Diablo nut Creek, CA 97-3906 or's mailing address | Describe the lien | | | |
| (| Jean. | or's mailing address | Is the creditor an insider or related party? | | | |
| (| Credit | or's email address, if known | ☐ Yes Is anyone else liable on this claim? | | | |
| I | Date | debt was incurred | ☐ No Yes. Fill out Schedule H: Codebtors (Official Form 206 | CI 1/ | | |
| I | Last | 4 digits of account number | Yes. Fill out <i>Schedule H. Codebiols</i> (Official Form 200 | оп) | | |
| i | intere □ No ■ Ye | es. Specify each creditor, | As of the petition filing date, the claim is: Check all that apply Contingent Unliquidated | | | |
| , 2 | oriorit 1. P 2. C | ding this creditor and its relative ty. CD Asset Group christopher Dale chell Trust | ☐ Disputed | | | |
| 3. To | otal o | of the dollar amounts from Part 1, | Column A, including the amounts from the Additional Pa | age, if any. | \$1,450,000.0 0 | |
| | | | a Debt Already Listed in Part 1 | | | |
| | | nabetical order any others who m of claims listed above, and attorr | ust be notified for a debt already listed in Part 1. Exampl neys for secured creditors. | es of entities t | hat may be listed are | collection agencies, |
| | | s need to notified for the debts lis ne and address | sted in Part 1, do not fill out or submit this page. If addition | On which lin | needed, copy this pane in Part 1 did you ated creditor? | ge. Last 4 digits of account number for this entity |

| | Cas | Se 17-21524 Filed 03/08/17 DOC 1 | | |
|----------------------------------|--|---|--|----------------------|
| Fill in | this information to identify the case: | | | |
| Debtor | name Lone Pine Motel LLC | | 7 | |
| United | States Bankruptcy Court for the: EASTER | RN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION | | |
| Onnoa | ciates barintapley court for the. | AND DETERMINE OF THE PROPERTY | | |
| Case r | number (if known) | | ☐ Checki | f this is an |
| | | | amende | |
| Off; c | oid Form 206F/F | | | |
| | cial Form 206E/F | | | |
| | | o Have Unsecured Claims | | 12/15 |
| List the Persona in the bo | other party to any executory contracts or unex al Property (Official Form 206A/B) and on Schedoxes on the left. If more space is needed for Par —— | or creditors with PRIORITY unsecured claims and Part 2 for creditor pired leases that could result in a claim. Also list executory contractule G: Executory Contracts and Unexpired Leases (Official Form 2 rt 1 or Part 2, fill out and attach the Additional Page of that Part inc | cts on Schedule A/B: A 06G). Number the entri | Assets - Real and |
| Part 1: | List All Creditors with PRIORITY Unse | ecured Claims | | |
| 1. | Do any creditors have priority unsecured claim | ns? (See 11 U.S.C. § 507). | | |
| | ☐ No. Go to Part 2. | | | |
| | Yes. Go to line 2. | | | |
| 2. | List in alphabetical order all creditors who have | ve unsecured claims that are entitled to priority in whole or in part. | . If the debtor has more t | han 3 creditors with |
| | priority unsecured claims, fill out and attach the A | dditional Page of Part 1. | | |
| | | | Total claim | Priority amount |
| 2.1 | Priority creditor's name and mailing address | As of the petition filing date, the claim is: | unknown | \$0.00 |
| | Franchise Tax Board | Check all that apply. | | |
| | Bankruptcy Unit PO Box 942857 | ☐ Contingent ☐ Unliquidated | | |
| | Sacramento, CA 94257 | ☐ Disputed | | |
| | Date or dates debt was incurred | Basis for the claim: | | |
| | | | <u> </u> | |
| | Last 4 digits of account number | Is the claim subject to offset? | | |
| | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | ■ No | | |
| | unsecured claim. IT 0.3.0. § 307(a) (a) | Yes | | |
| 2.2 | Priority creditor's name and mailing address | As of the petition filing date, the claim is: | unknown | \$0.00 |
| | Franchise Tax Board | Check all that apply. | uirilowii | ψ0.00 |
| | Bankruptcy | Contingent | | |
| | Unit PO Box 945827 | ☐ Unliquidated | | |
| | Sacramento, CA 94257 | ☐ Disputed | | |
| | Date or dates debt was incurred | Basis for the claim: | | |
| | Last 4 digits of account number | Is the claim subject to offset? | _ | |
| | Specify Code subsection of PRIORITY | ■ No | | |
| | unsecured claim: 11 U.S.C. § 507(a) (8) | ☐ Yes | | |

| Debtor | Lone Pine Motel LLC | | | Case nui | mber (if known) | | | |
|-----------|---|----------------------------------|--|---------------|--|---------------------|----------|----------------------------|
| 2.3 | Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 | Check all the Continger Unliquid | ent ated | aim is: | - | unknov | vn | \$0.00 |
| | Philadelphia, PA 19101-7346 | ☐ Disputed | d | | | | | |
| | Date or dates debt was incurred | Basis for the | e claim: | | | | | |
| | Last 4 digits of account number | Is the claim | subject to offset? | | | | | |
| | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | ■ No □ Yes | | | | | | |
| | List All Creditors with NONPRIORITY Un List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. | | | he debtor has | s more than 6 creditor | s with nonpriority | | red claims, fill |
| 3.1 | Nonpriority creditor's name and mailing address | S | As of the petition file | ing date, the | claim is: Check all tha | at apply. | | unknown |
| | City of South Lake Tahoe 1901 Airport Rd | | ☐ Contingent☐ Unliquidated | | | | | |
| | South Lake Tahoe, CA 96150-7009 | | ☐ Disputed | | | | | |
| | Date(s) debt was incurred _ | | Basis for the claim: | | _ | | | |
| | Last 4 digits of account number | | Is the claim subject to | o offset? | No ∐ Yes | | | |
| | Nonpriority creditor's name and mailing address Lakeside Park Association 4077 Pine Blvd South Lake Tahoe, CA 96150-6942 | S | As of the petition fill Contingent Unliquidated Disputed | ing date, the | claim is: Check all the | at apply. | | unknown |
| | Date(s) debt was incurred _ | | Basis for the claim: | _ | | | | |
| | Last 4 digits of account number _ | | Is the claim subject to | o offset? | No Yes | | | |
| Part 3: | List Others to Be Notified About Unsecualphabetical order any others who must be notified. | | listed in Parts 1 and | 2 Evamples | of entities that may be | e lieted are collec | tion age | ancias assignaes |
| | ms listed above, and attorneys for unsecured creditor | | , notou iii i uito i uiiu | Z. Examples | or oriting that may be | | uon age | moioo, acoignoco |
| If no c | others need to be notified for the debts listed in F | Parts 1 and 2, | do not fill out or subn | nit this page | . If additional pages | are needed, cop | y the n | ext page. |
| | Name and mailing address | | | | line in Part1 or Part : editor (if any) listed? | | | digits of it number, if |
| Part 4: | Total Amounts of the Priority and Nonp | riority Unsec | cured Claims | | | | | |
| 5. Add tl | he amounts of priority and nonpriority unsecure | d claims. | | | | | | |
| 5a. Tota | al claims from Part 1 | | | 5a. | Total of claim a | amounts |) | |
| 5b. Tota | al claims from Part 2 | | | 5b. + | \$ | 0.00 | _ | 1 |
| | al of Parts 1 and 2 es 5a + 5b = 5c. | | | 5c. | \$ | 0. | .00 | |

| | 000011 2102 | 2001 | |
|--------|--|--|---|
| | this information to identify the case: | | |
| Debto | Lone Pine Motel LLC | | |
| United | d States Bankruptcy Court for the: EASTERN DISTRICT O | F CALIFORNIA, SACRAMENTO DIVISION | |
| Case | number (if known) | ☐ Check if this is an amended filing | |
| ∩ffi | cial Form 206G | | |
| | nedule G: Executory Contracts a | nd Unexpired Leases 12/15 | |
| | | ed, copy and attach the additional page, number the entries consecutively. | |
| | Does the debtor have any executory contracts or unexpired. ■ No. Check this box and file this form with the debtor's other soon of Yes. Fill in all of the information below even if the contacts of 206A/B). | | |
| 2. Lis | st all contracts and unexpired leases | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease | l |
| 2.1 | State what the contract or lease is for and the nature of the debtor's interest | | |
| | State the term remaining | | |
| | List the contract number of any government contract | | |
| 2.2 | State what the contract or lease is for and the nature of the debtor's interest | | |
| | State the term remaining | | |
| | List the contract number of any government contract | | |
| 2.3 | State what the contract or lease is for and the nature of the debtor's interest | | |
| | State the term remaining | | |
| | List the contract number of any government contract | | |
| 2.4 | State what the contract or lease is for and the nature of the debtor's interest | | |
| | State the term remaining | | |
| | List the contract number of any government contract | | |

Official Form 206G

| | | Case 17-21324 Tileu 03/00 | DITI DUCT | |
|------------|---|---|----------------------------------|--------------------------------------|
| Fill in th | is information to identi | fy the case: | | |
| Debtor n | ame Lone Pine Mo | otel LLC | | |
| United S | states Bankruptcy Court f | or the: EASTERN DISTRICT OF CALIFORNIA, SACE | RAMENTO DIVISION | |
| Case nu | mber (if known) | | | ☐ Check if this is an amended filing |
| | al Form 206H dule H: Your | Codebtors | | 12/15 |
| | mplete and accurate as al Page to this page. | possible. If more space is needed, copy the Addition | nal Page, numbering the e | entries consecutively. Attach the |
| 1. D | o you have any codebt | ors? | | |
| □ No. C | Check this box and subm | it this form to the court with the debtor's other schedules | . Nothing else needs to be | reported on this form. |
| Sch | edules D-G. Include all g | ors all of the people or entities who are also liable for juarantors and co-obligors. In Column 2, identify the credit tor is liable on a debt to more than one creditor, list each | tor to whom the debt is owe | d and each schedule on which the |
| | Name | Mailing Address | Name | Check all schedules that apply: |
| 2.1 | Monaco Motel LLC | 864 Stateline Ave South Lake Tahoe, CA 96150-6912 | Christopher Da Mitchell Trust | |
| 2.2 | Monaco Motel LLC | 864 Stateline Ave South Lake Tahoe, CA 96150-6912 | PCD Asset Gro | up |

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| 0436 I7 21024 | B00 1 | |
|--|--------------|---------------------------------|
| Fill in this information to identify the case: | | |
| Debtor name Lone Pine Motel LLC | | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMEN | NTO DIVISION | |
| Case number(if known) | - | ck if this is an nded filing |
| Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals | | 12/15 |
| Part 1: Summary of Assets | | |
| Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) | | |
| 1a. Real property: Copy line 88 from <i>Schedule A/B</i> | \$_ | 1,200,000.00 |
| 1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> | \$_ | 6,300.00 |
| 1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> | \$ <u></u> | 1,206,300.00 |
| Part 2: Summary of Liabilities | | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column AAmount of claim, from line 3 of Schedule D | \$_ | 1,450,000.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | | |
| 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a oSchedule E/F | \$_ | 0.00 |
| 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b oschedule E/F | +\$ _ | 0.00 |
| 4. Total liabilities | \$ | 1,450,000.00 |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

| In re | Lone Pine Motel LLC | | Case No. | | |
|----------|--|---|---------------------------------------|--------------------------------|---------|
| | | Debtor(s) | Chapter | 11 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTO | RNEY FOR I | DEBTOR | |
| co | arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | , or agreed to be pai | d to me, for services rendered | d or to |
| | For legal services, I have agreed to accept | | | 5,000.00 | |
| | Prior to the filing of this statement I have received | | \$ | 5,000.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | ne source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | ne source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. ■ | I have not agreed to share the above-disclosed compe firm. | ensation with any other person | unless they are men | nbers and associates of my la | ıw |
| | I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | m. A |
| 5. Iı | return for the above-disclosed fee, I have agreed to ret | nder legal service for all aspec | ts of the bankruptcy | case, including: | |
| b. c. | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] | ement of affairs and plan which | h may be required; | | ; |
| 6. B | y agreement with the debtor(s), the above-disclosed fee Adversary proceedings or other contests Post-petition accounting and operating r Filing fees. | ed bankruptcy matters. | g service: | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any nkruptcy proceeding. | agreement or arrangement fo | r payment to me for | representation of the debtor(| s) in |
| Ma | rch 8, 2017 | /s/ Robert P. Huc | kaby | | |
| Da | te | Robert P. Huckak Signature of Attorne Robert Huckaby | | | |
| | | 3330 Lake Tahoe South Lake Taho (530) 544-4697 F bobhuckaby@ao Name of law firm | e, CA 96150-7911 ax: (530) 544-776 | 0 | |

| Fi | I in this information to identify the case: | | | | |
|----|---|--|--|---------------------------|---|
| D€ | btor name Lone Pine Motel LLC | | | | |
| Ur | ited States Bankruptcy Court for the: EASTERN DISTRIC | CT OF CALIFOR | NIA, SACRAMENTO DIVI | SION | |
| Ca | se number(if known) | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | Check if this is an amended filing |
| | | | | | amended ming |
| 0 | fficial Form 207 | | | | |
| | atement of Financial Affairs for No | on-Individ | uals Filing for I | Bankruptcy | 04/10 |
| | debtor must answer every question. If more space is n debtor's name and case number (if known). | eeded, attach a | separate sheet to this for | m. On the top of a | ny additional pages, write |
| Pa | rt 1: Income | | | | |
| 1. | Gross revenue from business | | | | |
| | □ None. | | | | |
| | Identify the beginning and ending dates of the debtor which may be a calendar year | 's fiscal year, | Sources of revenue Check all that apply | | Gross revenue (before deductions and exclusions) |
| | For prior year: | | Operating a busin | ess | \$92,836.00 |
| | From 1/01/2016 to 12/31/2016 | | ☐ Other | | |
| | | | | | |
| | For year before that: From 1/01/2015 to 12/31/2015 | | Operating a busin | ess | \$149,653.00 |
| | From 1/01/2013 to 12/31/2013 | | ☐ Other | | |
| 2. | Non-business revenue Include revenue regardless of whether that revenue is taxable royalties. List each source and the gross revenue for each se | | | | collected from lawsuits, and |
| | ■ None. | | | | |
| | | | Description of source | ces of revenue | Gross revenue from each source (before deductions and exclusions) |
| Pa | rt 2: List Certain Transfers Made Before Filing for Ba | nkruptcy | | | |
| 3. | Certain payments or transfers to creditors within 90 day List payments or transfersincluding expense reimbursemer case unless the aggregate value of all property transferred to after that with respect to cases filed on or after the date of ac | ntsto any credito that creditor is le | r, other than regular employ | | |
| | ■ None. | | | | |
| | Creditor's Name and Address | Dates | Total amount of v | Reasons for Check all the | or payment or transfer nat apply |
| | | | | | |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their

| D | ebtor | Lone Pine Motel LLC | | Case number (if kr | nown) | |
|----|-----------|--|--|---|-----------------------|--------------------------|
| | relativ | es; affiliates of the debtor and insiders of su | ch affiliates; and any manag | ging agent of the debtor. 11 U.S.C | C. § 101(31). | |
| | | lone. | | | | |
| | | ider's name and address ationship to debtor | Dates | Total amount of value | Reasons for pa | yment or transfer |
| | 4.1. | Syed M Chowdaury 864 Stateline Ave South Lake Tahoe, CA 96150-69 general manager | 2016 12 | \$30,000.00 | owners draw | in lieu of wages |
| 5. | List al | ssessions, foreclosures, and returns I property of the debtor that was obtained by osure sale, transferred by a deed in lieu of fore | | | | / a creditor, sold at a |
| | ■ N | lone | | | | |
| | Cre | ditor's name and address | Describe of the Property | 1 | Date | Value of property |
| 6. | debto | ny creditor, including a bank or financial inst r without permission or refused to make a pa | | | | |
| | ■ N | lone | | | | |
| | Cre | ditor's name and address | Description of the action | n creditor took | Date action was taken | Amount |
| Р | art 3: | Legal Actions or Assignments | | | | |
| 7. | List th | actions, administrative proceedings, content legal actions, proceedings, investigations, ity—within 1 year before filing this case. | | | | otor was involved in any |
| | ■ N | lone. | | | | |
| | | Case title Case number | Nature of case | Court or agency's name and address | Status of o | case |
| 8. | List ar | nments and receivership ny property in the hands of an assignee for t er, custodian, or other court-appointed office | he benefit of creditors during er within 1 year before filing | g the 120 days before filing this c this case. | ase and any propert | y in the hands of a |
| | ■ N | lone | | | | |
| Р | art 4: | Certain Gifts and Charitable Contribut | ions | | | |
| 9. | | II gifts or charitable contributions the de to that recipient is less than \$1,000 | ebtor gave to a recipient w | vithin 2 years before filing this | case unless the aç | ggregate value of the |
| | ■ N | lone | | | | |
| | | Recipient's name and address | Description of the gifts | or contributions D | ates given | Value |
| P | art 5: | Certain Losses | | | | |
| 10 | . All los | sses from fire, theft, or other casualty w | ithin 1 year before filing th | his case. | | |
| | ■ N | lone | | | | |
| | | | | | | |

| Debtor | Lone Pine Motel LLC | | Case number (if known) | |
|--------|---------------------|--|------------------------|--|
|--------|---------------------|--|------------------------|--|

| Description of the property lost and how the loss occurred | Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property). | Dates of loss | Value of property lose |
|--|---|---------------|---------------------------|
|--|---|---------------|---------------------------|

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

| | Who was paid or who received the transfer? Address | If not money, describe any property transferred | Dates | Total amount or value |
|-------|---|---|--------|-----------------------|
| 11.1. | Robert Huckaby 3330 Lake Tahoe Blvd Ste 10 South Lake Tahoe, CA 96150-7911 | 0.00 | 3/2017 | \$5,000.00 |
| | Email or website address | | | |
| | Who made the payment, if not debtor? | | | |

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None.

Name of trust or device Describe any property transferred Dates transfers were made Value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

■ None.

Who received transfer?

Address

Description of property transferred or payments received or debts paid in exchange

Date transfer was made

Total amount or walue

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address Dates of occupancy From-To

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or

Case number (if known)

| - | provid | ling any surgical, psychiatric, drug treatme | ent, or obstetric care? | | | | | |
|--------------|------------------------------|--|--|----------------------------|---------------|--|-------------|---|
| | | No. Go to Part 9. Yes. Fill in the information below. | | | | | | |
| | | Facility name and address | Nature of the business debtor provides | s operation, inc | luding type | of services the | and hou | or provides meals using, number of s in debtor's care |
| Par | t 9: | Personally Identifiable Information | | | | | | |
| 16. I | Does t | he debtor collect and retain personally | identifiable information | of customers? | | | | |
| | _ | No. Yes. State the nature of the information co | illected and retained. | | | | | |
| | | 6 years before filing this case, have a sharing plan made available by the del | | | pants in an | y ERISA, 401(k), 4 | 03(b), or | other pension or |
| | | No. Go to Part 10. Yes. Does the debtor serve as plan admini | istrator? | | | | | |
| Par | t 10: | Certain Financial Accounts, Safe Dep | osit Boxes, and Storage | Units | | | | |
| \ (| Within or trans nclude | I financial accounts 1 year before filing this case, were any fine sterred? 2 checking, savings, money market, or other atives, associations, and other financial instancial ins | er financial accounts; certif | | | | | |
| | ■ No | Financial Institution name and Address | Last 4 digits of account number | Type of acco instrument | unt or | Date account wa closed, sold, moved, or transferred | | ast balance before closing or transfer |
| | | eposit boxes y safe deposit box or other depository for s | securities, cash, or other va | luables the debto | or now has o | or did have within 1 y | /ear before | e filing this case. |
| | ■ No | one | | | | | | |
| | Depo | ository institution name and address | Names of anyone to it Address | with access | Description | on of the contents | | Do you still have it? |
| I | _ist any | emises storage y property kept in storage units or warehoutor does business. | uses within 1 year before fil | ing this case. Do | o not include | facilities that are in | a part of a | a building in which |
| | ■ No | one | | | | | | |
| | Faci | lity name and address | Names of anyone to it | with access | Description | on of the contents | | Do you still have it? |
| Par | t 11: | Property the Debtor Holds or Control | s That the Debtor Does N | lot Own | | | | |
| I | _ist any | rty held for another y property that the debtor holds or controls or rented property. | that another entity owns. I | nclude any prope | erty borrowe | d from, being stored | for, or he | ld in trust. Do not list |
| | □ Nor | | | | | | | |

Debtor Lone Pine Motel LLC

| Debtor Lone Pine Motel LLC | | Case number (if known) | | |
|---|---|---|-----------------------|--|
| Owner's name and address | Location of the property | Describe the property | Value | |
| Syed Chowdaury 864 Stateline Ave South Lake Tahoe, CA 96150-6912 | Education of the property | manager's personal property | \$1.00 | |
| Part 12: Details About Environment Information | tion | | | |
| or the purpose of Part 12, the following definitions Environmental lawmeans any statute or gove affected (air, land, water, or any other medium | ernmental regulation that concerns pollut | tion, contamination, or hazardous material, r | regardless of the med | |
| Site means any location, facility, or property, ir operated, or utilized. | ncluding disposal sites, that the debtor no | w owns, operates, or utilizes or that the debto | or formerly owned, | |
| Hazardous material means anything that an e harmful substance. | environmental law defines as hazardous or | toxic, or describes as a pollutant, contamina | nt, or a similarly | |
| Report all notices, releases, and proceedings k | known, regardless of when they occur | red. | | |
| 2. Has the debtor been a party in any judicia | I or administrative proceeding under a | any environmental law? Include settlemer | nts and orders. | |
| No.Yes. Provide details below. | | | | |
| Case title Case number | Court or agency name and address | Nature of the case | Status of case | |
| 3. Has any governmental unit otherwise notifi environmental law? | ied the debtor that the debtor may be I | iable or potentially liable under or in viola | ation of an | |
| ■ No.□ Yes. Provide details below. | | | | |
| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice | |
| 4. Has the debtor notified any governmental u | unit of any release of hazardous mater | ial? | | |
| No.Yes. Provide details below. | | | | |
| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice | |
| Part 13: Details About the Debtor's Business | s or Connections to Any Business | | | |
| 5. Other businesses in which the debtor has c List any business for which the debtor was an o Include this information even if already listed i | owner, partner, member, or otherwise a pe | erson in control within 6 years before filing this | s case. | |
| ■ None | | | | |
| Business name address | Describe the nature of the business | Employer Identification number Do not include Social Security number | or ITIN. | |
| | | Dates business existed | | |
| Books, records, and financial statements 26a. List all accountants and bookkeepers who None | maintained the debtor's books and record | ds within 2 years before filing this case. | | |
| Name and address | | Date From | of service n-To | |

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

| De | btor | Lone Pine Motel LLC | | | Case num | ber (if known) | |
|-----|------------------------|---|--|------------------|---------------|---|-----------------------|
| | | | | | | | |
| | | None | | | | | |
| | 26c. l | List all firms or individuals who were | e in possession of the debtor's books | of account and | d records w | when this case is filed. | |
| | | None | | | | | |
| | Na | me and address | | | If any explai | books of account and record | ds are unavailable, |
| | | List all financial institutions, credito within 2 years before filing this case | ors, and other parties, including merc e. | antile and trad | de agencie | s, to whom the debtor issued | a financial statement |
| | | None | | | | | |
| | Na | me and address | | | | | |
| | Have | No | perty been taken within 2 years before | filing this case | e? | | |
| | | Yes. Give the details about the tw | | | | | |
| | | Name of the person who sup inventory | ervised the taking of the | Date of inv | entory | The dollar amount and bas or other basis) of each inve | |
| | | he debtor's officers, directors, r ol of the debtor at the time of th | nanaging members, general partne e filing of this case. | rs, members | in contro | l, controlling shareholders, c | or other people in |
| | Na | me | Address | | Position | and nature of any interest | % of interest, if any |
| | Sy | ed M Chowdaury | 864 Stateline Ave South Lake Tahoe, CA 96150 |)-6912 | Genera | l manager | 50% |
| | Na | me | Address | | Position | and nature of any interest | % of interest, if any |
| | Vil | kashni Prasad | 864 Stateline Ave South Lake Tahoe, CA 96150 |)-6912 | genera | l partner | 50% |
| 30. | of the □ Payn Withi | No Yes. Identify below. nents, distributions, or withdraw | case, did the debtor have officers, trol of the debtor who no longer had also credited or given to insiders the debtor provide an insider with valued options exercised? | old these pos | itions? | | |
| | | | | | | | |

| | Reason for providing the value owner draw in lieu of wages |
|--|---|
| 30.1 Syed M Chowdaury 864 Stateline Ave South Lake Tahoe, CA 96150-6912 30000 2016 Relationship to debtor general manager 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes No Yes. Identify below. Name of the parent corporation Employer Identification | owner draw in lieu of wages |
| 864 Stateline Ave South Lake Tahoe, CA 96150-6912 Relationship to debtor general manager 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes No Yes. Identify below. Name of the parent corporation Employer Identification | lieu of wages |
| Relationship to debtor general manager 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes No Yes. Identify below. Name of the parent corporation Employer Identification | ;? |
| ■ No □ Yes. Identify below. Name of the parent corporation Employer Identification | ;? |
| Yes. Identify below. Name of the parent corporation Employer Identification | |
| | |
| corporation | n number of the parent |
| 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pens | sion fund? |
| ■ No □ Yes. Identify below. | |
| Name of the parent corporation Employer Identification corporation | n number of the parent |
| Part 14: Signature and Declaration | |
| WARNING Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | property by fraud in connection |
| I have examined the information in this tatement of Financial Affairs and any attachments and have a reasonable belief the correct. | hat the information is true and |
| I declare under penalty of perjury that the foregoing is true and correct. | |
| Executed on March 8, 2017 | |
| /s/ Syed M. Chowdaury Syed M. Chowdaury | |
| Signature of individual signing on behalf of the debtor Printed name | |
| Position or relationship to debtor Managing Member | |
| Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) a ■ No □ Yes | ittached? |

United States Bankruptcy Court Eastern District of California, Sacramento Division

| IN RE: | Case No Chapter 11 | | | | |
|--|------------------------|---|--|--|--|
| Lone Pine Motel LLC | | | | | |
| Debtor(s) | • | | | | |
| LIST OF EQUITY SECU | JRITY HOLDERS | | | | |
| Registered name and last known address of security holder | Shares (or Percentage) | Security Class (or kind of interest) | | | |
| Syed M Chowdaury 864 Stateline Ave South Lake Tahoe, CA 96150-6912 | 50 | General Partner | | | |
| Vikashni Prasad 864 Stateline Ave South Lake Tahoe, CA 96150-6912 | 50 | General Partner | | | |

RESOLUTION OF BOARD OF DIRECTORS OF LONE PINE MOTEL LLC

WHEREAS, the members of LONE PINE MOTEL LLC, a limited liability company organized under the laws of the State of California, have been notified that creditor CHRISTOPHER DALE MITCHELL, TRUSTEE OF THE CHRISTOPHER DALE MITCHELL 2003 TRUST has filed a Notice of Default and Notice of Sale for the company's primary asset.

NOW THEREFORE BE IT RESOLVED:

That the assets of this company need to be protected from attack by a third party, together with managing the assets, debts and obligations of this company in a reasonable manner, and that the most expeditious way to do so is to file for protection under the United States Bankruptcy Laws.

That Syed M. Chowdaury is authorized and directed to file a Petition under Chapter 11 of Title 11 of the United States Code, and to file such other schedules, disclosures and financial information as is necessary and appropriate to pursue such a case.

That Syed M. Chowdaury is authorized and directed to appear on behalf of the company and to do and perform any and all acts and deeds as are necessary and appropriate to pursue such a case.

That Robert P. Huckaby shall be retained as legal counsel for the company in preparing and filing the documents to initiate the Chapter 11 proceeding and to otherwise represent the company in all matters before the United States Bankruptcy Court, and to defend the assets of the company from third-party creditors.

I, Syed M. Chowdaury, do hereby certify that I am the duly elected and qualified keeper of the company records of LONE PINE MOTEL LLC, a limited liability company organized under the laws of the State of California, and that the above is a true and correct copy of a resolution duly adopted at a meeting of the directors thereof, convened and held in accordance with law and the Bylaws of the company and that such resolution is now in full force and effect.

IN WITNESS WHEREOF, I have affixed my name as responsible officer.

| /s/ Syed M. Chowdaury | Date: March 8, 2017 |
|-----------------------|---------------------|
| Sved M. Chowdaury | , |