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Fill in this information to identify th	ne case:	
United States Bankruptcy Court for th	ne:	
Southern District of	California (State)	
Case number (If known):	Chapter	☐ Check if this is an amended filing
If more space is needed, attach a se	parate sheet to this form. On the top of any addition, a separate document, Instructions for Ba	Filing for Bankruptcy 04/16 Ititional pages, write the debtor's name and the case ankruptcy Forms for Non-Individuals, is available.
1. Debtor's name	Pointe SDMU, LP	
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)	9 3 - 1 2 1 0 0 1 7	
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	3130 Bonita Road	
	Number Street	Number Street
		P.O. Box
	Chula Vista CA 9191	
	City State ZIP Cod	e City State ZIP Code
		Location of principal assets, if different from principal place of business
	San Diego	SE corner of Sweetwater & Jamacha
	County	Number Street
		County of San Diego CA
		City State ZIP Code
5. Debtor's website (URL)		
6. Type of debtor	☐ Corporation (including Limited Liability Comp ☐ Partnership (excluding LLP) ☐ Other. Specify:	pany (LLC) and Limited Liability Partnership (LLP))

Pointe SDMU, LP Debto Case number (if known) □ \$0-\$50,000 \$1,000,001-\$10 million □ \$500,000,001-\$1 billion 16. Estimated liabilities \$50,001-\$100,000 □ \$10,000,001-\$50 million □ \$1,000,000,001-\$10 billion \$100,001-\$500,000 **5**50,000,001-\$100 million □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million ■ \$100,000,001-\$500 million ■ More than \$50 billion 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 The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this authorized representative of petition. debtor 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 true and correct. I declare under penalty of perjury that the foregoing is true and correct. Executed on Robert A. Gosness Signature of authorized representative of debtor Printed name Title CEO of General Partner 18. Signature of attorney Date 3/7/2018 Signature of attorney for debtor /DD /YYYY Dayna C. Chillas Printed name The Chillas Law Firm Firm name 3645 Ruffin Road, Suite 210 Number San Diego 92123 City State (858) 652-0250 dayna.c@hotmail.com Contact phone Email address 181648 CA Bar number State

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