in this information to ident	ify your case:			
ted States Bankruptcy Court	for the:			
DDLE DISTRICT OF FLORID	A			
se number (if known)		_ Chapter <b>11</b>		
			☐ Check if this a amended filing	
oluntary Petiti	a separate sheet to this form. On the to	op of any additional pages, w	rite the debtor's name and case	4/16 number (if known).
more information, a separa	te document, <i>Instructions for Bankrupt</i> Level 1, Inc.	tcy Forms for Non-Individuals	s, is available.	
All other names debtor used in the last 8 years				
Include any assumed names, trade names and doing business as names	DBA Spice Modern Steakhouse			
Debtor's federal Employer Identification Number (EIN)	20-8789657			
Debtor's address	Principal place of business			pal place of
	109 Applewood Drive	РО Во	ox 520085	
	Longwood, FL 32750			IP Codo
	•		•	
	County			t trom principal
				301
Debtor's website (URL)				
Type of debtor	■ Corporation (including Limited Liabil	ity Company (LLC) and Limited	I Liability Partnership (LLP))	
	☐ Partnership (excluding LLP)	,	, , , ,	
	☐ Other. Specify:			
	ficial Form 201 Dluntary Petiti ore space is needed, attachmore information, a separa  Debtor's name  All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names  Debtor's federal Employer Identification Number (EIN)  Debtor's address  Debtor's address	Debtor's name  Debtor's federal Employer Identification Number (EIN)  Debtor's address  Debtor's address  Principal place of business  109 Applewood Drive Longwood, FL 32750 Number, Street, City, State & ZIP Code Seminole  County  Type of debtor  Diuntary Petition for Non-Individu as sparate sheet to this form. On the tomore information, a separate document, Instructions for Bankruph  Debtor's name  Level 1, Inc.  DBA Spice Modern Steakhouse  DBA Spice Modern Steakhouse  20-8789657  Principal place of business  109 Applewood Drive Longwood, FL 32750 Number, Street, City, State & ZIP Code Seminole  County	ted States Bankruptcy Court for the:    DOLE DISTRICT OF FLORIDA	ted States Bankruptcy Court for the:    DELE DISTRICT OF FLORIDA

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 2 of 46

Debt	tor	Level 1, Inc.						Case number (if	known)		
	٦	Name									
7.	Doco	ribe debtor's business	A Chor	ok ono:							
٠.	Desc	Tibe debtor 3 business			Rusinas	ss (as defined in 11 U.S	C 8 101	I(27A))			
						state (as defined in 11 L					
				-		•	_	101(316))			
						in 11 U.S.C. § 101(44)					
				,		ned in 11 U.S.C. § 101(	,,,				
			☐ Con	Commodity Broker (as defined in 11 U.S.C. § 101(6))							
			☐ Clea	aring Banl	k (as de	efined in 11 U.S.C. § 78	31(3))				
			■ Non	ne of the a	bove						
			B. Ched	ck all that	apply						
			□ Тах-	exempt er	ntity (as	s described in 26 U.S.C	. §501)				
				•	•	y, including hedge fund	,	d investment vehic	le (as defined in 15 L	J.S.C. §80a-3)	
						as defined in 15 U.S.C.			( )	<b>0</b> • • • • • • • • • • • • • • • • • • •	
						can Industry Classification				tor.	
			000	7225	w.u5000	arto.gov/toar aigit riation	101 0000	Sidilon Halos codes	<u>:</u>		
8.		er which chapter of the	Check of	one:							
		ruptcy Code is the or filing?	☐ Cha	pter 7							
		g.	☐ Cha	pter 9							
			■ Cha	Chapter 11. Check all that apply:							
						Debtor's aggregate no	onconting	gent liquidated deb	ts (excluding debts or	wed to insiders or affiliates)	
						are less than \$2,566,0	050 (amo	ount subject to adju	stment on 4/01/19 ar	nd every 3 years after that).	
									- '	1D). If the debtor is a small	
						business debtor, attac statement, and federa				•	
						procedure in 11 U.S.C	C. § 1116	(1)(B).			
						A plan is being filed w	ith this p	etition.			
						Acceptances of the place accordance with 11 U			n from one or more cl	asses of creditors, in	
									example, 10K and 10	Q) with the Securities and	
						Exchange Commissio	n accord	ling to § 13 or 15(d	) of the Securities Ex	change Act of 1934. File the	
						attachment to Volunta (Official Form 201A) v			als Filing for Bankrup	tcy under Chapter 11	
						The debtor is a shell of	company	as defined in the S	Securities Exchange /	Act of 1934 Rule 12b-2.	
			☐ Cha	pter 12							
9.	Were	prior bankruptcy	□ No.								
	case	s filed by or against lebtor within the last 8	Yes.								
	years		■ Yes.								
						dle District of					
		re than 2 cases, attach a rate list.		District		ida, Orlando sion	When	4/30/13	Case number	6:13-bk-05356-CCJ	
	ЗСРА	rate list.		District			- VVIICII		Odde Humber		
						dle District of ida, Orlando					
				District	Divi		When	12/29/09	Case number	6:09-bk-19770-ABB	
10.		any bankruptcy cases ling or being filed by a	□ No								
	busir	ness partner or an	Yes.								
		ate of the debtor?									
		all cases. If more than 1, ha separate list		Debtor	See	Attachment	_		Relationship		

### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 3 of 46

Debtor	Level 1, Inc.		C	ase number (if known)		
	Name					
		District	When	Case	se number, if known	

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 4 of 46

Deb				Case number (if known	
	Name				
11.	Why is the case filed in	Check a	all that apply:		
	this district?			cipal place of business, or principal assets n or for a longer part of such 180 days than	
		<b>■</b> A	bankruptcy case concerning de	ebtor's affiliate, general partner, or partners	ship is pending in this district.
12.	Does the debtor own or	13(1)			
	have possession of any real property or person property that needs	/	Answer below for each prope	erty that needs immediate attention. Attach	additional sheets if needed.
	immediate attention?		Why does the property nee	d immediate attention? (Check all that ap	oply.)
			☐ It poses or is alleged to po	ose a threat of imminent and identifiable ha	zard to public health or safety.
			What is the hazard?		
			$\square$ It needs to be physically s	ecured or protected from the weather.	
				ds or assets that could quickly deteriorate meat, dairy, produce, or securities-related	or lose value without attention (for example, assets or other options).
			☐ Other		
			Where is the property?		
				Number, Street, City, State & ZIP Code	
			Is the property insured?		
			□ No		
			Yes. Insurance agency		
			Contact name		
			Phone		
	Statiatical and adm	almintrative i	information		
12	Statistical and adn  Debtor's estimation of		Check one:		
13.	available funds		_	Control of the contro	
			_	stribution to unsecured creditors.	
			☐ After any administrative expe	enses are paid, no funds will be available to	o unsecured creditors.
14.	Estimated number of	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000
	creditors	☐ 50-99	9	□ 5001-10,000	□ 50,001-100,000
		□ 100-	199	□ 10,001-25,000	☐ More than100,000
		□ 200-9	999		
15.	Estimated Assets	□ \$0 - 3	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
		<b>\$50,0</b>	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	0,001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion
16.	Estimated liabilities	□ \$0 - 3	\$50,000	☐ \$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	0,001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 5 of 46

Debtor	Level 1, Inc.		Case number (if known)							
	Name									
	•									
	Request for Relief	, Declaration, and Signatures								
WARNII	NG Bankruptcy frau imprisonment fo	d is a serious crime. Making a false statement in or up to 20 years, or both. 18 U.S.C. §§ 152, 134	n connection with a bankruptcy case can result in fines up to \$500,000 or 41, 1519, and 3571.							
of a	laration and signatu uthorized esentative of debtor	The debtor requests relief in accordance w	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 f	oregoing is true and correct.							
		Executed on November 15, 2016  MM / DD / YYYYY	_							
		X /s/ Manuel Tato	Manuel Tato							
		Signature of authorized representative of d	lebtor Printed name							
		Title Chief Restructuring Officer								
		Y (s/ David D. MaFadia	November 45, 0040							
18. Sigr	nature of attorney	X /s/ David R. McFarlin Signature of attorney for debtor	Date November 15, 2016  MM / DD / YYYY							
		Signature of attorney for debtor	MIM / DD / TTTT							
		David R. McFarlin								
		Printed name								
		Fisher Rushmer, P.A.								
		Firm name								
		390 North Orange Avenue								
		Suite 2200								
		Orlando, FL 32801-1642 Number, Street, City, State & ZIP Code								
		Number, Street, City, State & ZIP Code								
		Contact phone 407-843-2111	Email address dmcfarlin@fisherlawfirm.com							
		328855								
		Bar number and State								

Debtor I eve

Level 1, Inc.

Case number (if known)

Fill in this information to identify your case:				
United States Bankruptcy Court for the:				
MIDDLE DISTRICT OF FLORIDA	_			
Case number (if known)	Chapter	11		
				Check if this an amended filing

#### **FORM 201. VOLUNTARY PETITION**

#### **Pending Bankruptcy Cases Attachment**

Debtor	Brea Lynnae Tato			Relationship to you	Spouse of affiliate
District	Middle District of Florida, Orlando Division	When	11/06/15	Case number, if known	6:15-bk-09444-CCJ
Debtor	Manuel Tato			Relationship to you	Affiliate
District	Middle District of Florida, Orlando Division	When	10/10/16	Case number, if known	6:16-bk-06638-CCJ

Fill in this info	ormation to identify the case:	
Debtor name	Level 1, Inc.	
	Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
Office States i	- INDUCTION OF TESTIBAL	
Case number (	(if known)	☐ Check if this is an amended filing
Official Fo	rm 202	
Declara	tion Under Penalty of Perjury for Non-Individua	al Debtors 12/15
form for the so amendments o	who is authorized to act on behalf of a non-individual debtor, such as a corporation or partner thedules of assets and liabilities, any other document that requires a declaration that is not in of those documents. This form must state the individual's position or relationship to the debto Bankruptcy Rules 1008 and 9011.	cluded in the document, and any
	ankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining the a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or l.	
D	eclaration and signature	
	president, another officer, or an authorized agent of the corporation; a member or an authorized ager I serving as a representative of the debtor in this case.	nt of the partnership; or another
I have ex	amined the information in the documents checked below and I have a reasonable belief that the information	mation 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 Claims and A	re Not Insiders (Official Form 204)
	Other document that requires a declaration	
I declare	under penalty of perjury that the foregoing is true and correct.	
Execute		
	Signature of individual signing on behalf of debtor	

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 

Manuel Tato
Printed name

**Chief Restructuring Officer**Position or relationship to debtor

Fill in this information to identify the case:	
Debtor name Level 1, Inc.	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	☐ Check if this is an
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

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,	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.		
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
A Linen Connection 2400 Dinneen Ave Orlando, FL 32804		Trade debt				\$530.35
Bright House Networks PO Box 30574 Tampa, FL 33630-3574		Trade debt				\$763.28
Cozzini Brothers, Inc 350 Howard Ave Des Plaines, IL 60018		Trade debt				\$306.72
Emergency Air Care, Inc 1112 Branchwood Drive Apopka, FL 32703		Trade debt				\$275.00
Florida Dept. of Revenue Bankruptcy Unit PO Box 6668 Tallahassee, FL 32314-6668		All personal property of debtor	Unliquidated	\$262,105.05	\$64,624.06	\$197,480.99
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346		Taxes	Unliquidated			\$4,119.92
Micros of Central Florida 270 W Marvin Avenue Longwood, FL 32750-5473		Trade debt				\$1,270.33

Debtor Level 1, Inc.
Name

Case number (if known)

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,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unse claim is partially secure value of collateral or se	nt and deduction for	
		professional solviess,	aiopatou	Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Neoguard Pest Solution Svcs 5950 Lakehurst Drive Suite 276 Orlando, FL 32819		Trade debt				\$985.15
Open Table, Inc PO Box 671198 Dallas, TX 75267-1198		Trade debt				\$1,224.57
Orlando Utilities Commission PO Box 4901 Orlando, FL 32802-4901		Deposit with Orlando Utilities Commission		\$11,436.31	\$10,005.06	\$1,431.25
Owens Distributors PO Box 1358 Sanford, FL 32772		Trade debt				\$521.07
Post Apartment Homes LP 4401 Northside Pkwy Ste 800 Atlanta, GA 30327		All personal property of debtor		\$95,321.93	\$64,624.06	\$30,697.87
Travelers Indemnity Company c/o Amy J. Winarsky, Esq Marcadis Singer, PA 5104 S Westshore Blvd Tampa, FL 33611		Trade debt	Contingent Unliquidated Disputed			\$38,996.50

#### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 10 of 46

Fill in this	s information to identify the case:		
Debtor na	me Level 1, Inc.		
United Sta	ates Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
Case num	nber (if known)	_	c if this is an ded filing
	al Form 206Sum ary of Assets and Liabilities for Non-Individuals		12/15
Part 1:	Summary of Assets		
1. Sch	edule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
1a. <b>F</b>	Real property: Copy line 88 from <i>Schedule A/B</i>	\$	0.00
	Fotal personal property: Copy line 91A from Schedule A/B	\$	76,464.12
1c. <b>T</b>	Total of all property: Copy line 92 from Schedule A/B	\$	76,464.12
Part 2:	Summary of Liabilities		
2. <b>Sch</b> e	edule D: Creditors Who Have Claims Secured by Property (Official Form 206D) y the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	370,872.40
3. <b>Sch</b>	edule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
<b>3a. 1</b>	Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F	\$	4,119.92
<b>3b.</b> 7	Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+\$	44,872.97
	I liabilities	\$	419,865.29

		00	0.10 BK 01-10-1	D001 1 11Ca 11/10/10	1 age 11	01 + <b>0</b>
Fill ir	this in	formation to ident	fy the case:			
Debto	r name	Level 1, Inc.				
Unite	d States	Bankruptcy Court	or the: MIDDLE DISTRIC	CT OF FLORIDA		
Case	number	r (if known)				_ 0
						Check if this is an amended filing
Off	icial	Form 206	SA/B			
				and Personal Pro	perty	12/15
Disclo Includ which	se all p le all pr have n	oroperty, real and poperty in which the book value, suc	personal, which the debto e debtor holds rights and h as fully depreciated ass	or owns or in which the debtor has a powers exercisable for the debtor ets or assets that were not capitalizatory Contracts and Unexpired Lea	any other legal, e s own benefit. Al zed. In Schedule	quitable, or future interest. so include assets and properties A/B, list any executory contracts
the de	btor's i	name and case nu	mber (if known). Also ide	is needed, attach a separate sheet ntify the form and line number to w ne attachment in the total for the pe	hich the addition	
sche debte	dule or or's inte	depreciation sche erest, do not deduc	dule, that gives the detail t the value of secured cla	propriate category or attach separat s for each asset in a particular cate aims. See the instructions to unders	gory. List each a	sset only once. In valuing the
Part 1. <b>Do</b>		Cash and cash equebtor have any cas	sh or cash equivalents?			
	No. Go	to Part 2.				
	Yes Fill	in the information b				
<b>All</b> 2.		r cash equivalents h on hand	owned or controlled by t	he debtor		Current value of debtor's interest \$150.00
3.			oney market, or financial l k or brokerage firm)	brokerage accounts (Identify all) Type of account	Last 4 digits on number	of account
	3.1.	Wells Fargo		Checking	8615	\$1.55
4.	Othe	er cash equivalent	s (Identify all)			
5.	Tota	al of Part 1.				\$151.55
	Add	lines 2 through 4 (in	ncluding amounts on any a	dditional sheets). Copy the total to line	<del>2</del> 80.	
Part 2		Deposits and Prep	•			
6. <b>Do</b> e	s the d	ebtor have any de	posits or prepayments?			
_		to Part 3. in the information b	pelow.			
7.			curity deposits and utility ame of holder of deposit	/ deposits		
	7.1.	Deposit with C	rlando Utilities Comm	ission		\$10,005.06
	7.2.	Deposit with T	eco People's Gas			\$835.00

Official Form 206A/B

Debtor		Level 1, Inc.			Case	number (If known)	
		Name					
	7.0	Danasit with Bassa Er	norav				\$1,000.00
	7.3	Deposit with Pesco E	nergy				\$1,000.00
8.	Pre Des	epayments, including prepayscription, including name of ho	yments on executory co older of prepayment	ntracts, leases,	insurance	e, taxes, and rent	
9.	Tot	tal of Part 2.					\$11,840.06
	Add	d lines 7 through 8. Copy the	total to line 81.				· ·
Part 3:		Accounts receivable					
10. <b>Does</b>	the	debtor have any accounts	receivable?				
■ No	). G	o to Part 4.					
□ Ye	s Fi	Il in the information below.					
Part 4:		Investments					
	the	debtor own any investmen	ts?				
■ N		o to Part 5.					
		Il in the information below.					
Part 5:		Inventory, excluding agricu					
18. <b>Doe</b> s	the	e debtor own any inventory	(excluding agriculture a	ssets)?			
		o to Part 6.					
■ Ye	s Fi	Il in the information below.					
	Ge	neral description	Date of the last physical inventory	Net book val debtor's inte (Where availa	rest	Valuation method used for current value	Current value of debtor's interest
19.	Ra	w materials					
20.	Wo	ork in progress					
21.	Fin	ished goods, including goo	ds held for resale				
22.	Oth	ner inventory or supplies					
	Fo	od and beverage	10/31/2016	\$24	1,472.51	Cost	\$24,472.51
	IIIV	ventory			., 2.0 .		
23.	Tot	tal of Part 5.					\$24,472.51
	Add	d lines 19 through 22. Copy the	ne total to line 84.				
24.		any of the property listed in	Part 5 perishable?				
		No Yes					
25.	Has	s any of the property listed i	in Part 5 been purchase	d within 20 days	s before th	ne bankruptcy was filed?	
		Yes. Book value	<b>10886.59</b> Valuation n	method Co	st	Current Value	10886.59
26.	Нач	s any of the property listed	in Part 5 been appraised	l by a profession	nal within	the last year?	
	<b>=</b>		2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	, р. отооото		,	
		Yes					

Official Form 206A/B

Debtor	Level 1, Inc.	Case	number (If known)		
Dord 0		h (til- d d b t-l d l	.n		
Part 6:	Farming and fishing-related assets (other t s the debtor own or lease any farming and fishir		·		
_	, -	ig rolated decote (ether than thee	a motor vomolog and landy.		
_	o. Go to Part 7. es Fill in the information below.				
<b>□</b> 16	es Fill In the information below.				
Part 7:	Office furniture, fixtures, and equipment; a	nd collectibles			
38. <b>Does</b>	s the debtor own or lease any office furniture, fix		?		
	o. Go to Part 8.				
■ Ye	es Fill in the information below.				
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	
39.	Office furniture				
40.	Office fixtures				
41.	Office equipment, including all computer equipment and communication systems equipment and software Office equipment and furnishings, including computer, printer, desk, phone, facsimile machine, filing cabinet, safe, assorted				
	supplies	\$5,000.00	Cost less deprec	\$5,000.00	
42.	<b>Collectibles</b> <i>Examples</i> : Antiques and figurines; pobooks, pictures, or other art objects; china and cry collections; other collections, memorabilia, or collections	stal; stamp, coin, or baseball card			
43.	<b>Total of Part 7.</b> Add lines 39 through 42. Copy the total to line 86		_	\$5,000.00	
44.	Is a depreciation schedule available for any of ☐ No ■ Yes	the property listed in Part 7?			
45.	Has any of the property listed in Part 7 been ap  ■ No	opraised by a professional within	the last year?		
	□ Yes				
Part 8:	Machinery, equipment, and vehicles				
	s the debtor own or lease any machinery, equip	ment, or vehicles?			
Пм	o. Go to Part 9.				
	es Fill in the information below.				
	General description Include year, make, model, and identification num (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	
4-7	,	,			
47.	Automobiles, vans, trucks, motorcycles, trailer	rs, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related access floating homes, personal watercraft, and fishing ve		otors,		
49.	Aircraft and accessories				

Debtor	Level 1, Inc.	Case	number (If known)	
50.	Other machinery, fixtures, and equipment (excludir machinery and equipment) Kitchen equipment, furniture, televisions, ningracks		Cost less deprec	\$20,000.00
	Fixtures/lease hold improvements	\$15,000.00	Cost less deprec	\$15,000.00
51.	Total of Part 8.			\$35,000.00
52.	Add lines 47 through 50. Copy the total to line 87.  Is a depreciation schedule available for any of the p  No	property listed in Part 8?		
	■ Yes			
53.	Has any of the property listed in Part 8 been apprais  ■ No □ Yes	sed by a professional within	the last year?	
Part 9:	Real property			
54. <b>Doe</b> s	s the debtor own or lease any real property?			
	o. Go to Part 10. es Fill in the information below.  Intangibles and intellectual property			
	s the debtor have any interests in intangibles or intel	lectual property?		
□ N	o. Go to Part 11.			
■ Ye	es Fill in the information below.			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites			
62.	Licenses, franchises, and royalties Liquor license (location specific)	\$0.00	N/A	\$0.00
63.	Customer lists, mailing lists, or other compilations			
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	<b>Total of Part 10.</b> Add lines 60 through 65. Copy the total to line 89.			\$0.00
67.	Do your lists or records include personally identifia  ■ No □ Yes	able information of customers	s (as defined in 11 U.S.C.§§ 1	01(41A) and 107?
68.	Is there an amortization or other similar schedule a	vailable for any of the proper	ty listed in Part 10?	

Official Form 206A/B

Debtor	Level 1, Inc. Name	Case number (If known)	
	□Yes		
69.	Has any of the property listed in Part 10 been appraised by a	professional within the last year?	
	■ No		
	☐ Yes		
Part 11:	All other assets		
	s the debtor own any other assets that have not yet been repo		
Inclu	de all interests in executory contracts and unexpired leases not pr	eviously reported on this form.	
■ No	o. Go to Part 12.		
□Ye	es Fill in the information below.		

Debtor Level 1, Inc. Case number (If known) Name Part 12: Summary In Part 12 copy all of the totals from the earlier parts of the form **Current value of** Current value of real Type of property personal property property Cash, cash equivalents, and financial assets. \$151.55 Copy line 5, Part 1 Deposits and prepayments. Copy line 9, Part 2. \$11,840.06 81. 82. Accounts receivable. Copy line 12, Part 3. \$0.00 Investments. Copy line 17, Part 4. \$0.00 Inventory. Copy line 23, Part 5. \$24,472.51 Farming and fishing-related assets. Copy line 33, Part 6. 85. \$0.00 Office furniture, fixtures, and equipment; and collectibles. \$5,000.00 Copy line 43, Part 7. Machinery, equipment, and vehicles. Copy line 51, Part 8. 87. \$35,000.00 Real property. Copy line 56, Part 9.....> 88. \$0.00 Intangibles and intellectual property. Copy line 66, Part 10. \$0.00 All other assets. Copy line 78, Part 11. 90. \$0.00 Total. Add lines 80 through 90 for each column \$76,464.12 + 91b. \$0.00

Total of all property on Schedule A/B. Add lines 91a+91b=92

\$76,464.12

Fill	in this information to identify the o	ase:			
	tor name Level 1, Inc.				
Unit	ed States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number (if known)					
			_	Check if this is an amended filing	
				g	
	icial Form 206D				
<u>Sc</u>	hedule D: Creditors	Who Have Claims Secured by Pr	operty	12/15	
Be as	complete and accurate as possible.				
	any creditors have claims secured by				
	<u></u>	ge 1 of this form to the court with debtor's other schedules.	Debtor has nothing else to	report on this form.	
	Yes. Fill in all of the information be				
Part			Column A	Column B	
<ol><li>List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.</li></ol>			Amount of claim	Value of collateral	
			Do not deduct the value	that supports this claim	
		Describe debterle preparty that is subject to a lieu	of collateral.		
2.1	Florida Dept. of Revenue  Creditor's Name	Describe debtor's property that is subject to a lien All personal property of debtor	\$262,105.05	\$64,624.06	
	Bankruptcy Unit	the personal property of action			
	PO Box 6668 Tallahassee, FL 32314-6668				
Creditor's mailing address		Describe the lien			
		Tax warrants; judgment lien certificates			
		Is the creditor an insider or related party?			
	Creditor's email address, if known	Yes			
		Is anyone else liable on this claim?			
	Date debt was incurred	No			
	Last 4 digits of account number	Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Do multiple creditors have an	As of the petition filing date, the claim is:			
	interest in the same property?	Check all that apply			
	No	Contingent			
	☐ Yes. Specify each creditor, including this creditor and its relative	■ Unliquidated □ Disputed			
	priority.	□ Disputed			
	Orange County Tax				
2.2	Collector	Describe debtor's property that is subject to a lien	\$889.44	\$64,624.06	
	Creditor's Name	All personal property of debtor			
	Attn: Scott Randolph PO Box 545100				
	Orlando, FL 32854				
	Creditor's mailing address	Describe the lien  Tangible personal property tax			
		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			
	2016	■ No  Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Last 4 digits of account number				
	0432  Do multiple creditors have an	As of the petition filing date, the claim is:			
	interest in the same property?	Check all that apply			

Official Form 206D

#### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 18 of 46

Debt		Case number	(if know)	
	Name			
	■ No	☐ Contingent		
	☐ Yes. Specify each creditor,	☐ Unliquidated		
	including this creditor and its relative	☐ Disputed		
	priority.	Disputed		
2.3	Orlando Utilities	Describe debterle management that is subject to a line	\$11,436.31	\$10,005.06
	Commission Creditor's Name	Describe debtor's property that is subject to a lien	Ψ11,430.31	Ψ10,003.00
	Creditor's Name	Deposit with Orlando Utilities Commission		
	PO Box 4901			
	Orlando, FL 32802-4901			
	Creditor's mailing address	Describe the lien		
	· ·	Security Deposit		
		Is the creditor an insider or related party?		
		■ No		
	One difference of the statement of the same	□ Yes		
	Creditor's email address, if known	☐ Yes Is anyone else liable on this claim?		
		•		
	Date debt was incurred	No		
	2016	☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
	Last 4 digits of account number			
		A control of the cont		
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply		
	No	☐ Contingent		
		☐ Unliquidated		
	☐ Yes. Specify each creditor, including this creditor and its relative	·		
	priority.	☐ Disputed		
2.4	Pesco Energy	Describe debtor's property that is subject to a lien	\$817.41	\$1,000.00
	Creditor's Name	Deposit with Pesco Energy		
	PO Box 610			
	Marianna, FL 32447-0610	Describe the lies		
	Creditor's mailing address	Describe the lien		
		Security Deposit 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		
	2016	☐ 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?	Check all that apply		
	No	☐ Contingent		
	☐ Yes. Specify each creditor,	Unliquidated		
	including this creditor and its relative priority.	☐ Disputed		
	priority.			
2.5	Post Apartment Homes LP	Describe debtor's property that is subject to a lien	\$95,321.93	\$64,624.06
	Creditor's Name	All personal property of debtor		
	4401 Northside Pkwy Ste			
	800			
	Atlanta, GA 30327	Describe the lien		
	Creditor's mailing address	Describe the lien		
		Security Interest Is the creditor an insider or related party?		
		■ No		

Official Form 206D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 19 of 46

Debtor	r Level 1, Inc.	Case	number (if know)		
	Name				
C	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 206	SH)		
L	ast 4 digits of account number	`	,		
	Do multiple creditors have an nterest in the same property?	As of the petition filing date, the claim is: Check all that apply			
Ë	No	☐ Contingent			
		☐ Unliquidated			
ir	Yes. Specify each creditor, ncluding this creditor and its relative	☐ Disputed			
	priority.	☐ Disputed			
(i) <u>Or</u>	range County Tax Collector; (ii) FDOR; (iii) Post	Apartment Homes			
2.6 <b>1</b>	Гесо People's Gas	Describe debtor's property that is subject to a lien		\$302.26	\$835.00
	Creditor's Name	Deposit with Teco People's Gas		Ψ002.20	Ψοσσ.σσ
_	20.5. 04047	2 opcon min 1000 i copio o cuc			
	PO Box 31017				
_	Гатра, FL 33631	Describe the lieu			
C	Creditor's mailing address	Describe the lien			
		Security Deposit Is the creditor an insider or related party?			
		• •			
		No			
C	Creditor's email address, if known	Yes			
		Is anyone else liable on this claim?			
	Date debt was incurred	No			
	2016	☐ Yes. Fill out Schedule H: Codebtors (Official Form 206	SH)		
L	ast 4 digits of account number				
Ē	Oo multiple creditors have an	As of the petition filing date, the claim is:			
_	nterest in the same property?	Check all that apply			
_	No	☐ Contingent			
	Yes. Specify each creditor,	☐ Unliquidated			
	ncluding this creditor and its relative priority.	☐ Disputed			
_					
3. <b>To</b>	tal of the dollar amounts from Part 1	, Column A, including the amounts from the Additional P	age, if any. \$37	70,872.40	
Part 2	List Others to Be Notified for	a Debt Already Listed in Part 1			
		nust be notified for a debt already listed in Part 1. Example	les of entities that ma	v be listed are	collection agencies.
	ees of claims listed above, and attor			,	
If no ot	thers need to notified for the debts li	isted in Part 1, do not fill out or submit this page. If additi	onal pages are neede	d, copy this p	age.
	Name and address	,	On which line in Pa	rt 1 did	Last 4 digits of
			you enter the relate	d creditor?	account number for this entity
-					uns chuty

	5,000 5,000 5,000		
	this information to identify the case:		
Debto	r name Level 1, Inc.		
United	States Bankruptcy Court for the: MIDDLE D	ISTRICT OF FLORIDA	
Case	number (if known)		
			Check if this is an amended filing
Offic	cial Form 206E/F		
		Have Unsecured Claims	12/15
Be as contact the Person 2 in the	omplete and accurate as possible. Use Part 1 for or other party to any executory contracts or unexpir al Property (Official Form 206A/B) and on Schedul boxes on the left. If more space is needed for Par	creditors with PRIORITY unsecured claims and Part 2 for creditor red leases that could result in a claim. Also list executory contract e G: Executory Contracts and Unexpired Leases (Official Form 20 t 1 or Part 2, fill out and attach the Additional Page of that Part in	ts on Schedule A/B: Assets - Real and 06G). Number the entries in Parts 1 and
Part 1	List All Creditors with PRIORITY Unsec	ured Claims	
1.	Do any creditors have priority unsecured claims?	? (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 with priority unsecured claims, fill out and attach the	unsecured claims that are entitled to priority in whole or in part. Additional Page of Part 1.	f the debtor has more than 3 creditors
			Total claim Priority amount
2.1	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,119.92 \$4,119.92
	Internal Revenue Service	Check all that apply.	<u> </u>
	PO Box 7346 Philadelphia, PA 19101-7346	☐ Contingent ■ Unliquidated	
	1 madelpina, 1 A 13101 7040	□ Disputed	
	Date or dates debt was incurred 2013 & 2014	Basis for the claim:  Taxes	
	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. Tr 0.3.0. § 307(a) (a)	□Yes	
Part 2		nsecured Claims n nonpriority unsecured claims. If the debtor has more than 6 credit	ore with poppriority upsocured claims fill
Э.	out and attach the Additional Page of Part 2.	Thomphority unsecured claims. If the debtor has more than o credit	Amount of claim
			Amount or claim
3.1	Nonpriority creditor's name and mailing address	_	sat apply. \$530.35
	A Linen Connection 2400 Dinneen Ave	☐ Contingent ☐ Unliquidated	
	Orlando, FL 32804	☐ Disputed	
	Date(s) debt was incurred 2016	Basis for the claim: Trade debt	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No ☐ Yes	
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all the	nat apply. \$763.28
	Bright House Networks	☐ Contingent	
	PO Box 30574	Unliquidated	
	Tampa, FL 33630-3574  Date(s) debt was incurred 2016	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: <u>Trade debt</u>	
		Is the claim subject to offset? ■ No ☐ Yes	

Official Form 206E/F

#### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 21 of 46

Debto	Level 1, Inc.	Case number (if known)	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$306.72
0.0	Cozzini Brothers, Inc		ψ300.72
	350 Howard Ave	☐ Contingent	
	Des Plaines, IL 60018	Unliquidated	
	Date(s) debt was incurred 2016	Disputed	
		Basis for the claim: <u>Trade debt</u>	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$275.00
	Emergency Air Care, Inc	☐ Contingent	
	1112 Branchwood Drive	☐ Unliquidated	
	Apopka, FL 32703	☐ Disputed	
	Date(s) debt was incurred 2016	Basis for the claim: Trade debt	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
	_	is the dain subject to diset: — No 🚨 res	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,270.33
	Micros of Central Florida	☐ Contingent	
	270 W Marvin Avenue	☐ Unliquidated	
	Longwood, FL 32750-5473	☐ Disputed	
	Date(s) debt was incurred 2016	Basis for the claim: <u>Trade debt</u>	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$985.15
	Neoguard Pest Solution Svcs	☐ Contingent	·
	5950 Lakehurst Drive	☐ Unliquidated	
	Suite 276	<u> </u>	
	Orlando, FL 32819	☐ Disputed	
	Date(s) debt was incurred 2016	Basis for the claim: <u>Trade debt</u>	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,224.57
	Open Table, Inc	☐ Contingent	
	PO Box 671198	☐ Unliquidated	
	Dallas, TX 75267-1198	☐ Disputed	
	Date(s) debt was incurred 2016		
		Basis for the claim: <u>Trade debt</u>	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$521.07
	Owens Distributors	☐ Contingent	
	PO Box 1358	☐ Unliquidated	
	Sanford, FL 32772	☐ Disputed	
	Date(s) debt was incurred 2016	Basis for the claim: Trade debt	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
	1	·	<b>****</b>
3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$38,996.50
	Travelers Indemnity Company c/o Amy J. Winarsky, Esq	■ Contingent	
	Marcadis Singer, PA	■ Unliquidated	
	5104 S Westshore Blvd	·	
	Tampa, FL 33611	Disputed	
	Date(s) debt was incurred 2014-2015	Basis for the claim: <u>Trade debt</u>	
	Last 4 digits of account number	Is the claim subject to offset? ■ No □ Yes	

#### Part 3: List Others to Be Notified About Unsecured Claims

<sup>4.</sup> List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 22 of 46

Debtor		Case number (if known)	
	Name		
If no o	others need to be notified for the debts listed in Parts 1 and 2, do n	not fill out or submit this page. If additional pages are need	ded, copy the next page.
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
	Travelers Indemnity Company One Tower Square	Line <u>3.9</u>	_
	Hartford, CT 06183	□ Not listed. Explain	
Part 4:	Total Amounts of the Priority and Nonpriority Unsecure	ed Claims	
	the amounts of priority and nonpriority unsecured claims.	ou olumo	
		Total of claim amounts	
5a. Tota	Il claims from Part 1	5a. \$ <b>4,</b> '	119.92
5b. Tota	al claims from Part 2	5b. <b>+</b> \$ <b>44,</b>	372.97
	al of Parts 1 and 2 es 5a + 5b = 5c.	5c. \$ <b>4</b>	8,992.89

	Case 6.16-1	JK-07454 DUC I	Fileu 11/15/16 Page 23	01 46
Fill in th	is information to identify the case:			
Debtor n	ame Level 1, Inc.			
United S	tates Bankruptcy Court for the: MID	DLE DISTRICT OF FLORIDA	Α	
Case nu	mber (if known)			☐ Check if this is an amended filing
	al Form 206G			
	dule G: Executory C			12/15
Be as co	mplete and accurate as possible. If	more space is needed, cop	by and attach the additional page, nu	mber the entries consecutively.
□ N ■ Y		ith the debtor's other schedul	s? es. There is nothing else to report on the sare listed on Schedule A/B: Assets - F	
2. List a	all contracts and unexpired leas	ses	State the name and mailing addr whom the debtor has an execute lease	
2.1.	State what the contract or lease is for and the nature of the debtor's interest	Contract with Core Food Group, Inc., an affiliate of the debtor, to provide payroll processing services fo the debtor and affiliate companies		
	State the term remaining	companies	Paycor Payroll Services 10550 Deerwood Park Blvd	
	List the contract number of any government contract		Suite 306 Jacksonville, FL 32256	
2.2.	State what the contract or lease is for and the nature of the debtor's interest	Lease of business premises		
	State the term remaining	10 years, plus extension	Post Apartment Homes LP 4401 Northside Pkwy Ste 80	0
	List the contract number of any government contract		Atlanta, GA 30327	-

#### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 24 of 46

Fill in thi	s information to identify t	he case:		
Debtor na	ame Level 1, Inc.			
United St	ates Bankruptcy Court for th	ne: MIDDLE DISTRICT OF FLORIDA		
Case nur	mber (if known)			
				☐ Check if this is an amended filing
0.00	. =			
	al Form 206H			
Sche	dule H: Your Co	odebtors		12/15
Additiona  1. Do  No. C  Yes  2. In Co cred	nl Page to this page.  by you have any codebtors'  heck this box and submit thi  column 1, list as codebtors  itors, Schedules D-G. Inclu	ssible. If more space is needed, copy to space is form to the court with the debtor's other all of the people or entities who are alsude all guarantors and co-obligors. In Columbia codebtor is liable on a debt to more the	schedules. Nothing else needs to be so liable for any debts listed by the umn 2, identify the creditor to whom	ne reported on this form.  The debtor in the schedules of the debt is owed and each schedule
0.1 11	Column 1: Codebtor	and deduction to made on a doct to more an	Column 2: Credito	. ,
	Name	Mailing Address	Name	Check all schedules that apply:
2.1	Manuel Tato	109 Applewood Drive Longwood, FL 32750	Post Apartmer Homes LP	D □ E/F ■ G2.1

Fil	in this information to identify the case:				
De	btor name Level 1, Inc.				
Un	ited States Bankruptcy Court for the: MIDDLE DISTRIC	T OF FLORIDA			
Ca	se number (if known)				Check if this is an amended filing
					-
Of	ficial Form 207				
St	atement of Financial Affairs for N	lon-Individ	uals Filing for Ban	kruptcy	04/16
	debtor must answer every question. If more space is e the debtor's name and case number (if known).	needed, attach a	separate sheet to this form. O	n the top of	any additional pages,
Pa	rt 1: Income				
1.	Gross revenue from business				
	□ None.				
	Identify the beginning and ending dates of the debt which may be a calendar year	or's fiscal year,	Sources of revenue Check all that apply		Gross revenue (before deductions and exclusions)
	From the beginning of the fiscal year to filing	date:	Operating a business		\$1,800,000.00
	From 1/01/2016 to Filing Date		☐ Other		
	For prior year: From 1/01/2015 to 12/31/2015		Operating a business		\$2,325,584.10
	FIGHT 1/01/2013 to 12/31/2013		☐ Other		
	For year before that:		■ Operating a business		\$2,290,449.00
	From 1/01/2014 to 12/31/2014		☐ Other		
2	Non hydinaca rayonya		-		
	Non-business revenue Include revenue regardless of whether that revenue is tax and royalties. List each source and the gross revenue for				ney collected from lawsuits,
	■ None.				
			Description of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Pa	t 2: List Certain Transfers Made Before Filing for E	Bankruptcy			
	Certain payments or transfers to creditors within 90 d List payments or transfersincluding expense reimbursen filing this case unless the aggregate value of all property to and every 3 years after that with respect to cases filed on	nentsto any credit transferred to that o	tor, other than regular employee creditor is less than \$6,425. (This		
	☐ None.				
	Creditor's Name and Address	Dates	Total amount of value	Reasons fo Check all tha	r payment or transfer

Official Form 207

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 26 of 46 Debtor Case number (if known) Level 1, Inc. **Creditor's Name and Address** Dates Total amount of value Reasons for payment or transfer Check all that apply See attached exhibit See attached \$330,660.11 ☐ Secured debt exhibit ☐ Unsecured loan repayments Suppliers or vendors Services □ Other 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 filling 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 relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31). ■ None. Insider's name and address Total amount of value Reasons for payment or transfer **Dates** Relationship to debtor 5. Repossessions, foreclosures, and returns List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6. None Creditor's name and address Describe of the Property Date Value of property 6. Setoffs List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt. None Creditor's name and address Description of the action creditor took Date action was Amount taken Part 3: Legal Actions or Assignments 7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case. ☐ None. Case title Nature of case Court or agency's name and Status of case Case number address 18th Cir, Sem County FL The Travelers Indemnity Breach of Pending Company of America v. Level Contract 301 N Park Avenue □ On appeal 1, Inc., d/b/a Spice Modern Sanford, FL 32771 □ Concluded Steakhouse 2016-CA-002482

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

■ None

Certain Gifts and Charitable Contributions

Debto	or <u>I</u>	Level 1, Inc.	Case numbe	r (if known)	
		gifts or charitable contributions the s to that recipient is less than \$1,000	debtor gave to a recipient within 2 years before filin	ng this case unless the	e aggregate value of
	■ Noi	ne			
		Recipient's name and address	Description of the gifts or contributions	Dates given	Value
Part !	5:	Certain Losses			
10. <b>Al</b>	lloss	ses from fire, theft, or other casualty	within 1 year before filing this case.		
	■ Noi	ne			
		ription of the property lost and	Amount of payments received for the loss	Dates of loss	Value of property
	how 1	the loss occurred	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.		los
			List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		
Part (	6:	Certain Payments or Transfers			
Lis of rel	this c	case to another person or entity, including a bankruptcy case.	of property made by the debtor or person acting on being attorneys, that the debtor consulted about debt cons		
	□ Noı				
		Who was paid or who received the transfer? Address	If not money, describe any property transferre	d Dates	Total amount or value
	11.1.	Fisher Rushmer, P.A. 390 North Orange Avenue Suite 2200 Orlando, FL 32801-1642		11/8/16	\$15,000.00
		Email or website address			
_		Who made the payment, if not deb Elizabeth Tato via 1 Sunburst & & Lawncare, Inc			
Lis to	st any a self	ttled trusts of which the debtor is a begin payments or transfers of property made f-settled trust or similar device. Include transfers already listed on this second	le by the debtor or a person acting on behalf of the deb	tor within 10 years befo	re the filing of this case
•	No	ne.			
I	Name	e of trust or device	, , ,	Dates transfers were made	Total amount or value
Lis 2 y	st any /ears	before the filing of this case to another	ent y sale, trade, or any other means made by the debtor o person, other than property transferred in the ordinary security. Do not include gifts or transfers previously liste	course of business or fi	
•	■ Noi	ne.			
		Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value

Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 28 of 46 Debtor Case number (if known) Level 1, Inc. 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 - providing any surgical, psychiatric, drug treatment, or obstetric care? No. Go to Part 9. Yes. Fill in the information below. If debtor provides meals Facility name and address Nature of the business operation, including type of services the debtor provides and housing, number of patients in debtor's care Part 9: Personally Identifiable Information 16. Does the debtor collect and retain personally identifiable information of customers? П Yes. State the nature of the information collected and retained. 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10. Yes. Does the debtor serve as plan administrator? Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units 18. Closed financial accounts Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions. None Financial Institution name and Last 4 digits of Type of account or Date account was Last balance account number closed, sold, Address instrument moved, or transferred

before closing or transfer

#### 19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filling this case.

None

Depository institution name and address Names of anyone with Description of the contents Do you still access to it have it? **Address** 

#### 20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 29 of 46 Case number (if known) Debtor Level 1, Inc. None Facility name and address Names of anyone with Description of the contents Do you still access to it have it? Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own 21. Property held for another List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property. None Part 12: Details About Environment Information For the purpose of Part 12, the following definitions apply: Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium). Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized. Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance. Report all notices, releases, and proceedings known, regardless of when they occurred. 22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Provide details below. Case title Court or agency name and Nature of the case Status of case Case number address 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No. П Yes. Provide details below. Site name and address Governmental unit name and Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? No. Yes. Provide details below. Site name and address Governmental unit name and Environmental law, if known Date of notice address

#### Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 30 of 46

Debtor	Level 1, Inc.		Case nur	mber (if known)	
Busine	ess name address	Describe the nature of the		ployer Identification nunot include Social Security r	
			Da	tes business existed	
26a. L	s, records, and financial statements ist all accountants and bookkeepers w None		oks and records within	2 years before filing this	case.
Nan	ne and address				Date of service From-To
26a	1. Pappas & Associates 930 Woodcock Road Orlando, FL 32803				2007 - present
W	ist all firms or individuals who have au vithin 2 years before filing this case. ☑ None	dited, compiled, or reviewed de	ebtor's books of accour	nt and records or prepare	ed a financial statement
Nan	ne and address				Date of service From-To
26b.	1. Pappas & Associates 930 Woodcock Road Orlando, FL 32803				2007 - present
	□ None ne and address			y books of account and railable, explain why	d records are
26c.	1. Pappas & Associates 930 Woodcock Road Orlando, FL 32803		unav	valiable, explain wily	
	ist all financial institutions, creditors, a tatement within 2 years before filing th		cantile and trade agen	cies, to whom the debtor	issued a financial
	None				
Nan	ne and address				
27. <b>Inven</b> t Have	tories any inventories of the debtor's property	y been taken within 2 years be	fore filing this case?		
■	No Yes. Give the details about the two mo	ost recent inventories.			
	Name of the person who supervisinventory	sed the taking of the	Date of inventory	The dollar amount a or other basis) of ea	nd basis (cost, market, ch inventory
27.1	Manuel Tato		October 2016	\$24,472.51, at cos	
	Name and address of the person inventory records	who has possession of			
	Manuel Tato 109 Applewood Drive Longwood, FL 32750				

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 31 of 46

ebtor	Level 1, Inc.		Case num	ber (if known)	
27.2	Name of the person who sup inventory Manuel Tato	pervised the taking of the	Date of inventory September	The dollar amount and or other basis) of each	
			2016	\$31,094.93, at cost	
	Name and address of the pe inventory records	rson who has possession of			
	Manuel Tato 109 Applewood Drive Longwood, FL 32750		_		
	e debtor's officers, directors, trol of the debtor at the time o	managing members, general pa f the filing of this case.	rtners, members in conti	rol, controlling sharehol	ders, or other peop
Nam	ie	Address	Position interest	and nature of any	% of interest,
Eliz	abeth Tato	109 Applewood Drive Longwood, FL 32750		older & Director	100
Nam	e	Address	Position	and nature of any	% of interest,
Brea	a L. Tato	109 Applewood Drive Longwood, FL 32750	Preside	ent	0
Nam	e	Address	Position interest	and nature of any	% of interest,
Man	nuel Tato	109 Applewood Drive Longwood, FL 32750		estructuring Officer	0
Paymee Within loans,	No Yes. Identify below.  Pents, distributions, or withdraw 1 year before filing this case, dic credits on loans, stock redemption No Yes. Identify below.  Name and address of recipies		s		Reason for providing the valu
30.1	Manuel Tato 109 Applewood Drive Longwood, FL 32750	\$83,600		2016 YTD	Annual salary
	Relationship to debtor Chief Restructuring Office	er			
30.2	Manuel Tato 109 Applewood Drive Longwood, FL 32750	\$114,400		2015	Annual Salary
	Relationship to debtor	er			

#### Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 32 of 46 Debtor Case number (if known) Level 1, Inc. 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. Employer Identification number of the parent Name of the parent corporation corporation 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund? ☐ Yes. Identify below. Name of the parent corporation Employer Identification number of the parent corporation Part 14: Signature and Declaration WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud 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. I have examined the information in this Statement of Financial Affairs and any attachments 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 November 15, 2016 /s/ Manuel Tato **Manuel Tato**

Printed name

Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?

Official Form 207

□ No
■ Yes

Signature of individual signing on behalf of the debtor

Position or relationship to debtor 
Chief Restructuring Officer

11/8/16 at 11:14:40.27

#### LEVEL 1

Page: 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from SAGE PAYMENT PROCESS to SAGE PAYMENT PROCESS. Report order is by Date.

Check #	Date	Payee	Cash Account	Amount	
DRAFT	8/1/16	SAGE PAYMEN	10200	3,135.93	
DRAFT	9/1/16	SAGE PAYMEN	10200	3,250.03	
DRAFT	10/1/16	SAGE PAYMEN	10200	2,870.42	
Total				9,256.38	

11/8/16 at 11:14:07.84

# LEVEL 1 Check Register For the Period From Aug 1, 2016 to Oct 31, 2016 Filter Criteria includes: 1) Vendor ID's from PAYROLL. Report order is by Date.

Check#	Date	Payee	Cash Account	Amount
DRAFT	8/1/16	PAYROLL	10200	14,707.24
DRAFT	8/8/16	PAYROLL	10200	14,393.65
DRAFT	8/15/16	PAYROLL	10200	14,818.79
DRAFT	8/29/16	PAYROLL	10200	13,903.81
DRAFT	9/12/16	PAYROLL	10200	12,862.74
DRAFT	9/19/16	PAYROLL	10200	14,159.64
DRAFT	9/26/16	PAYROLL	10200	13,267.81
DRAFT	10/3/16	PAYROLL	10200	13,500.07
DRAFT	10/11/16	PAYROLL	10200	14,592.72
DRAFT	10/17/16	PAYROLL	10200	11,334.94
DRAFT	10/24/16	PAYROLL	10200	13,583.92
DRAFT	10/31/16	PAYROLL	10200	13,801.80
Total				164,927.13

11/8/16 at 11:15:28.56

#### LEVEL 1

Check Register

For the Period From Aug 1, 2016 to Oct 31, 2016

Filter Criteria includes: 1) Vendor ID's from POST PARKSIDE - FL to POST PARKSIDE - FL. Report order is by Date.

Check#	Date	Payee	Cash Account	Amount	
WIRE	9/13/16	POST PARKSID	10200	10,167.75	
Total				10,167.75	

11/8/18 at 11:16:02.42

## LEVEL 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from OUC to OUC. Report order is by Dafe.

Check #	Date	Payee	Cash Account	Amount
CASH	8/8/16	ORLANDO UTILI	10200	6,419.03
CASH	9/12/16	ORLANDO UTILI	10200	6,577.19
CASH	10/18/16	ORLANDO UTILI	10200	6,100.27
Total				19,096.49

11/8/16 at 11:17:00.61

## LEVEL 1

Check Register

For the Period From Aug 1, 2016 to Oct 31, 2016

Filter Criteria includes: 1) Vendor ID's from GORDON FOOD SERVICE to GORDON FOOD SERVICE. Report order is by Date.

Check#	Date	Payee	Cash Account	Amount	
EFT	8/2/16	GORDON FOOD	10200	3,355.54	
EFT	8/5/16	GORDON FOOD	10200	3,775.74	
EFT	8/6/16	GORDON FOOD	10200	126.29	
EFT	8/9/16	GORDON FOOD	10200	3,685.31	
EFT	8/12/16	GORDON FOOD	10200	2,360.51	
EFT	8/16/16	GORDON FOOD	10200	3,393.50	
EFT	8/19/16	GORDON FOOD	10200	4,789.62	
CASH	8/21/16	GORDON FOOD	10200	16.97	
EFT	8/23/16	GORDON FOOD	10200	1,639.97	
EFT	8/26/16	GORDON FOOD	10200	3,410.24	
EFT	8/27/16	GORDON FOOD	10200	198.25	
EFT	8/30/16	GORDON FOOD	10200	2,575.68	
EFT	9/2/16	GORDON FOOD	10200	1,518.00	
EFT	9/6/16	GORDON FOOD	10200	3,525.70	
EFT	9/9/16	GORDON FOOD	10200	4,978.61	
EFT	9/13/16	GORDON FOOD	10200	2,950.05	
EFT	9/16/16	GORDON FOOD	10200	3,536.44	
EFT'	9/20/16	GORDON FOOD	10200	2,906.18	
EFT	9/23/16	GORDON FOOD	10200	1,065.85	
EFT	9/23/16	GORDON FOOD	10200	3,031.06	
EFT	9/27/16	GORDON FOOD	10200	3,951.30	
EFT	9/27/16	GORDON FOOD	10200	144.67	
EFT	9/30/16	GORDON FOOD	10200	3,846.75	
ΞFT	10/4/16	GORDON FOOD	10200	3,502.06	
EFT	10/8/16	GORDON FOOD	10200	4,459.21	
EFT.	10/14/16	GORDON FOOD	10200	3,972.37	
EFT .	10/18/16	GORDON FOOD	10200	72.43	
EFT	10/18/16	GORDON FOOD	10200	3,109.48	
EFT	10/21/16	GORDON FOOD	10200	193.60	
EFT	10/21/16	GORDON FOOD	10200	3,171.53	
EFT	10/25/16	GORDON FOOD	10200	3,455.11	
FT	10/28/16	GORDON FOOD	10200	231.21	

11/8/16 at 11:17:00.63

#### LEVEL 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from GORDON FOOD SERVICE to GORDON FOOD SERVICE. Report order is by Date.

Check#	Date	Payee	Cash Account	Amount
EFT	10/28/16	GORDON FOOD	10200	6,152.89
Total				89,102.12

11/8/16 at 11:18:53.10

LEVEL 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from TRUE WORLD FOODS to TRUE WORLD FOODS. Report order is by Date.

Check #	Date	Payee	Cash Account	Amount
VISA	8/1/16	TRUE WORLD FOODS	10200	289.91
VISA	8/3/16	TRUE WORLD FOODS	10200	394.01
VISA	8/5/16	TRUE WORLD FOODS	10200	662.50
VISA	8/8/16	TRUE WORLD FOODS	10200	295.96
VISA	8/10/16	TRUE WORLD FOODS	10200	382.99
VISA	8/12/16	TRUE WORLD FOODS	10200	563.02
VISA	8/15/16	TRUE WORLD FOODS	10200	391.76
VISA	8/17/16	TRUE WORLD FOODS	10200	334.89
VISA	8/19/16	TRUE WORLD FOODS	10200	904.42
VISA	8/22/16	TRUE WORLD FOODS	10200	582,85
VISA	8/26/16	TRUE WORLD FOODS	10200	723.66
VISA	8/29/16	TRUE WORLD FOODS	10200	460.20
VISA	9/2/16	TRUE WORLD FOODS	10200	703.90
VISA	9/7/16	TRUE WORLD FOODS	10200	612.81
VISA	9/9/16	TRUE WORLD FOODS	10200	414,91
VISA	9/12/16	TRUE WORLD FOODS	10200	701.51
VISA	9/16/16	TRUE WORLD FOODS	10200	549.03
VISA	9/19/16	TRUE WORLD FOODS	10200	309.65
VISA	9/23/16	TRUE WORLD FOODS	10200	874.19
VISA	9/26/16	TRUE WORLD FOODS	10200	811.39
VISA	9/30/16	TRUE WORLD FOODS	10200	511.01
VISA	10/3/16	TRUE WORLD FOODS	10200	498.74
VISA	10/8/16	TRUE WORLD FOODS	10200	643.28
VISA	10/12/16	TRUE WORLD FOODS	10200	556.02
VISA	10/17/16	TRUE WORLD FOODS	10200	606.92
VISA	10/21/16	TRUE WORLD FOODS	10200	767.82
VISA	10/24/16	TRUE WORLD FOODS	10200	460.46
VISA	10/26/16	TRUE WORLD FOODS	10200	312.58
VISA	10/28/16	TRUE WORLD FOODS	10200	669.70
Total				15,990.09

11/8/16 at 11:20:00.56

# LEVEL 1

Page: 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from BREAKTHRU BEVERAGE to BREAKTHRU BEVERAGE. Report order is by Dale.

Check#	Date	Payee	Cash Account	Amount
6157	8/2/16	PREMIER BEVERAGE C	10200	158.08
PAID	8/4/16	PREMIER BEVERAGE C	10200	909.64
6157	8/10/16	PREMIER BEVERAGE C	10200	798.74
PAID	8/11/16	PREMIER BEVERAGE C	10200	571.94
МО	8/25/16	PREMIER BEVERAGE C	10200	851.24
МО	9/1/16	PREMIER BEVERAGE C	10200	448.08
МО	9/8/16	PREMIER BEVERAGE C	10200	371.84
МО	9/15/16	PREMIER BEVERAGE C	10200	549.48
МО	9/22/16	PREMIER BEVERAGE C	10200	644.73
MO	9/29/16	PREMIER BEVERAGE C	10200	634.48
МО	10/13/16	PREMIER BEVERAGE C	10200	779.63
MO	10/27/16	PREMIER BEVERAGE C	10200	885.03
Total				7,602.91

11/8/16 at 11:28:04.92

#### LEVEL 1 Check Register

Page: 1

For the Period From Aug 1, 2016 to Oct 31, 2016

Filter Criteria includes: 1) Vendor ID's from SOUTHERN WINE & SPIR to SOUTHERN WINE & SPIR. Report order is by Date.

Check#	Date	Payce	Cash Account	Amount	
EFT	8/1/16	SOUTHERN WINE & SPI	10200	510.64	
EFT	8/10/16	SOUTHERN WINE & SPI	10200	851.74	
PAID	8/15/16	SOUTHERN WINE & SPI	10200	1,043.79	
MO	8/24/16	SOUTHERN WINE & SPI	10200	554.45	
МО	8/29/16	SOUTHERN WINE & SPI	10200	525.63	
EFT	9/6/16	SOUTHERN WINE & SPI	10200	236.44	
МО	9/12/16	SOUTHERN WINE & SPI	10200	311.45	
EFT	9/19/16	SOUTHERN WINE & SPI	10200	446.47	
МО	9/27/16	SOUTHERN WINE & SPI	10200	1,408.99	
МО	10/3/16	SOUTHERN WINE & SPI	10200	230.33	
MO	10/17/16	SOUTHERN WINE & SPI	10200	592.45	
МО	10/24/16	SOUTHERN WINE & SPI	10200	412.40	
Total				7,124.78	

11/8/18 at 11:28:24.75

LEVEL 1

Check Register
For the Period From Aug 1, 2016 to Oct 31, 2016
Filter Criteria includes: 1) Vendor ID's from STACOLE FINE WINES to STACOLE FINE WINES. Report order is by Date.

	Amount	Cash Account	Payee	Date	Check#
/ 77 / / 4	331.73	10200	STACOLE FINE WINES	8/2/16	EFT
	415.68	10200	STACOLE FINE WINES	8/2/16	EFT
	618.05	10200	STACOLE FINE WINES	8/9/16	EFT
	363.72	10200	STACOLE FINE WINES	8/9/16	EFT
	424.48	10200	STACOLE FINE WINES	8/18/16	PAID
	323.84	10200	STACOLE FINE WINES	8/30/16	PAID
	307.89	10200	STACOLE FINE WINES	9/7/16	EFT
	779.28	10200	STACOLE FINE WINES	9/14/16	EFT
	78.00	10200	STACOLE FINE WINES	9/14/16	EFT
	539.56	10200	STACOLE FINE WINES	9/20/16	EFT
	723.96	10200	STACOLE FINE WINES	9/28/16	EFT
	545.67	10200	STACOLE FINE WINES	10/4/16	EFT
•	387.59	10200	STACOLE FINE WINES	10/14/16	EFT
	29.99	10200	STACOLE FINE WINES	10/14/16	EFT
	364.58	10200	STACOLE FINE WINES	10/19/16	EFT
	898.64	10200	STACOLE FINE WINES	10/27/16	EFT
	259.80	10200	STACOLE FINE WINES	10/27/16	EFT
	7,392.46				Total

Case 6:16-bk-07454 Doc 1 Filed 11/15/16 Page 43 of 46

#### United States Bankruptcy Court Middle District of Florida

In re	Level 1, Inc.			Case No.
		I	Debtor(s)	Chapter 11
Followi	LIST ng is the list of the Debtor's equity security ho	-	ed in accordance with rule 10	
	and last known address or place of ess of holder	Security Class	Number of Securities	Kind of Interest
Elizabeth Tato 109 Applewood Drive Longwood, FL 32750		N/A	100%	common stock
DECL	ARATION UNDER PENALTY O	F PERJURY ON	BEHALF OF CORP	ORATION OR PARTNERSHIP
	I, the <b>Chief Restructuring Officer</b> of the variation and belief.	•		* ·
Date	November 15, 2016	Signa	ture /s/ Manuel Tato Manuel Tato	

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

### United States Bankruptcy Court Middle District of Florida

In re Level 1, Inc.		Case No.	
	Debtor(s)	Chapter	11
VERIFICAT	TION OF CREDITOR MA	ATRIX	
I, the Chief Restructuring Officer of the corporation	named as the debtor in this case, here	by verify that	the attached list of creditors is
true and correct to the best of my knowledge.			
Date: November 15, 2016	/s/ Manuel Tato		
	Manuel Tato/Chief Restructuring Signer/Title	Otticer	

Level 1, Inc. PO Box 520085 Longwood, FL 32752-0085 Micros of Central Florida 270 W Marvin Avenue Longwood, FL 32750-5473 Travelers Indemnity Company c/o Amy J. Winarsky, Esq Marcadis Singer, PA 5104 S Westshore Blvd Tampa, FL 33611

David R. McFarlin Fisher Rushmer, P.A. 390 North Orange Avenue Suite 2200 Orlando, FL 32801-1642 Neoguard Pest Solution Svcs 5950 Lakehurst Drive Suite 276 Orlando, FL 32819 Travelers Indemnity Company One Tower Square Hartford, CT 06183

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Open Table, Inc PO Box 671198 Dallas, TX 75267-1198

Florida Dept. of Revenue Bankruptcy Unit PO Box 6668 Tallahassee, FL 32314-6668 Orange County Tax Collector Attn: Scott Randolph PO Box 545100 Orlando, FL 32854

A Linen Connection 2400 Dinneen Ave Orlando, FL 32804 Orlando Utilities Commission PO Box 4901 Orlando, FL 32802-4901

Bright House Networks PO Box 30574 Tampa, FL 33630-3574 Owens Distributors PO Box 1358 Sanford, FL 32772

Cozzini Brothers, Inc 350 Howard Ave Des Plaines, IL 60018 Pesco Energy PO Box 610 Marianna, FL 32447-0610

Emergency Air Care, Inc 1112 Branchwood Drive Apopka, FL 32703

Post Apartment Homes LP 4401 Northside Pkwy Ste 800 Atlanta, GA 30327

Manuel Tato 109 Applewood Drive Longwood, FL 32750 Teco People's Gas PO Box 31017 Tampa, FL 33631

#### United States Bankruptcy Court MIDDLE DISTRICT OF FLORIDA ORLANDO DIVISION

In re	Level 1, Inc.		Case No.	6:16-bk-
		Debtor(s)	Chapter	11
	907707			
	CORPORAT	E OWNERSHIP ST	ATEMENT	
follo	11, Inc., Debtor, pursuant to Federal Rule of wing is a (are) corporation(s), other than the s) 10% or more of any class of the corporation	e debtor or a gove	ernmental unit,	
3.7				
■ No	ne [Check if applicable]			
		Level 1, In	ic.	
<u>11</u>	/15/16	By: <u>/s/ Ma</u> Manue		estructuring Officer