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| Fill in this information to identify the case: | | | | |
|--|---|---------------------------|-----------|----|
| United States Bankruptc Middle | • | ^{he:} Georgia | | |
| Case number (If known): | | (State) | _ Chapter | 11 |

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy 04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

| i. Debtor's name CEE Hot | el Management, LLC | |
|--|---|--|
| All other names debtor used in the last 8 years | | |
| Include any assumed names, trade names, and <i>doing business</i> as names | | |
| Debtor's federal Employer Identification Number (EIN) | <u>_58</u> - <u>2362878</u> | |
| Debtor's address | Principal place of business | Mailing address, if different from principal plac of business |
| | 414 Walnut Street | Number Street |
| | | P.O. Box |
| | MaconGA31201CityStateZIP Code | City State ZIP Code |
| | Macon-Bibb | Location of principal assets, if different from principal place of business |
| | County | Number Street |
| | | City State ZIP Code |
| Debtor's website (URL) | N/A | |
| Type of debtor | Corporation (including Limited Liability Company (L Partnership (excluding LLP) Conter. Specify: Limited Liabilit | |

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| Debtor | CEE Hotel Name | Management | , LLC | Case number (if | known) | | |
|--------------------------------|---|---|---|--|--|--|--|
| - D - | | A. Check one: | | | | | |
| 7. Describe debtor's business | | Health Care R | usinoss (as dafina | d in 11 U.S.C. § 101(27A)) | | | |
| | | | | | | | |
| | | 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)) | | | | | |
| | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | |
| | | Clearing Bank (as defined in 11 U.S.C. § 781(3)) | | | | | |
| | | Done of the ab | ove | | | | |
| | | B. Check all that a | pply: | | | | |
| | | Tax-exempt en | tity (as described | in 26 U.S.C. § 501) | | | |
| | | | | | ent vehicle (as defined in 15 U.S.C. | | |
| | | Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U § 80a-3) | | sin venicle (as defined in 15 0.5.6. | | | |
| | | □ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11)) | | | | | |
| | | C. NAICS (North A | American Industry | Classification System) 4-digit | t code that best describes debtor. See | | |
| | | <u>nttp://www.usc</u> | http://www.uscourts.gov/four-digit-national-association-naics-codes . | | | | |
| Undor | which chapter of the | Check one: | | | | | |
| | which chapter of the ruptcy Code is the | | | | | | |
| | r filing? | Chapter 7 | | | | | |
| | | Chapter 9 | | | | | |
| | | Chapter 11. Check all that apply: | | | | | |
| | | XX Debtor's aggregate noncontingent liquidated debts (excluding debts owed to | | | | | |
| | insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that). | | | | | | |
| | | | The debtor is a s | small business debtor as defir | ned in 11 U.S.C. § 101(51D). If the | | |
| | | | of operations, ca | | nost recent balance sheet, statement al income tax return or if all of these in 11 U.S.C. & 1116(1)(B) | | |
| | | | | led with this petition. | n (1)(0).0.0. g (1)(0). | | |
| | | | | the plan were solicited prepet | ition from one or more classes of 6(b). | | |
| | | | | • | | | |
| | | | Securities and E Exchange Act of | xchange Commission accord | for example, 10K and 10Q) with the ing to § 13 or 15(d) of the Securities <i>Voluntary Petition for Non-Individuals Filing</i> n 201A) with this form | | |
| | | | | 1210 12 12 | e Securities Exchange Act of 1934 Rule | | |
| | | Chapter 12 | 120-2. | | | | |
| | prior bankruptcy cases | No | | | у | | |
| | y or against the debtor | | | | | | |
| within the last 8 years? | Yes. District _ | | When | Case number | | | |
| If more than 2 cases, attach a | | | | | | | |
| separat | e list. | District | | When MM / DD / YYYY | Case number | | |
| | y bankruptcy cases | X No | | | | | |
| | ng or being filed by a | | | | Deletionetic | | |
| | ess partner or an e of the debtor? | Lebior | | and a second | Relationship | | |
| | | District | 4 | | _ When | | |
| | cases. If more than 1, a separate list. | Case numb | per, if known | | | | |
| Official Ea | 201 | Valuatas D." | | | | | |

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

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| Debtor CEE HOTEL Ma | nagement, LLC | Case number (# | known) | | |
|---|---|---|--|--|--|
| 1. Why is the case filed in <i>this</i> | Check all that apply: | | | | |
| district? | Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. | | | | |
| | A bankruptcy case con | cerning debtor's affiliate, general partne | er, or partnership is pending in this district. | | |
| Does the debtor own or have possession of any real | ☑ No □ Yes. Answer below for | each property that needs immediate at | tention. Attach additional sheets if needed. | | |
| property or personal property that needs immediate | Why does the property need immediate attention? (Check all that apply.) | | | | |
| attention? | It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safet | | | | |
| | What is the hazard? | | | | |
| | It needs to be | physically secured or protected from th | e weather. | | |
| | It includes per attention (for e assets or othe | | kly deteriorate or lose value without at, dairy, produce, or securities-related | | |
| | Other | | | | |
| | | | | | |
| | Where is the prop | | | | |
| | | Number Street | | | |
| | | | | | |
| | | City | State ZIP Code | | |
| | Is the property in | sured? | | | |
| | D No | | | | |
| | Yes. Insurance a | agency | | | |
| | Contact na | me | | | |
| | Phone | | | | |
| | | | | | |
| Statistical and administ | rative information | | | | |
| | ····· | | | | |
| Debtor's estimation of available funds | Check one: | | | | |
| available futius | Funds will be available for distribution to unsecured creditors. After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors. | | | | |
| | | expenses are paid, no funds will be av | | | |
| Estimated number of | ✓ 1-49 ✓ 50-99 | 1,000-5,0005,001-10,000 | 25,001-50,000 | | |
| creditors | □ 100-199 | □ 5,001-10,000 □ 10,001-25,000 | 50,001-100,000 More than 100,000 | | |
| | 200-999 | Sector Methods (Sector Production Control (Sector)) | | | |
| | | | | | |
| | \$0-\$50,000 | \$1,000,001-\$10 million | \$ 500,000,001-\$1 billion | | |
| Estimated assets | □ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | |

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|--|--|--|--|--|--|--|
| Debtor CEE Hotel | Document Management, LLC | Page 4 of 4 | | | | |
| Name | | Case number (/ known) | | | | |
| 16. Estimated liabilities | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$500,000,001-\$1 billion \$10,000,001-\$50 million \$1,000,000,001-\$10 billion \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$100,000,001-\$500 million \$10,000,000,001-\$50 billion | | | | |
| Request for Relief, Declaration, and Signatures | | | | | | |
| WARNING - Bankruptcy fraud is a \$500,000 or imprisor | a serious crime. Making a false state iment for up to 20 years, or both. 18 | ement in connection with a bankruptcy case can result in fines up to 3 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| 17. Declaration and signature authorized representative debtor | | in accordance with the chapter of title 11, United States Code, specified in this | | | | |
| | I have been authorized to | file this petition on behalf of the debtor. | | | | |
| | | nation in this petition and have a reasonable belief that the information is true and | | | | |
| | I declare under penalty of perju | ury that the foregoing is true and correct. | | | | |
| | Executed on 07/31/2 MM (DD /YY) | | | | | |
| | Signature of authorized represe | entative of debtor Printed name | | | | |
| | TilleOrganizer/C | Organizer | | | | |
| 18. Signature of attorney | Signature of attorney for debto | Date 07/31/2017 MM /DD /YYYY | | | | |
| | | llins, Esq. | | | | |
| | Printed name The Callins F | 'irm, LLC | | | | |
| | Firm name | | | | | |
| | Number Street | Street, Suite 1030 | | | | |
| | Atlanta City | GA30303 | | | | |
| | 404.681.5826 | State ZIP Code jcallins@callins.com | | | | |
| | Contact phone | Email address | | | | |
| | 105255 | CA | | | | |
| | Bar number | GA State | | | | |
| | | | | | | |