

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF GEORGIA

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

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 case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Christie & Caroline, 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) 26-3580411

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 5677 Buford Hwy, Suite 210 Doraville, GA 30340 DeKalb County

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other. Specify:

Debtor **Christie & Caroline, LLC**  
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined 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))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (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>.

\_\_\_\_\_

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- 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 small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

|                |            |                   |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

List all cases. If more than 1, attach a separate list

|                |  |
|----------------|--|
| Debtor _____   | Relationship _____                     |
| District _____ | When _____ Case number, if known _____ |

Debtor **Christie & Caroline, LLC** Case number (if known) \_\_\_\_\_  
 Name

11. Why is the case filed in this district? *Check all that apply:*

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 concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

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 pose a threat of imminent and identifiable hazard to public health or safety.  
 What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related 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 \_\_\_\_\_

**Statistical and administrative information**

13. Debtor's estimation of available funds *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

15. Estimated Assets

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million    | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000      | <input type="checkbox"/> \$10,000,001 - \$50 million   | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000     | <input type="checkbox"/> \$50,000,001 - \$100 million  | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million   | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion          |

16. Estimated liabilities

|  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

Debtor **Christie & Caroline, LLC** Case number (if known) \_\_\_\_\_  
Name

**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 true and correct.  
I declare under penalty of perjury that the foregoing is true and correct.  
Executed on **March 12, 2018**  
MM / DD / YYYY

**X /s/ Min J. Kwon**  
Signature of authorized representative of debtor  
Title **Managing Member**

**Min J. Kwon**  
Printed name

**18. Signature of attorney**

**X /s/ Leslie Pineyro**  
Signature of attorney for debtor

Date **March 12, 2018**  
MM / DD / YYYY

**Leslie Pineyro 969800**  
Printed name

**Jones & Walden, LLC**  
Firm name

**21 Eighth Street, NE  
Atlanta, GA 30309**  
Number, Street, City, State & ZIP Code

Contact phone **404-564-9300** Email address **info@joneswalden.com**

**969800 GA**  
Bar number and State

**Fill in this information to identify the case:**

Debtor name **Christie & Caroline, LLC**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**

Case number (if known): \_\_\_\_\_

Check if this is an 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 contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim                   |   |                 |
|---|--|---|--|-----------------------------------|---|-----------------|
|   |  |   |  | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| Centers for Medicare & Medicaid<br>P.O. Box 6169<br>Indianapolis, IN 46206                                  |  | Audit   | Unliquidated<br>Disputed                                   |                                   |   | \$1,448,833.15  |
| Centers for Medicare & Medicaid<br>2300 Springdale Drive<br>Building 1<br>Camden, SC 29020                  |  |   | Unliquidated<br>Disputed                                   |                                   |   | \$1,338.29      |
| Centers for Medicare & Medicaid<br>2300 Springdale Drive<br>Building 1<br>Camden, SC 29020                  |  |   | Unliquidated<br>Disputed                                   |                                   |   | \$588.37        |
| First Intercontinental Bank<br>Attn: Don Win Shin,<br>Secretary<br>5593 Buford Highway<br>Atlanta, GA 30340 |  |   |  | \$45,992.88                       | \$0.00                                      | \$45,992.88     |
| First Intercontinental Bank<br>Attn: Don Win Shin,<br>Secretary<br>5593 Buford Highway<br>Atlanta, GA 30340 |  |   |  | \$11,768.21                       | \$0.00                                      | \$11,768.21     |
| Georgia Clinic, P.C.<br>1861 Peeler Rd.<br>Dunwoody, GA 30338   |  |   |  |                                   |   | \$158,333.48    |

Debtor **Christie & Caroline, LLC**  
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<br>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. |   |                 |
|--|--|---|--|--|---|-----------------|
|  |  |   |  | Total claim, if partially secured  | Deduction for value of collateral or setoff | Unsecured claim |
| Internal Revenue Service<br>P.O. Box 7346<br>Philadelphia, PA 19101-7346 |  | 2014 Payroll Taxes  |  |  |   | \$10,000.00     |
| Prohealth Capital<br>1111 Old Eagle School Road<br>Wayne, PA 19087       |  |   |  | \$5,000.00   | \$0.00                                      | \$5,000.00      |
| Prohealth Capital<br>1111 Old Eagle School Road<br>Wayne, PA 19087       |  |   |  | \$3,000.00   | \$0.00                                      | \$3,000.00      |
| Su Lawson<br>5260 Columbia Road<br>Grovetown, GA 30813                   |  | Loans   |  |  |   | \$96,000.00     |

**United States Bankruptcy Court  
Northern District of Georgia**

In re Christie & Caroline, LLC Debtor(s) Case No. \_\_\_\_\_ Chapter 11

**VERIFICATION OF CREDITOR MATRIX**

I, the Managing Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: March 12, 2018

/s/ Min J. Kwon  
**Min J. Kwon/Managing Member**  
Signer/Title

AdvancedMed NCI  
520 Royal Parkway  
Suite 100  
Nashville, TN 37214

Alex Azar, Sec. Health Human S  
US Health & Human Services  
200 Independence Avenue, S.W.  
Washington, DC 20201

Byung J Pak, US Attorney  
600 Richard B. Russell Buildin  
75 Ted Turner Drive, SW  
Atlanta, GA 30303

Cahaba Benefite Government Adm  
PO Box 6029  
Loxkbox 7247  
Philadelphia, PA 19170-6029

Centers for Medicare & Medical  
P.O. Box 6169  
Indianapolis, IN 46206

Centers for Medicare & Medical  
2300 Springdale Drive  
Building 1  
Camden, SC 29020

First Intercontinental Bank  
Attn: Don Win Shin, Secretary  
5593 Buford Highway  
Atlanta, GA 30340

Georgia Clinic, P.C.  
1861 Peeler Rd.  
Dunwoody, GA 30338



Georgia Department of Labor  
Suite 900  
148 Andrew Young Internat'l Blv  
Atlanta, GA 30303

Georgia Department of Revenue  
Compliance Division  
1800 Century Blvd, Ste 16102  
Atlanta, GA 30345-3205

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Jeff Sessions US Attny General  
950 Pennsylvania Avenue, NW  
Washington, DC 20530

Lynne Riley  
State of Georgia Revenue Commi  
1800 Century Blvd, N.E.  
Atlanta, GA 30345

Mark Butler, Comm. of Labor  
Georgia Department of Labor  
148 Andrew Young Int't, #826  
Atlanta, GA 30303

Palmetto GAB LLC  
Medicare Admin Contractor  
2300 Springdale Drive Bld 1  
Camden, SC 29020-1728

Prohealth Capital  
1111 Old Eagle School Road  
Wayne, PA 19087

Steven Mnuchin  
Secretary of the Treasury  
15th & Pennsylvania Ave, NW  
Washington, DC 20200

Su Lawson  
5260 Columbia Road  
Grovetown, GA 30813

William Paul  
Office of Chief Counsel IRS  
1111 Constitution Ave  
Washington, DC 20224