31 (Official Form 1)(04/13)								
United S	Court				Volunta	ry Petition		
Name of Debtor (if individual, enter Last, First,	Middle):		Name	of Joint De	btor (Spouse	e) (Last, First, M	liddle):	
GS Outpatient Facilities, LLC						, (,,, _		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Ot (includ	her Names le married,	used by the J maiden, and	Joint Debtor in trade names):	the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) 45-3766281				our digits of than one, state	f Soc. Sec. or all)	r Individual-Tax	kpayer I.D. (ITIN	I) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 2870 S. Maryland Parkway, Suite 23 Las Vegas, NV	0		Street	Address of	Joint Debtor	(No. and Stree	t, City, and State):
		ZIP Code	_					ZIP Code
County of Residence or of the Principal Place of		109	Count	y of Reside	nce or of the	Principal Place	of Business:	I
Clark						1		
Mailing Address of Debtor (if different from stre	et address):		Mailin	g Address	of Joint Debt	or (if different	from street addre	ss):
		ZIP Code	_					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):								
Type of Debtor	Nature of I			Chapter of Bankruptcy Code Under Which			Vhich	
(Form of Organization) (Check one box)	(Check on	,		_		Petition is Filed	I (Check one boy	x)
☐ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.	☐ Health Care Busin ☐ Single Asset Real		lefined	Chapt		□ Char	oter 15 Petition fo	or Recognition
Corporation (includes LLC and LLP)	in 11 U.S.C. § 101						Foreign Main Pro	
Partnership	☐ Railroad ☐ Stockbroker			Chapt		🗖 Chap	oter 15 Petition fo	or Recognition
☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Commodity Broke Clearing Bank Other	er		Chapt	er 13		Foreign Nonmain	n Proceeding
Chapter 15 Debtors		t Entity				Nature of (Check of		
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box, if Debtor is a tax-exem under Title 26 of the	Debtor is a tax-exempt organization under Title 26 of the United States "incurred			•		r b	Debts are primarily usiness debts.
Filing Fee (Check one box))	Check or	ne box:	1	Chap	ter 11 Debtors	8	
Full Filing Fee attached		De	btor is a sr			ned in 11 U.S.C. §		
☐ Filing Fee to be paid in installments (applicable to i attach signed application for the court's considerati debtor is unable to pay fee except in installments. F	on certifying that the	Check if: De	: btor's aggi	egate nonco	ntingent liquida		ling debts owed to	insiders or affiliates)
Form 3A.	s s s s s s s s s s s s s s s s s s s				amount subject	t to adjustment on	4/01/16 and every	three years thereafter).
 Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: A plan is being filed with this petition. A cceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). 						of creditors,		
Statistical/Administrative Information							PACE IS FOR COL	JRT USE ONLY
 Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. 								
Estimated Number of Creditors	si to unsecured creatto					4		
1- 50- 100- 200- 1		0,001- 2	25,001- 50,000	□ 50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$ \$50,000 \$100,000 \$500,000 to \$1 t	o \$10 to \$50 to	50,000,001 5 \$100 t	\$100,000,001 0 \$500	5500,000,001 to \$1 billion				
Estimated Liabilities □ □ □ □ □ S0 to \$50,001 to \$100,001 to \$500,001 s \$50,000 \$100,000 \$500,000 to \$1 to	51,000,001 \$10,000,001 \$5 0 \$10 to \$50 to] [50,000,001 5 \$100 t	nillion \$100,000,001 \$500	\$500,000,001 to \$1 billion				
million r			nillion					

31 (Official For Voluntor	y Petition	Name of Debtor(s):	Page
voiuntar	y retuon	GS Outpatient Fac	ilities, LLC
This page mi	ust be completed and filed in every case)		
	All Prior Bankruptcy Cases Filed Within Last	t 8 Years (If more than tw	o, attach additional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than one, attach additional sheet)
Name of Debt See Attach		Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A	(To be completed if debtor i	Exhibit B s an individual whose debts are primarily consumer debts.)
forms 10K a pursuant to s and is reque	bleted if debtor is required to file periodic reports (e.g., nd 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	have informed the petitio 12, or 13 of title 11, Unit under each such chapter. required by 11 U.S.C. §3-	tioner named in the foregoing petition, declare that I ner that [he or she] may proceed under chapter 7, 11, ed States Code, and have explained the relief available I further certify that I delivered to the debtor the notic 42(b).
□ Exhibit	A is attached and made a part of this petition.	X Signature of Attorney	for Debtor(s) (Date)
		l ibit C	
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent an	d identifiable harm to public health or safety?
	Fyh	ibit D	
(To be comp	leted by every individual debtor. If a joint petition is filed, ea		and attach a separate Exhibit D.)
Exhibit	D completed and signed by the debtor is attached and made	a part of this petition.	
If this is a joint	int petition:		
Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this pet	ition.
	Information Regardir	g the Debtor - Venue	
	(Check any ag	-	
	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or pri a longer part of such 180	ncipal assets in this District for 180 days than in any other District.
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnersh	nip pending in this District.
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or th sought in this District.	in the United States but i	s a defendant in an action or
	Certification by a Debtor Who Reside		tial Property
	(Check all app) Landlord has a judgment against the debtor for possession		box checked, complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment		
	Debtor has included with this petition the deposit with the after the filing of the petition.	court of any rent that wou	ld become due during the 30-day period
	Debtor certifies that he/she has served the Landlord with the	his certification. (11 U.S.C	2. § 362(1)).

B1 (Official Form 1)(04/13)	Page
Voluntary Petition	Name of Debtor(s): GS Outpatient Facilities, LLC
(This page must be completed and filed in every case)	63 Outpatient Facilities, LLC
	l
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).	 Certified copies of the documents required by 11 U.S.C. §1515 are attached □ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	recognition of the foreign main proceeding is attached.
X Signature of Debtor	X
Signature of Debtor	Signature of Foldgin Representative
X Signature of Joint Debtor	Printed Name of Foreign Representative
Signature of Joint Debtor	D
Telephone Number (If not represented by attorney)	Date
relephone Number (II not represented by attorney)	Signature of Non-Attorney Bankruptcy Petition Preparer
Date	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for
Signature of Attorney*	compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b),
X /s/ Matthew L. Johnson	110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services
Signature of Attorney for Debtor(s)	chargeable by bankruptcy petition preparers, I have given the debtor notice
Matthew L. Johnson 6004	of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.
Printed Name of Attorney for Debtor(s)	Official Form 19 is attached.
Johnson & Gubler, P.C.	
Firm Name	Printed Name and title, if any, of Bankruptcy Petition Preparer
Lakes Business Park	
8831 W. Sahara Avenue Las Vegas, NV 89117	Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition
Address	preparer.)(Required by 11 U.S.C. § 110.)
Email: mjohnson@mjohnsonlaw.com _(702) 471-0065 Fax: (702) 471-0075	
Telephone Number	
February 13, 2014	Address
Date *In a case in which $$707(h)(A)(D)$ amplies this signature also constitutes a	
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	X
	Date
Signature of Debtor (Corporation/Partnership)	Signature of bankruptcy petition preparer or officer, principal, responsible
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition	person,or partner whose Social Security number is provided above.
on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
X /s/ Raul Abejuela	
Signature of Authorized Individual	
Raul Abejuela	If more than one person prepared this document, attach additional sheets
Printed Name of Authorized Individual	conforming to the appropriate official form for each person.
CEO	A bankruptcy petition preparer's failure to comply with the provisions of
Title of Authorized Individual	title 11 and the Federal Rules of Bankruptcy Procedure may result in
February 13, 2014	fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.
Date	

3

In re **GS Outpatient Facilities, LLC**

Case No.

Debtor

FORM 1. VOLUNTARY PETITION Pending Bankruptcy Cases Filed Attachment

Name of Debtor / District

Good Shepherd REhab Centers of Las Vegas, Inc. Nevada

Good Shepherd Rehabilitation Institute, Inc Nevada

Case No. / Relationship

13-14412-MKN GS Outpatient owns 100%

BK-S-13-13481-MKN GS Outpatient owns 100% Date Filed / Judge

05/20/13 Nakagawa

05/20/13 Nakagawa B4 (Official Form 4) (12/07)

United States Bankruptcy Court

District of Nevada

In re **GS Outpatient Facilities, LLC**

Debtor(s)

Case No.	
Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [*or* chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106	Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 Las Vegas, NV 89106		Disputed	Unknown (Unknown secured)
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106	Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 Las Vegas, NV 89106		Disputed	Unknown
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106	Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 Las Vegas, NV 89106		Disputed	Unknown
State of Nevada Employment Security 2800 E St Louis Ave Las Vegas, NV 89104	State of Nevada Employment Security 2800 E St Louis Ave Las Vegas, NV 89104		Disputed	5,851.69

Cube I = 10020 ubi = D001 = Cilcicu 02/10/14 10.21.40 = 1 uge 0 0100	Case 14-10929-abl	Doc 1	Entered 02/13/14 16:21:40	Page 6 of 33	2/13/14 4:21PI
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B4 (Official Form 4) (12/07) - Cont. In re **GS Outpatient Facilities, LLC**

Debtor(s)

Case No.

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the CEO of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date February 13, 2014

Signature /s/ Raul Abejuela

Raul Abejuela CEO

Penalty for making a false statement or 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

District of Nevada

In re

.

GS Outpatient Facilities, LLC

Debtor

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	0.00		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		5,851.69	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedu	ıles	10			
	Te	otal Assets	0.00		
			Total Liabilities	5,851.69	

United States Bankruptcy Court

District of Nevada

In re

.

GS Outpatient Facilities, LLC

Debtor

Case No		
Chapter	11	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

□ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 12)	
Average Expenses (from Schedule J, Line 22)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	
 Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column 	
4. Total from Schedule F	
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	

B6A (Official Form 6A) (12/07)

In re

GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
--------------------------------------	--	---	--	----------------------------

None

Total >

B6B (Official Form 6B) (12/07)

In re

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GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	х			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	x			
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Х			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6.	Wearing apparel.	X			
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	х			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			

0.00

2 continuation sheets attached to the Schedule of Personal Property

In re

GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	x			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	x			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	х			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

0.00

Sub-Total >

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

In re

GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	x			
23.	Licenses, franchises, and other general intangibles. Give particulars.	x			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	х			
27.	Aircraft and accessories.	х			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	Х			
31.	Animals.	х			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	х			
35.	Other personal property of any kind not already listed. Itemize.	X			

In re

GS Outpatient Facilities, LLC

Case No._____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests. List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided. If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.) Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding secured claims to report on this Schedule D. Check this box if debtor has no creditors holding secured claims to report on this Schedule D. П

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H J C	NATURE DESCRIPTIO OF P	ty OF LIEN, AND OF AND VALUE ROPERTY CT TO LIEN	G	UNLLQULDAT	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			Secured Tax Liabil	ity	Т	T E D			
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106		-	Value \$	Unknown	-		x	Unknown	Unknown
Account No.	_								
			Value \$						
Account No.									
			Value \$						
Account No.									
			Value \$						
0 continuation sheets attached				S (Total of tl	ubto			0.00	0.00
				(10,000,000,000	-	ota	ł	0.00	0.00

(Report on Summary of Schedules)

In re

GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

□ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

□ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

□ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

□ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

□ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

B6E (Official Form 6E) (4/13) - Cont.

2/13/14 4:21PM

In re **GS Outpatient Facilities, LLC**

Debtor

Case No.

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

							TYPE OF PRIORITY	7
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H W J C	ISBAND, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONT-NGEN	UNLIQUIDA	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No.				Ť	DATED			
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106		-				x	Unknown	Unknown
Account No.								
Account No.								
Account No.								
Account No.								
Sheet <u>1</u> of <u>1</u> continuation sheets attac)	ubt				0.00
Schedule of Creditors Holding Unsecured Prior	rity	Cla	aims (Total of th		oag ota		0.00	0.00
			(Report on Summary of Sci				0.00	0.00

In re

GS Outpatient Facilities, LLC

_____,

Case No.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Debtor

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS	COD		lusband, Wife, Joint, or Community		UNL		
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C D H	CONSIDERATION FOR CLAIM. IF CLAIM				NT OF CLAIM
Account No.				T	Ť		
Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106		-			D	,	Unknown
Account No.							
State of Nevada Employment Security 2800 E St Louis Ave Las Vegas, NV 89104		-				,	
							5,851.69
Account No.							
Account No.							
_0 continuation sheets attached			(Total o	Sub this			5,851.69
			(Report on Summary of		Tota		5,851.69

In re

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GS Outpatient Facilities, LLC

Pahrump, NV 89048

Case No.

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts of the spired for

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Valley Professional Center, LLC 2471 E. Banyon Street Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Lease of Property located at 1470 E. Calveda Blvd, Ste. 100-200 Pahrump, NV 89048

B6H (Official Form 6H) (12/07)

In re

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GS Outpatient Facilities, LLC

Case No.

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court District of Nevada

In re **GS Outpatient Facilities, LLC**

Debtor(s)

Case No. Chapter

11

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the CEO of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 12 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date February 13, 2014

Signature /s/ Raul Abejuela Raul Abejuela CEO

Penalty for making a false statement or 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

District of Nevada

In re GS Outpatient Facilities, LLC

Debtor(s)

Case No. Chapter

11

Chapte

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate 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(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$1,375,228.00	2013: Business Income
\$1,375,228.00	2012: Business Income
\$95,824.00	2014: Year to Date Business Income

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

B7 (Official Form 7)	(04/13)
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2

None

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS	DATES OF		AMOUNT STILL
OF CREDITOR	PAYMENTS	AMOUNT PAID	OWING

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Nevada Grant Sawyer Office Buidling, 555 E. Washington Ave, Suite 1300 Las Vegas, NV 89101	DATES OF PAYMENTS/ TRANSFERS 10/29/2013	AMOUNT PAID OR VALUE OF TRANSFERS \$480.00	AMOUNT STILL OWING \$0.00
AT&T C/O Bankruptcy 1801 Valley View Ln Farmers Branch Dallas, TX 75234	10/17/2013 11/14/2013	\$362.15	\$0.00
Chase P.O. Box 15298 Wilmington, DE 19850	10/31/2013 11/30/2013	\$204.00	\$0.00
CMA Communications 1051 S. Bunch Street Pahrump, NV 89041	10/08/2013 11/26/2013	\$336.95	\$0.00
Nevada Power 6226 West Sahara Avenue Las Vegas, NV 89146	11/20/2013 10/21/2013	\$1,125.51	\$0.00
Solavei	10/22/2013 11/22/2013	\$205.16	\$0.00
Tangerine Office Supply 1175 American Pacific Drive Henderson, NV 89074	11/14/2013	\$241.00	\$0.00
Valley Electric Assn 1150 Quartz Ave Jean, NV 89019	10/17/2013 11/14/2013	\$208.93	\$0.00
Vision Service Plan	10/24/2013	\$129.30	\$0.00
Paymentech		\$148.00	\$0.00

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Mark Se 720 S. 4 Las Veg	AND ADDRESS OF CREDITOR egal, Chtd. hth St #301 jas, NV 89101	DATES OF PAYMENTS/ TRANSFERS 11/14/2013	AMOUNT PAID OR VALUE OF TRANSFERS \$37.50	AMOUNT STILL OWING \$0.00	
Valley P	Proffessional Center	12/16/2013	\$6,750.00	\$0.00	
Attn: Ba Stop 50 110 City	Revenue Service ankruptcy Unit 28 / Parkway jas, NV 89106	11/22/2013	\$103.14	\$0.00	
None	c. <i>All debtors:</i> List all payments made with of creditors who are or were insiders. (Marrie spouses whether or not a joint petition is filed	d debtors filing under chap	ter 12 or chapter 13 must include payme		
	AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING	
	4. Suits and administrative proceedings, ex	xecutions, garnishments a	nd attachments		
None	a. List all suits and administrative proceeding of this bankruptcy case. (Married debtors filin spouses whether or not a joint petition is filed	g under chapter 12 or chap	ter 13 must include information concern	y preceding the filing ing either or both	
	N OF SUIT SE NUMBER		DURT OR AGENCY ID LOCATION	STATUS OR DISPOSITION	
None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)					
BE Internal Attn: Ba Stop 50 110 City	AND ADDRESS OF PERSON FOR WHOSE ENEFIT PROPERTY WAS SEIZED Revenue Service ankruptcy Unit 28 / Parkway jas, NV 89106	DATE OF SEIZURE August 2013 - January 2014	DESCRIPTION AND VALUE OF PROPERTY Cash from Bank Account total v	value \$6,445.57	
	5. Repossessions, foreclosures and returns				
None					
	AND ADDRESS OF	ATE OF REPOSSESSION FORECLOSURE SALE, FRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY		

4	6. Assignments and receivership	DS				
None						
NAME A	ND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSI	GNMENT OR SETTLEMENT		
None	preceding the commencement of the	n in the hands of a custodian, receiver his case. (Married debtors filing unde whether or not a joint petition is filed	r chapter 12 or chapter	13 must include information concerning		
	ND ADDRESS USTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY		
	7. Gifts					
None	and usual gifts to family members aggregating less than \$100 per rec	aggregating less than \$200 in value p	er individual family me chapter 12 or chapter 13	8 must include gifts or contributions by		
	E AND ADDRESS OF OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT		
	8. Losses					
None						
	PTION AND VALUE PROPERTY	LOSS WAS COVE	F CIRCUMSTANCES & ERED IN WHOLE OR I ICE, GIVE PARTICUL	N PART		
	9. Payments related to debt cou	nseling or bankruptcy				
None	List an payments made of property transferred by or on benan of the debtor to any persons, merulang attorneys, for consultation					
OF F Dan M. V 3507 W.	ND ADDRESS PAYEE Winder Charleston Blvd as, NV 89102	DATE OF PAYMI NAME OF PAYER IF THAN DEBTO May 2013	OTHER	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$12,500		
Mark Se	gal, Chtd	11/2013		\$1,512.50		
8831 W.	on & Gubler Sahara Ave as, NV 89119	May 2013-February	2014	\$20,000		

B7 (Officia 5	l Form 7) (04/13)					
<u> </u>	10. Other transfers					
None	transferred either absolutely or a	than property transferred in the ordinary s security within two years immediatel or 13 must include transfers by either or t petition is not filed.)	y preceding the commencem	ent of this case. (Married debtors		
	AND ADDRESS OF TRANSFERE ELATIONSHIP TO DEBTOR	E, DATE	DESCRIBE PROPERT AND VALUI	'Y TRANSFERRED E RECEIVED		
None	b. List all property transferred b trust or similar device of which t	y the debtor within ten years immediat he debtor is a beneficiary.	tely preceding the commence	ment of this case to a self-settled		
NAME (DEVICE	OF TRUST OR OTHER	DATE(S) OF TRANSFER(S)		Y OR DESCRIPTION AND YY OR DEBTOR'S INTEREST		
	11. Closed financial accounts					
None	otherwise transferred within one financial accounts, certificates of cooperatives, associations, broke must include information concer	struments held in the name of the debto year immediately preceding the comm f deposit, or other instruments; shares a grage houses and other financial institut ning accounts or instruments held by or arated and a joint petition is not filed.)	encement of this case. Includ nd share accounts held in bar ions. (Married debtors filing	le checking, savings, or other nks, credit unions, pension funds, under chapter 12 or chapter 13		
NAME A	AND ADDRESS OF INSTITUTION	TYPE OF ACCOUN DIGITS OF ACCOU N AND AMOUNT OF F	UNT NUMBER,	AMOUNT AND DATE OF SALE OR CLOSING		
	12. Safe deposit boxes					
None	List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)					
	AND ADDRESS OF BANK THER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY		
	13. Setoffs					
None	commencement of this case. (Ma	itor, including a bank, against a debt or arried debtors filing under chapter 12 or etition is filed, unless the spouses are se	chapter 13 must include info	ormation concerning either or both		
NAME A	AND ADDRESS OF CREDITOR	DATE OF SETOFF	1	AMOUNT OF SETOFF		
	14. Property held for another	person				
None	List all property owned by anoth	er person that the debtor holds or contro	ols.			
NAME A	AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PR	ROPERTY LOCATION	OF PROPERTY		

6

15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 8880 W. Sunset Road, Suite 150 Las Vegas, NV 89148 NAME USED

DATES OF OCCUPANCY

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
SITE NAME AND ADDRESS	GOVERNMENTAL UNIT	NOTICE	LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
SITE NAME AND ADDRESS	GOVERNMENTAL UNIT	NOTICE	LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

7

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME GS Outpatient Facilities, LLC	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN EIN 45-3766281	ADDRESS 2870 S. Maryaldn Parkway, Suite 230 Las Vegas, NV 89109	NATURE OF BUSINESS Outpatient Rehab Center	BEGINNING AND ENDING DATES Began Operating on January 1, 2012
		Las vegas, NV 89109		

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go *directly to the signature page.*)

19. Books, records and financial statements

None a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Steve Nelson C/O Nelson and Conant 2451 W. Buffalo Drive #120 Las Vegas, NV 89117

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

DATES SERVICES RENDERED

DATES SERVICES RENDERED

	l Form 7) (04/13)					
8 None		titutions, creditors and other parties, including mercantile for within two years immediately preceding the commence				
NAME A	AND ADDRESS	DA	TE ISSUED			
	20. Inventories					
None		last two inventories taken of your property, the name of the and basis of each inventory.	e person who supervised the taking of each inventory,			
DATE O	F INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)			
None	b. List the name and ad	ddress of the person having possession of the records of eac	ch of the inventories reported in a., above.			
DATE O	F INVENTORY	NAME AND ADDRES RECORDS	SES OF CUSTODIAN OF INVENTORY			
	21 . Current Partners	s, Officers, Directors and Shareholders				
None	a. If the debtor is a par	tnership, list the nature and percentage of partnership inter	rest of each member of the partnership.			
Raul At 2870 S.	Maryland Parkway, S gas, NV 89109	NATURE OF INTEREST Owning/Managing Member Suite 230-250	PERCENTAGE OF INTEREST 100%			
		rcent or more of the voting or equity securities of the corporation, a				
NAME A	AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP			
	22 . Former partners	, officers, directors and shareholders				
None	a. If the debtor is a par commencement of this	thership, list each member who withdrew from the partner case.	ship within one year immediately preceding the			
NAME		ADDRESS	DATE OF WITHDRAWAL			
None	b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.					
NAME A	AND ADDRESS	TITLE	DATE OF TERMINATION			
	23. Withdrawals from a partnership or distributions by a corporation					
None	² If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.					
OF REC	& ADDRESS IPIENT, ONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY			

9

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date February 13, 2014

Signature /s/ Raul Abejuela Raul Abejuela CEO

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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

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United States Bankruptcy Court District of Nevada

In r		Case No.	
	Debtor(s)	Chapter	11
	DISCLOSURE OF COMPENSATION OF ATTORNE	EY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorne compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupt	agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept	\$	0.00
	Prior to the filing of this statement I have received	\$	0.00
	Balance Due	\$	0.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person unle firm.	ess they are men	bers and associates of my law
	□ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the contract of the people sharing in the people sharing in the people sharing in the people sharing in the people share of the people		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determine. b. Preparation and filing of any petition, schedules, statement of affairs and plan which matching of the debtor at the meeting of creditors and confirmation hearing, and a d. [Other provisions as needed] All work performed pursuant to the employment application and any 	ay be required; ny adjourned he	arings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following set	rvice:	
	CERTIFICATION		
this	I certify that the foregoing is a complete statement of any agreement or arrangement for pay bankruptcy proceeding.	ment to me for i	representation of the debtor(s) in

Dated: February 13, 2014	/s/ Matthew L. Johnson
	Matthew L. Johnson 6004
	Johnson & Gubler, P.C.
	Lakes Business Park
	8831 W. Sahara Avenue
	Las Vegas, NV 89117
	(702) 471-0065 Fax: (702) 471-0075
	mjohnson@mjohnsonlaw.com

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the CEO of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date February 13, 2014

18 U.S.C §§ 152 and 3571.

0 _ continuation sheets attached to List of Equity Security Holders

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United States Bankruptcy Court District of Nevada

Debtor

Case No.

Chapter_____ 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address	Security	Number	Kind of
or place of business of holder	Class	of Securities	Interest

In re

GS Outpatient Facilities, LLC

2/13/14 4:21PM

Best Case Bankruptcy

Raul Abejuela

Signature /s/ Raul Abejuela

CEO

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

United States Bankruptcy Court District of Nevada

In re **GS Outpatient Facilities, LLC**Debtor(s)

Case No. Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the CEO 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: February 13, 2014

/s/ Raul Abejuela

Raul Abejuela/CEO Signer/Title GS Outpatient Facilities, LLC 2870 S. Maryland Parkway, Suite 230 Las Vegas, NV 89109

Matthew L. Johnson Johnson & Gubler, P.C. Lakes Business Park 8831 W. Sahara Avenue Las Vegas, NV 89117

Internal Revenue Service Attn: Bankruptcy Unit Stop 5028 110 City Parkway Las Vegas, NV 89106

State of Nevada Employment Security 2800 E St Louis Ave Las Vegas, NV 89104

Valley Professional Center, LLC 2471 E. Banyon Street Pahrump, NV 89048 Case 14-10929-abl Doc 1 Entered 02/13/14 16:21:40 Page 33 of 33 2/13/14 421PM

United States Bankruptcy Court District of Nevada

In re **GS Outpatient Facilities, LLC**

Debtor(s)

Case No. Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for <u>**GS Outpatient Facilities, LLC**</u> in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

February 13, 2014

Date

/s/ Matthew L. Johnson Matthew L. Johnson 6004 Signature of Attorney or Litigant Counsel for GS Outpatient Facilities, LLC Johnson & Gubler, P.C. Lakes Business Park 8831 W. Sahara Avenue Las Vegas, NV 89117 (702) 471-0065 Fax:(702) 471-0075 mjohnson@mjohnsonlaw.com