B1 (Official Form 1)(4/10)									
United Sou						Petition			
Name of Debtor (if individual, enter Last, First, Middle): Madison Life Capital LLC				Name	of Joint De	ebtor (Spouse	e) (Last, First, N	Aiddle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) 26-1118421					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)				
Street Address of Debtor (No. and Street, City, and State): 40 East 94th Street New York, NY ZIP Code				Street	Street Address of Joint Debtor (No. and Street, City, and State): ZIP Code				
		[1	0128						
County of Residence or of the Principal Place of Business: New York				Count	County of Residence or of the Principal Place of Business:				
Mailing Address of Debtor (if different from street address):				Mailir	ng Address	of Joint Debt	tor (if different	from street address):	
ZIP Code								ZIP Code	
Location of Principal Assets of Business Debt (if different from street address above):	or								
Type of Debtor		Nature o	of Business			Chapter	r of Bankruptc	y Code Under Whi	ch
(Form of Organization)			one box)		the Petition is Filed (Check one box)				
(Check one box)		lth Care Bus gle Asset Re		defined	Chapt			4 15 D (1) 6 T	
☐ Individual (includes Joint Debtors)		1 U.S.C. § 1		uermeu	Chapt			pter 15 Petition for F Foreign Main Proce	0
See Exhibit D on page 2 of this form.	🗖 Rail				Chapter 11 Chapter 12 Chapter 15 Petition for Recognition				
Corporation (includes LLC and LLP)		kbroker	,		Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13				
□ Partnership		nmodity Bro aring Bank	oker			01 15		8	5
□ Other (If debtor is not one of the above entities							Nature o	f Debts	
check this box and state type of entity below.)		Tax-Exe	mpt Entity				(Check o		
		(Check box,	, if applicable		Debts are primarily consumer debts, Debts are primarily				s are primarily
	Debtor is a tax-exempt organiz under Title 26 of the United St Code (the Internal Revenue Co		d States	ates "incurred by an individual primarily for					
Filing Fee (Check one b	ox)		Check	one box:		Chap	oter 11 Debtor	5	
							ned in 11 U.S.C.		
☐ Filing Fee to be paid in installments (applicable to individuals only). Must Check if:					or is not a small business debtor as defined in 11 U.S.C. § 101(51D).				
attach signed application for the court's consideration certifying that the				or's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates)					
				ess than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).					
				pplicable boxes: n is being filed with this petition.					
attach signed application for the court's consideration. See Official Form 3B.				•	0	-	repetition from or	ne or more classes of ci	reditors,
			i	n accordance	e with 11 U.S	S.C. § 1126(b).			
Statistical/Administrative Information Debtor estimates that funds will be available	le for distri	bution to un	secured cre	ditore			THIS SI	PACE IS FOR COURT	USE ONLY
 Debtor estimates that finds will be available Debtor estimates that, after any exempt protection of the statistic statistic statistics and the sta	operty is ex-	cluded and a	administrati		es paid,				
Estimated Number of Creditors									
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	□ 1,000- 5,000	5,001- 10,000	□ 10,001- 25,000	□ 25,001- 50,000	□ 50,001- 100,000	OVER 100,000			
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,000 \$50,000 \$100,000 \$500,000 to \$100,000	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities							1		
S0 to \$50,001 to \$100,001 to \$500,001 to \$500,001 to \$100,001 to \$100,000 to \$100,000 to	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			

B1 (Official For	m 1)(4/10)		Page 2			
Voluntary Petition		Name of Debtor(s): Madison Life Capital LLC				
(This page must be completed and filed in every case)		madison Life Capital LLC				
	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than two), attach additional sheet)			
Location Where Filed:	- ·	Case Number:	Date Filed:			
Location Where Filed:		Case Number:	Date Filed:			
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (I	f more than one, attach additional sheet)			
Name of Debt - None -	lor:	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
	Exhibit A	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.)				
forms 10K a pursuant to S and is reques	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 (sting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X				
	Fv!	hibit C				
	or own or have possession of any property that poses or is alleged to I Exhibit C is attached and made a part of this petition.		identifiable harm to public health or safety?			
☐ Exhibit If this is a joi	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made	a part of this petition.				
	-	ng the Debtor - Venue				
-	(Check any ap Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for					
	There is a bankruptcy case concerning debtor's affiliate, g	neral partner, or partnership 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.	s in the United States but is he interests of the parties w	a defendant in an action or ill be served in regard to the relief			
	Certification by a Debtor Who Reside (Check all app	es as a Tenant of Resident plicable boxes)	ial Property			
	Landlord has a judgment against the debtor for possession		ox 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 in this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would l	become due during the 30-day period			

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition	Name of Debtor(s):				
•	Madison Life Capital LLC				
This page must be completed and filed in every case)					
Signature(s) of Debtor(s) (Individual/Joint)	natures 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. [If no attorney represents me and no bankruptcy petition preparer signs the	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.) □ I request relief in accordance with chapter 15 of title 11. United States Cod Certified copies of the documents required by 11 U.S.C. §1515 are attached				
petition] I have obtained and read the notice required by 11 U.S.C. §342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapte of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.				
	X				
X Signature of Debtor	X				
-					
X	Printed Name of Foreign Representative				
Signature of Joint Debtor					
	Date				
Telephone Number (If not represented by attorney)	Signature of Non-Attorney Bankruptcy Petition Preparer				
	I declare under penalty of perjury that: (1) I am a bankruptcy petition				
Date	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),				
	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				
X /s/ Lawrence Morrison	chargeable by bankruptcy petition preparers, I have given the debtor notice				
Signature of Attorney for Debtor(s)	of the maximum amount before preparing any document for filing for a				
Lawrence Morrison	debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.				
Printed Name of Attorney for Debtor(s)	official Form Ty is addened.				
Meister Seelig & Fein LLP	Printed Name and title, if any, of Bankruptcy Petition Preparer				
Firm Name	Timed Name and the, if any, of Bankrupicy Fetholi Frepare				
140 E. 45th Street					
19th Floor New York, NY 10017	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: lfm@msf-law.com 212-655-3582 Fax: 646-539-3682 Telephone Number					
September 2, 2010					
Date	Address				
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	X				
certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	A				
information in the schedules is incorrect.					
Signature of Debtor (Corporation/Partnership)	Date				
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	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.				
on behalf of the debtor.	Names and Social-Security numbers of all other individuals who prepared o assisted in preparing this document unless the bankruptcy petition preparer in not an individual:				
The debtor requests relief in accordance with the chapter of title 11, United	not an individual.				
States Code, specified in this petition.					
States Code, specified in this petition.					
States Code, specified in this petition. X /s/ Thomas Szabo Signature of Authorized Individual					
States Code, specified in this petition. X /s/ Thomas Szabo Signature of Authorized Individual Thomas Szabo	If more than one person prepared this document, attach additional sheets				
States Code, specified in this petition.					
States Code, specified in this petition. X /s/ Thomas Szabo Signature of Authorized Individual Thomas Szabo Printed Name of Authorized Individual Managing Member	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of				
States Code, specified in this petition. X /s/ Thomas Szabo Signature of Authorized Individual Thomas Szabo Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in				
States Code, specified in this petition. X /s/ Thomas Szabo Signature of Authorized Individual Thomas Szabo Printed Name of Authorized Individual Managing Member	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of				