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B1 (Official Form 1)(4/1	.0)			D0	cument	ı a	ge i oi	1 1			
	,	United S Dis			ruptcy Carolina					Voluntary	Petition
Name of Debtor (if indi- Mendoza Venture		er Last, First, I	Middle):			Name	of Joint De	ebtor (Spouse) (Last, First	, Middle):	
All Other Names used by (include married, maider DBA Hugo's at W	n, and trade		years					used by the J maiden, and		in the last 8 years):	
Last four digits of Soc. S (if more than one, state all) 54-2188779	Sec. or Indi	vidual-Taxpay	yer I.D. (ITIN) No./0	Complete EI	N Last for	our digits o	f Soc. Sec. or	Individual-	Taxpayer I.D. (ITIN) No	o./Complete EIN
Street Address of Debtor 1000 William Hilto Hilton Head Island	n Pkwy,	•	nd State)	_	ZIP Code	Street	Address of	Joint Debtor	(No. and St	reet, City, and State):	ZIP Code
County of Residence or o	of the Princ	cipal Place of	Business		29928	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debt PO Box 6143 Hilton Head Island	d, SC		et addres	_	ZIP Code 29938	Mailir	g Address	of Joint Debt	or (if differe	nt from street address):	ZIP Code
Location of Principal As (if different from street a	iddress abo	ve):									
Type of (Form of Or (Check of Individual (includes of See Exhibit D on page) Corporation (include of Partnership Other (If debtor is not of check this box and state)	rganization) one box) Joint Debto ge 2 of this s LLC and one of the ab	form. LLP) pove entities,	Sing in 1: Raili Stoc Com Clea Othe	(Check Ith Care Bu gle Asset Re 1 U.S.C. § 1 O.S.C. § 1 oad 6 kbroker 6 modity Bro 6 minodity Bro 7 Tax-Exe 7 (Check be 7 to is a tax- 6 or Title 26 o	eal Estate as 101 (51B)	e) unization I States	defined "incurr	the I er 7 er 9 er 11 er 12	Petition is Fi	busine for	ecognition ding ecognition
Filing Fee attached Filing Fee to be paid in attach signed application debtor is unable to pay Form 3A. Filing Fee waiver reque attach signed application	installments n for the cou fee except in	irt's consideration installments. R	individuals on certifyin Rule 1006(7 individua	ng that the b). See Officals only). Mu	ial Check i Check i Check i Check i Check a Check a Check a Check a Check a Check a	debtor is not f: debtor's agging re less than a all applicable a plan is bein acceptances	regate nonco \$2,343,300 (ee boxes: ng filed with of the plan w	debtor as defir ness debtor as c entingent liquida amount subject this petition.	defined in 11 Unated debts (exo to adjustment		e years thereafter).
Statistical/Administrati ☐ Debtor estimates that ☐ Debtor estimates that there will be no fund Estimated Number of Cr	t funds will t, after any s available editors	be available exempt prope for distribution	erty is excon to uns	cluded and ecured cred	administrati litors.	ve expense			THIS	S SPACE IS FOR COURT	USE ONLY
1- 50- 49 99 Estimated Assets □ □	100- 199 \$100,001 to \$500,000	999 5 \$500,001 \$ to \$1 to	3,000- 5,000 51,000,001 51,000,001 o \$10 nillion	5,001- 10,000 \$10,000,001 to \$50 million	10,001- 25,000 \$50,000,001 to \$100 million	25,001- 50,000 \$100,000,001 to \$500 million	50,001- 100,000 \$500,000,001 to \$1 billion	OVER 100,000			
Estimated Liabilities	\$100,001 to \$500,000	\$500,001 \$	51,000,001 o \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion				

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B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): **Voluntary Petition** Mendoza Ventures, LLC (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission 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 pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) **Exhibit C** Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete 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 petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, 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. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(4/10)

Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

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 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.

 \mathbf{X}_{-}

Signature of Debtor

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Elizabeth M. Atkins, Esquire DCID

Signature of Attorney for Debtor(s)

Elizabeth M. Atkins, Esquire DCID #4436

Printed Name of Attorney for Debtor(s)

Elizabeth M. Atkins, Esquire

Firm Name

778 St. Andrews Blvd. Charleston, SC 29407

Address

843-763-0333

Telephone Number

June 2, 2010

Date

*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.

Signature of Debtor (Corporation/Partnership)

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 on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

▼ /s/ /s/ Hugo Arrieta

Signature of Authorized Individual

/s/ Hugo Arrieta

Printed Name of Authorized Individual

President

Title of Authorized Individual

June 2, 2010

Date

Signature of a Foreign Representative

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.)

Name of Debtor(s):

Mendoza Ventures, LLC

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. 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 recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

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 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 chargeable by bankruptcy petition preparers, I have given the debtor notice 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. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

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 preparer.)(Required by 11 U.S.C. § 110.)

 \mathbf{X}

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

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:

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 fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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B4 (Official Form 4) (12/07)

United States Bankruptcy Court District of South Carolina

In re	Mendoza Ventures, LLC			
		Debtor(s)	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.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Alsco Attorney or Manager 4921 Chateau Avenue North Charleston, SC 29405	Alsco Attorney or Manager 4921 Chateau Avenue North Charleston, SC 29405 800-408-0208			834.00
Bosley MA Attorney or Manager PO Box 7634 Hilton Head Island, SC 29938	Bosley MA Attorney or Manager PO Box 7634 Hilton Head Island, SC 29938 843-837-8500			3,500.00
Bosley MA Attorney or Manager PO Box 7634 Hilton Head Island, SC 29938	Bosley MA Attorney or Manager PO Box 7634 Hilton Head Island, SC 29938 843-837-8500			1,350.00
Hargray Attorney or Manager 856 Wm Hilton Pkwy Hilton Head Island, SC 29938	Hargray Attorney or Manager 856 Wm Hilton Pkwy Hilton Head Island, SC 29938 843-686-5000			1.00
IFH Attorney or Manager PO Box 60163 Charlotte, NC 28260	IFH Attorney or Manager 2801 Alex Lee Blvd Florence, SC 29506			8,858.00
Ocean Drive Electric Attorney or Manager PO Box 1600 Ridgeland, SC 29936	Ocean Drive Electric Attorney or Manager PO Box 1600 Ridgeland, SC 29936 843-726-5557			1.00
Palmetto Electric Cooperative Attorney or Manager PO Box 23619 Hilton Head Island, SC 29925	Palmetto Electric Cooperative Attorney or Manager PO Box 23619 Hilton Head Island, SC 29925 843-681-5551			1.00

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B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Mendoza Ventures, LLC	Case No.	
	Debtor(s)	_	

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]
Rapid Advance Attorney or Manager 7316 Wisconsin Avenue Suite 350 Bethesda, MD 20814	Rapid Advance Attorney or Manager 7316 Wisconsin Avenue Bethesda, MD 20814 240-380-1656			41,440.00
SC Bank & Trust Attorney or Manager 520 Gervais Street Columbia, SC 29201	SC Bank & Trust Attorney or Manager 520 Gervais Street Columbia, SC 29201 803-771-2265			30,000.00
US Foods Attorney or Manager PO Box 869 Lexington, SC 29071	US Foods Attorney or Manager PO Box 869 Lexington, SC 29071 803-951-4200			7,000.00
Verizon Wireless Attorney or Manager PO Box 3397 Bloomington, IL 61702	Verizon Wireless Attorney or Manager PO Box 3397 Bloomington, IL 61702			1.00

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B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Mendoza Ventures, LLC	Case No.	
	Debtor(s)		

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, the President 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	June 2, 2010	Signature	/s/ /s/ Hugo Arrieta
		-	/s/ Hugo Arrieta
			President

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.

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy CourtDistrict of South Carolina

		District of South Carolin	ıa				
In re	Mendoza Ventures, LLC		Case No.				
		Debtor(s)	Chapter	11			
	CERTIFI	CATION VERIFYING CRE	DITOR MATRIX				
CM/E0	aptcy Rule 1007-1 that the master CF, or conventionally filed in a type	orney for the debtor if applicable, mailing list of creditors submitted ped hard copy scannable format we ments and lists which are being filed a	either on computer d hich has been compa	iskette, electronically filed via ared to, and contains identical			
	Master mailing list of creditors sub	omitted via:					
	(a) computer d	liskette					
	(b) scannable l (number of sheets submitt	1.0					
	(c) X electronic ven	rsion filed via CM/ECF					
Date:	June 2, 2010	/s/ /s/ Hugo Arrieta					
Date.	Julie 2, 2010	/s/ Hugo Arrieta/Presider	nt				
		Signer/Title	п				
Date:	June 2, 2010	/s/ Elizabeth M. Atkins, E	squire DCID				
		Signature of Attorney					
			Elizabeth M. Atkins, Esquire DCID #4436 Elizabeth M. Atkins, Esquire				
		778 St. Andrews Blvd.	uire				
		Charleston, SC 29407					
		843-763-0333					
		Typed/Printed Name/Adda	ess/Telephone				

#4436

District Court I.D. Number

ALSCO ATTORNEY OR MANAGER 4921 CHATEAU AVENUE NORTH CHARLESTON SC 29405

ATTORNEY GENERAL OF US
CIVIL DIVISION, BANKRUPTCY SECTION
U.S. DEPARTMENT OF JUSTICE
WASHINGTON DC 20530

BEAUFORT COUNTY TAX COLLECTOR PO BOX 487 BEAUFORT SC 29901

BOSLEY MA
ATTORNEY OR MANAGER
PO BOX 7634
HILTON HEAD ISLAND SC 29938

CAROLINA FIRST ATTORNEY OR MANAGER PO BOX 100201 COLUMBIA SC 29202

COASTAL STATES BANK
ATTORNEY OR MANAGER
PO BOX 4800
HILTON HEAD ISLAND SC 29938

ELIZABETH M. ATKINS 778 ST. ANDREWS BLVD. CHARLESTON SC 29407

HARGRAY
ATTORNEY OR MANAGER
856 WM HILTON PKWY
HILTON HEAD ISLAND SC 29938

IFH
ATTORNEY OR MANAGER
PO BOX 60163
CHARLOTTE NC 28260

INTERNAL REVENUE SERVICE PO BOX 21126 PHILADELPHIA PA 19114 OCEAN DRIVE ELECTRIC ATTORNEY OR MANAGER PO BOX 1600 RIDGELAND SC 29936

PALMETTO ELECTRIC COOPERATIVE ATTORNEY OR MANAGER PO BOX 23619 HILTON HEAD ISLAND SC 29925

RAPID ADVANCE ATTORNEY OR MANAGER 7316 WISCONSIN AVENUE SUITE 350 BETHESDA MD 20814

RUSSELL PATTERSON, ESQUIRE FOR: COASTAL STATES BANK PO DRAWER 8047 HILTON HEAD ISLAND SC 29938

SC BANK & TRUST ATTORNEY OR MANAGER 520 GERVAIS STREET COLUMBIA SC 29201

SC DEPT OF REV & TAX PO BOX 12265 COLUMBIA SC 29211

SC EMPLOYMENT SEC COM PO BOX 995 COLUMBIA SC 29202

SECURITIES AND EXCHANGE COMMISSION 3475 LENOX RD. NE SUITE 500 ATLANTA GA 30366

TOWN OF HILTON HEAD ATTORNEY OR MANAGER 1 TOWN CIRCLE HILTON HEAD ISLAND SC 29928 US ATTORNEY FOR SC FOR IRS ATTN.: DOUGLAS BARNETT 1441 MAIN STREET, SUITE 500 COLUMBIA SC 29201

US FOODS ATTORNEY OR MANAGER PO BOX 869 LEXINGTON SC 29071

US TRUSTEE 1835 ASSEMBLY STREET, SUITE 953 COLUMBIA SC 29201

VERIZON WIRELESS ATTORNEY OR MANAGER PO BOX 3397 BLOOMINGTON IL 61702 Case 10-03901-dd Doc 1 Filed 06/02/10 Entered 06/02/10 10:37:46 Desc Main Document Page 11 of 11

United States Bankruptcy Court District of South Carolina

In re	Mendoza Ventures, LLC		Case No.	
		Debtor(s)	Chapter 11	
	CORPORAT	ΓΕ OWNERSHIP STATEMENT	(RULE 7007.1)	
or reco	ant to Federal Rule of Bankruptcy Pusal, the undersigned counsel for	Mendoza Ventures, LLC in the above han the debtor or a governmental ur	e captioned action, certificate, that directly or indirect	es that the ly own(s) 10% or
■ Noi	ne [Check if applicable]			
June	2, 2010	/s/ Elizabeth M. Atkins, Esquire	DCID	
Date	-,	Elizabeth M. Atkins, Esquire DO		
2		Signature of Attorney or Litig		
		Counsel for Mendoza Ventur	es, LLC	
		Elizabeth M. Atkins, Esquire		
		778 St. Andrews Blvd. Charleston, SC 29407		
		843-763-0333		