

Fill in this information to identify the case:

United States Bankruptcy Court for the:
SOUTHERN DISTRICT OF TEXAS

Case number (if known): _____ Chapter 11

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

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

1. Debtor's name Third Coast Industrial Coatings, Inc

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 03 - 03 8 2 1 4 9

4. Debtor's address **Principal place of business** **Mailing address, if different from principal place of business**

211 Main Street
 Number Street

 Number Street

 P.O. Box

South Houston TX 77587
 City State ZIP Code

 City State ZIP Code

Harris
 County

Location of principal assets, if different from principal place of business

 Number Street

 City State ZIP Code

5. Debtor's website (URL) _____

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

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply:

- Tax-exempt entity (as described in 26 U.S.C. § 501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>

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

Check one:

- Chapter 7
- Chapter 9
- Chapter 11.

Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy Under Chapter 11 (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

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

No

- Yes. District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

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

No

Yes. Debtor _____ Relationship _____
 District _____ When _____
 Case number, if known _____ MM / DD / YYYY

Debtor _____ Relationship _____
 District _____ When _____
 Case number, if known _____ MM / DD / YYYY

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

11. Why is the case filed in this district?

Check all that apply:

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

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

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

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____

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

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

Other _____

Where is the property?

Number _____ Street _____

City _____ State _____ ZIP Code _____

Is the property insured?

No

Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

Funds will be available for distribution to unsecured creditors.

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

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

- 14. Estimated number of creditors**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
- 15. Estimated assets**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
- 16. Estimated liabilities**
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

- 17. Declaration and signature of authorized representative of debtor**
- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
 - I have been authorized to file this petition on behalf of the debtor.
 - I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 01/03/2017
MM / DD / YYYY

X /s/ Felipe Antonio Ibarra Felipe Antonio Ibarra
Signature of authorized representative of debtor Printed name

Title President

18. Signature of attorney **X /s/ Nelson M. Jones III** Date 01/03/2017
Signature of attorney for debtor MM / DD / YYYY

Nelson M. Jones III
Printed name

LAW OFFICE OF NELSON M. JONES III
Firm name

440 Louisiana
Number Street

Suite 1575

Houston **TX** **77002**
City State ZIP Code

(713) 236-8736 **Njoneslawfirm@aol.com**
Contact phone Email address

10973400 _____
Bar number State

Fill in this information to identify the case:

Debtor	<u>Third Coast Industrial Coatings, Inc</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	_____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
- Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

Debtor

Third Coast Industrial Coatings, Inc

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>		Amount of claim
	<u>Amegy Bank</u>	<input type="checkbox"/> Contingent		<u>\$6,893.74</u>
	<u>1717 West Loop South</u>	<input type="checkbox"/> Unliquidated		
	<u>Houston TX 77054</u>	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred _____	Basis for the claim:		
	Last 4 digits of account number _____	<u>Unsecured Debt</u>		
		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>		Amount of claim
	<u>Bank of America</u>	<input type="checkbox"/> Contingent		<u>\$22,372.14</u>
	<u>PO Box 982238</u>	<input type="checkbox"/> Unliquidated		
	<u>El Paso TX 79998-5796</u>	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred _____	Basis for the claim:		
	Last 4 digits of account number _____	<u>Unsecured Debt</u>		
		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>		Amount of claim
	<u>Bank of America</u>	<input type="checkbox"/> Contingent		<u>\$15,454.50</u>
	<u>PO Box 982238</u>	<input type="checkbox"/> Unliquidated		
	<u>El Paso TX 79998-5796</u>	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred _____	Basis for the claim:		
	Last 4 digits of account number _____	<u>Unsecured Debt</u>		
		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>		Amount of claim
	<u>Bank of America</u>	<input type="checkbox"/> Contingent		<u>\$21,575.15</u>
	<u>PO Box 982238</u>	<input type="checkbox"/> Unliquidated		
	<u>El Paso TX 79998-5796</u>	<input type="checkbox"/> Disputed		
	Date or dates debt was incurred _____	Basis for the claim:		
	Last 4 digits of account number _____	<u>Unsecured Debt</u>		
		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	<u>Bank of America</u>	<i>Check all that apply.</i>	<u>\$7,744.91</u>
	<u>PO Box 982238</u>	<input type="checkbox"/> Contingent	
	_____	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>El Paso TX 79998-5796</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Unsecured Debt</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	<u>CFS Allocation Solutions IV, LLC</u>	<i>Check all that apply.</i>	<u>\$198,068.97</u>
	<u>Corporation Trust Center</u>	<input type="checkbox"/> Contingent	
	<u>1209 Orange St.</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Wilmington DE 19801</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Judgment</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	<u>Chase</u>	<i>Check all that apply.</i>	<u>\$9,638.36</u>
	<u>PO Box 94014</u>	<input type="checkbox"/> Contingent	
	_____	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Palatine IL 60094-4014</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Unsecured Debt</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	<u>Chase</u>	<i>Check all that apply.</i>	<u>\$9,897.62</u>
	<u>PO Box 94014</u>	<input type="checkbox"/> Contingent	
	_____	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Palatine IL 60094-4014</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Unsecured Debt</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$27,332.27
	Chase	<input type="checkbox"/> Contingent	
	PO Box 94014	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Palatine IL 60094-4014	Basis for the claim: Unsecured Debt	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$14,024.05
	Chase	<input type="checkbox"/> Contingent	
	PO Box 78039	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Phoenix AZ 85062-8039	Basis for the claim: Unsecured Debt	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$16,369.46
	Compass Bank	<input type="checkbox"/> Contingent	
	PO Box 11830	<input type="checkbox"/> Unliquidated	
	Birmingham, AL 3502	<input type="checkbox"/> Disputed	
		Basis for the claim: Unsecured Debt	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$22,795.50
	Funding Metrics Lendini	<input type="checkbox"/> Contingent	
	884 Town Center Drive	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Langhorne PA 19047	Basis for the claim: Loan	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.13	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$498,111.15
	Funding Metrics Lendini	<input type="checkbox"/> Contingent	
	884 Town Center Drive	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	Langhorne PA 19047	Loan	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number ____ _	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.14	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$88,755.51
	Great Plains Capital Corporation	<input type="checkbox"/> Contingent	
	Po Box 1068	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	Columbus NE 68602-1068	Unsecured Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number ____ _	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.15	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$24,011.60
	Quarterspot, Inc.	<input type="checkbox"/> Contingent	
	4601 N. Fairfax Dr.	<input type="checkbox"/> Unliquidated	
	Suite 1120	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	Arlington VA 22203	Unsecured Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number ____ _	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.16	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$16,061.56
	Regions Bank	<input type="checkbox"/> Contingent	
	Po Box 2224	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	Birmingham AL 35246-0026	Unsecured Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number ____ _	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$177,566.61</u>
	<u>Regions Bank</u>	<input type="checkbox"/> Contingent	
	<u>Po Box 2224</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Birmingham AL 35246-0026</u>	<u>Unsecured Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.18	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$17,618.14</u>
	<u>Wells Fargo</u>	<input type="checkbox"/> Contingent	
	<u>P.O. BOX 348750</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Sacramento CA 95834</u>	<u>Unsecured Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Third Coast Industrial Coatings, Inc Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$0.00

5b. Total claims from Part 2 5b. + \$1,194,291.24

5c. Total of Parts 1 and 2 5c. \$1,194,291.24
 Lines 5a + 5b = 5c.