

Fill in this information to identify the case:

Debtor 1 Body Contour Ventures, LLC
Debtor 2 _____
(Spouse, if filing) _____
United States Bankruptcy Court Eastern District of Michigan
Case number: 19-42510

FILED

U.S. Bankruptcy Court
Eastern District of Michigan

4/8/2019

Katherine B. Gullo, Clerk

**Official Form 410
Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Woodward Retail, LLC c/o Yaldo Law, PLLC</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Woodward Retail, LLC c/o Yaldo Law, PLLC</u> Name 500 S. Old Woodward Second Floor Birmingham, MI 48009 Birmingham, MI 48009 Contact phone <u>2486455300</u> Contact email <u>scott@valdolaw.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) _____ Name _____ Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Official Form 410

Proof of Claim

page 1

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim?	<div style="display: flex; justify-content: space-between;"><div>\$ 140924.41</div><div>Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).</div></div>
8. What is the basis of the claim?	<p>Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as healthcare information.</p> <p>Default Judgment in the Oakland County Circuit Court of Michigan</p>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property.</div> <div>Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</div> <div>Basis for perfection: _____</div> <div>Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)</div> <div><div>Value of property:</div><div>\$ _____</div><div>Amount of the claim that is secured:</div><div>\$ _____</div><div>Amount of the claim that is unsecured:</div><div>\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</div></div> <div><div>Amount necessary to cure any default as of the date of the petition:</div><div>\$ _____</div><div>Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ 140924.41</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____</div>

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u> </u>) that applies	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.		

Part 3: Sign Below

<p>The person completing this proof of claim must sign and date it. FRBP 9011(b).</p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p>A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157 and 3571.</p>	<p>Check the appropriate box:</p> <p><input type="checkbox"/> I am the creditor.</p> <p><input checked="" type="checkbox"/> I am the creditor's attorney or authorized agent.</p> <p><input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.</p> <p><input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.</p> <p>I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>4/8/2019</u></p> <p style="text-align: center;">MM / DD / YYYY</p> <p><u>/s/ Scott S. Yaldo</u></p> <p>Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <table style="width: 100%;"> <tr> <td style="width: 20%;">Name</td> <td>Scott S. Yaldo</td> </tr> <tr> <td></td> <td>First name Middle name Last name</td> </tr> <tr> <td>Title</td> <td>Attorney</td> </tr> <tr> <td>Company</td> <td>Yaldo Law, PLLC</td> </tr> <tr> <td>Address</td> <td> Identify the corporate servicer as the company if the authorized agent is a servicer 500 S. Old Woodward, Second Floor Number Street Birmingham, MI 48009 City State ZIP Code </td> </tr> <tr> <td>Contact phone</td> <td>2486455300</td> </tr> <tr> <td>Email</td> <td>scott@yaldolaw.com</td> </tr> </table>	Name	Scott S. Yaldo		First name Middle name Last name	Title	Attorney	Company	Yaldo Law, PLLC	Address	Identify the corporate servicer as the company if the authorized agent is a servicer 500 S. Old Woodward, Second Floor Number Street Birmingham, MI 48009 City State ZIP Code	Contact phone	2486455300	Email	scott@yaldolaw.com
Name	Scott S. Yaldo														
	First name Middle name Last name														
Title	Attorney														
Company	Yaldo Law, PLLC														
Address	Identify the corporate servicer as the company if the authorized agent is a servicer 500 S. Old Woodward, Second Floor Number Street Birmingham, MI 48009 City State ZIP Code														
Contact phone	2486455300														
Email	scott@yaldolaw.com														

Approved, SCAO

DJM

STATE OF MICHIGAN
JUDICIAL DISTRICT
JUDICIAL CIRCUITDEFAULT REQUEST, AFFIDAVIT,
ENTRY, AND JUDGMENT
(SUM CERTAIN)

CASE NO.

2018-169230-CK

6th

Court address

Court telephone no.

1200 Telegraph Rd., Pontiac, MI 48340

248-858-0344

Plaintiff name, address, and telephone no.

WOODWARD RETAIL, LLC,
c/o Yaldo Law, PLLC,
500 S. Old Woodward, 2nd Flr.,
Birmingham, MI 48009
(248) 645-5300

Plaintiff's attorney, bar no., address, and telephone no.

Yaldo Law, PLLC
Scott S. Yaldo (P51245)
500 S. Old Woodward, 2nd Flr.,
Birmingham, MI 48009
(248) 645-5300

Defendant name, address, and telephone no.

LRX BIRMINGHAM, LLC
and BODY CONTOUR VENTURES, LLC
33466 Woodward Ave., Birmingham, MI 48009
(248) 579-6772

Defendant's attorney, bar no., address, and telephone no.

USE NOTE: Plaintiff must complete the Request and Affidavit and the Default Judgment before filing with the court.

REQUEST AND AFFIDAVIT

- I request a default entry against LRX BIRMINGHAM, LLC, and BODY CONTOUR VENTURES, LLC for failure to appear.
- The claim against the defaulted party is for a sum certain or for a sum, which by computation can be made certain. I request judgment for: Damages: \$ 151,504.40 Costs: \$ 235.00 Attorney fee/Other: \$ _____ Total judgment: \$ 151,739.40
- The amount requested for damages is not greater than the amount stated in the complaint.
- The defaulted party is not an infant or incompetent person.
- ☐ It is unknown whether the defaulted party is in the military service. ☒ The defaulted party is not in the military service.
☐ The defaulted party is in the military but there has been notice of pendency of the action and adequate time and opportunity to appear and defend has been provided. Attached, as appropriate, is a waiver of rights and protections provided under the Servicemembers Civil Relief Act. Facts upon which this conclusion is based are: (specify)
- This affidavit is made on my personal knowledge and, if sworn as a witness, I can testify competently to the facts in this affidavit.

Applicant/Attorney signature

(P51245)

Bar no.

Subscribed and sworn to before me on 11/14/2018

Date

Oakland

County, Michigan.

My commission expires: 1/21/2021

Date

Signature: _____

Deputy court clerk/Notary public

Notary public, State of Michigan, County of Oakland**DEFAULT ENTRY** The default of the party named above for failure to appear is entered.11/14/2018

Date

Lisa Brown

Court clerk /s/ D. Teller

DEFAULT JUDGMENT IT IS ORDERED this judgment is granted in favor of the plaintiff(s) as follows.

*Attach bill of costs if statutory limit is exceeded.

Damages: \$ 151,504.40 Costs: \$ 235.00 Attorney fee/Other: \$ _____ Total judgment: \$ 151,739.40

This judgment will earn interest at statutory rates, computed from the filing date of the complaint.

Judgment interest accrued thus far is \$ _____ and is based on: If needed, attach separate sheet.

- ☐ the statutory rate of _____ % from _____ to _____
- ☐ the statutory 6-month rate(s) of _____ % from _____ to _____

11/14/2018

BY CLERK

Lisa Brown

Date

Court clerk/Judge /s/ D. Teller

The judgment has been entered and will be final unless, within 21 days of the default judgment date, a motion to set aside the default is filed.

CERTIFICATE OF MAILING I certify that on this date I served a copy of this default entry and judgment on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature

MCL 32.517, MCL 600.2441, MCL 600.5759, MCL 600.6013,
MCR 2.603(B)(2), 50 USC 521

MC 07a (12/12) DEFAULT REQUEST, AFFIDAVIT, ENTRY, AND JUDGMENT (SUM CERTAIN)

Eastern District of Michigan Claims Register

[19-42510-pjs Body Contour Ventures, LLC](#)

Judge: Phillip J Shefferly

Chapter: 11

Office: Detroit

Last Date to file claims: 07/01/2019

Trustee:

Last Date to file (Govt): 09/30/2019

Creditor: (25883311)

Claim No: 43

Status:

Woodward Retail, LLC c/o

Original Filed

Filed by: CR

Yaldo Law, PLLC

Date: 04/08/2019

Entered by: ePOC

500 S. Old Woodward

Original Entered

Modified:

Second Floor

Date: 04/08/2019

Birmingham, MI 48009

Birmingham, MI 48009

Amount claimed: \$140924.41

History:

[Details](#) [43-1](#) 04/08/2019 Claim #43 filed by Woodward Retail, LLC c/o Yaldo Law, PLLC, Amount claimed: \$140924.41 (ePOC)

Description:

Remarks:

Claims Register Summary

Case Name: Body Contour Ventures, LLC

Case Number: 19-42510-pjs

Chapter: 11

Date Filed: 02/22/2019

Total Number Of Claims: 1

Total Amount Claimed*	\$140924.41
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured		
Priority		
Administrative		