

Fill in this information to identify the case:

Debtor 1 Limetree Bay Refining, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of Texas, Houston Division

Case number 21-32354

E-Filed on 09/01/2021
Claim # 53

Official Form 410

Proof of Claim

04/19

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?** Rocco Colabella
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?** No
 Yes. From whom? _____

	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>Rocco Colabella</u> Name	_____ Name
	<u>13035 Royal George Ave</u> Number Street	_____ Number Street
	<u>Odessa</u> <u>FL</u> <u>33556</u> City State ZIP Code	_____ City State ZIP Code
	Contact phone <u>(813) 470-8744</u>	Contact phone _____
	Contact email <u>rockstx@gmail.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	

4. **Does this claim amend one already filed?** No
 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?** No
 Yes. Who made the earlier filing? _____

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? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 1,360.00. Does this amount include interest or other charges?
 No
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? 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 health care information.
Services Performed

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: _____
Basis for perfection: _____
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.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
 Fixed
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ 0.00

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

Wages, salaries, or commissions (up to \$13,650*) 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).

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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.

I have examined the information in this *Proof of Claim* 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 date 09/01/2021
MM / DD / YYYY

Rocco Colabella

Signature

Print the name of the person who is completing and signing this claim:

Name Rocco Colabella
First name Middle name Last name

Title Consultant

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____
Number Street

City State ZIP Code

Contact phone _____ Email _____

Attachment 1 - Invoice 155 June 2021 Refinery.pdf

Description -

INVOICE

Rocco Colabella Consulting Services

13035 Royal George Ave
Odessa, Florida 33556

INVOICE NO. 155
DATE July 2, 2021
CUSTOMER ID LIMETREE

TO Limetree Bay Refining, LLC
1 Estate Hope
Christiansted, VI 00820

PAYMENT TERMS	DUE DATE	Purchase Order
Net 10 Days	July 12, 2021	4700001036

Item	DESCRIPTION	UNIT PRICE	LINE TOTAL
	Refinery Related Services		
1	June 2021 Compensation (see attached)		\$ 1,360.00
			\$ -
	See attached for allocation of costs		
SUBTOTAL			\$ 1,360.00
SALES TAX			
TOTAL			\$ 1,360.00

Please Remit to Designated Account
THANK YOU FOR YOUR BUSINESS!

Attachment 2 - 4700001036 Rocco Colabella _ Refining _ LTR-169 Rev 9.pdf

Description -

Limetree Bay Refining, LLC
 1 Estate Hope, Christiansted
 Christiansted, VI 00820-5652

PURCHASE ORDER
4700001036

VENDOR: ROCCO COLABELLA
13035 ROYAL GEORGE AVENUE
ODESSA, FL 33556
USA

BUYER: Mary Thomas
340-692-3409
mthomas@lbenergy.com

VENDOR ID: 70000768

SEND ALL INVOICES TO:
LBENERGYINVOICECAPTURE@CONCURSOLUTIONS.COM

INVOICE TO: Limetree Bay Refining, LLC
C/O Concur Invoice Capture
10700 Prairie Lakes Drive
Eden Prairie, MN 55344

SHIPPING TERMS:

DATE OF ORDER	SHIPPING INSTRUCTIONS	DELIVERY DATE
05/04/2021		12/31/2019
ALL INVOICES, SHIPPING PAPERS AND PACKAGES SHALL BE MARKED "FOR EXPORT-ULTIMATE DESTINATION, ST.CROIX, U.S.VIRGIN ISLANDS. THE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES, SHIPPING PAPERS, PACKAGES AND CORRESPONDENCE.		
Consultant Agreement LTR-169; Reports To Forgan McIntosh 9/1/2020 PO coding correction per Jesus Duran. See attached spreadsheet. C Munke		

Item No.	Material No.	Material / Service Description	QTY	UOM	Unit Price	Line Total
40		05/07: supplement for DEC	84000	EA	\$ 1.00	\$ 84,000.00
60		08/06: Increase Code Correction	29000	EA	\$ 1.00	\$ 29,000.00
70		11/16: Increase- Procurement Consultant covers through December 2020	16500	EA	\$ 1.00	\$ 16,500.00
90		12.10 supplement	16500	EA	\$ 1.00	\$ 16,500.00
100		01/15 increase Estimated to cover Jan and Feb 2021	20000	EA	\$ 1.00	\$ 20,000.00
110		03.25.21 increase Estimated to cover March, April 2021	4000	EA	\$ 1.00	\$ 4,000.00
120		05.04.21 increase Estimated to cover May and June 2021	8115	EA	\$ 1.00	\$ 8,115.00
TOTAL						\$ 178,115.00

OTHER CONDITIONS:

THE ATTACHED PURCHASE ORDER TERMS AND CONDITIONS ARE INCORPORATED IN THIS PURCHASE ORDER.VENDOR MUST ACCURATELY COMPLETE ALL CUSTOMS FORMS AND INCLUDE COUNTRY OF ORIGIN WHICH IS THE COUNTRY WHERE GOODS ARE MANUFACTURED OR PROCESSED.