

UNITED STATES BANKRUPTCY COURT _____ DISTRICT OF Delaware **PROOF OF CLAIM**

Name of Debtor:
STREAMRAY STUDIOS, INC.

Case Number:

13-12435

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):
NBP PARTNERS I, LLC

Name and address where notices should be sent:
Dustin P. Branch, Esq.
Katten Muchin Rosenman LLP
2029 Century Park East, 26th Floor
Los Angeles, CA 90067
Telephone number: (310) 788-4400 email: dustin.branch@kattenlaw.com

COURT USE ONLY
 Check this box if this claim amends a previously filed claim.
Court Claim Number: _____
(If known)
Filed on: _____

Name and address where payment should be sent (if different from above):

Telephone number: _____ email: _____

Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

RECEIVED

1. Amount of Claim as of Date Case Filed: \$ 4,158.10 **NOV 12 2013**

If all or part of the claim is secured, complete item 4.
If all or part of the claim is entitled to priority, complete item 5.
 Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

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2. Basis for Claim: Real Property Lease
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:

3a. Debtor may have scheduled account as:

(See instruction #3a)

3b. Uniform Claim Identifier (optional):

(See instruction #3b)

4. Secured Claim (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.
Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:
Value of Property: \$ _____
Annual Interest Rate _____ % Fixed or Variable (when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____
Basis for perfection: _____
Amount of Secured Claim: \$ _____
Amount Unsecured: \$ _____

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.
 Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507 (a)(4). Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).
 Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8). Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(2).
Amount entitled to priority: \$ 2,177.61**

*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See inst

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7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain: ****This amount is entitled to administrative expense priority pursuant to 11 U.S.C. Sections 503(b) and/or 365 (d) (3)**

8. Signature: (See instruction #8)

Check the appropriate box.

I am the creditor. I am the creditor's authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.) (See Bankruptcy Rule 3004.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Dustin P. Branch, Esq.
 Title: _____
 Company: Katten Muchin Rosenman LLP
 Address and telephone number (if different from notice address above): _____

 11/11/13
 (Signature) (Date)

Telephone number: _____ email: _____

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the

claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

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.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

PROOF OF CLAIM ATTACHMENT

CASE NAME: STREAMRAY STUDIOS, INC. **LOCATION:** Northridge Business Park II
CASE NUMBER: 13-12435

A. General Information:

1. Landlord Name: NBP Partners I, LLC
2. Property Location: Northridge Business Park II
3. Tenant Name: Streamray Studios, Inc.
4. Debtor's Store No: Unknown Remaining term: 7.4 months
5. Petition Date: 9/17/2013
6. Lease Exp. Date: 4/30/2014
7. Lease Rej. Date: n/a

B. Claim Information:

	<u>Rent & Charges</u>	<u>Interest</u>	<u>Totals</u>
1. Unsecured Non-Priority Rejection Claim Amount: (Section 502(b)(6)(A))	\$0.00	n/a	\$0.00
2. Unsecured Non-Priority Pre-Petition Claim Amount: (Section 502(b)(6)(B))	\$1,970.00	\$10.49	\$1,980.49
Subtotal Unsecured Claims	\$1,970.00	\$10.49 ¹	\$1,980.49
3. Administrative Post-Petition Priority Claim Amount: (Section 503(b)(1)(A), 365(d)(3))	\$175.00	\$2.61	\$177.61
4. Attorneys' Fees ³	\$2,000.00	n/a	\$2,000.00
Subtotal Administrative Claims	\$2,175.00	\$2.61 ²	\$2,177.61
TOTAL CLAIM AMOUNT			<u><u>\$4,158.10</u></u>

¹ Interest calculated at 10.% through 09/16/13, based on a 360 day year.

² Interest calculated at 10.% through 11/13/13, (the Claims Bar Date) based on a 360 day year.

³ Attorneys' Fees include billed and unbilled charges through 11/13/13.

⁴ Claimant reserves the right to supplement or amend this claim from time to time and at any time hereafter.

CAROLE R. LEVINE
carole.levine@kattenlaw.com
310.788.4608 direct
310.712.8490 fax
203280-00001

November 11, 2013

Via Federal Express

BMC Group, Inc.
Attn: Friend Finder Networks Claims
Processing
18675 Lake Drive East
Chanhassen, MN 55317

**Re: Streamray Studios, Inc.
Case No. 13-12435**

Dear Sir:

Enclosed for filing is an original and one copy of a Proof of Claim regarding the above-entitled matter. Also enclosed is an extra copy of the claim which needs to be conformed and returned to us in the enclosed, postage prepaid envelope.

Thank you for your assistance in this matter, and should you have any questions, please call Carole Levine at (310) 788-4608.

Very truly yours,



Carole R. Levine
Legal Assistant

CRL:cs

Enclosures

2029 Century Park East Suite 2600 Los Angeles, CA 90067-3012 310-788.4400 tel 310-788.4471 fax		<h1>Katten</h1> KattenMuchinRosenman LLP	
FedEx: <input type="checkbox"/> First by 8:00 a.m. <input type="checkbox"/> Priority by 10:30 <input checked="" type="checkbox"/> Standard Air by 5:00 <input type="checkbox"/> Economy 2-day <input type="checkbox"/> Express Saver <input type="checkbox"/> Saturday Delivery <input type="checkbox"/> Residential Delivery			
Recipient's Name · Friend Finder Networks Claims			
Company · BMC Group, Inc.		Suite/Floor	
Street Address · 18675 Lake Drive East			
City, State · Chanhassen, MN		ZIP · 55317	
Recipient's Phone Number/Comments			

Sender · Carole R. Levine	
Client Number · 203280-00001	Date · 11/11/13
801470	

Do not seal top head strip.

Shipping Copy Place in Plastic Pouch

From: (310) 778-4400 Origin ID: CIBA
Carole Levine
KATTEN MUCHIN ROSENMAN LLP
2029 CENTURY PARK EAST, STE 2600

LOS ANGELES, CA 90067



Ship Date: 11NOV13
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CAD: 103180846/WSXI2750

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BMC GROUP

SHIP TO: (310) 788-4637 **BILL SENDER**
Friend Finder Networks Claims
BMC Group, Inc.
18675 Lake Dr E

Chanhassen, MN 55317

Ref # 203280.00001-33878
Invoice #
PO #
Dept #

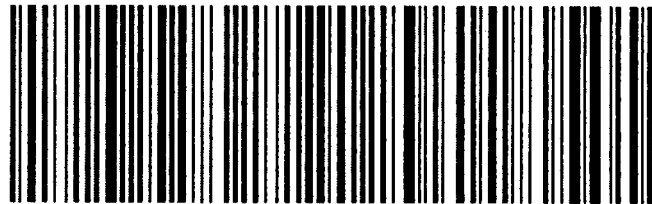
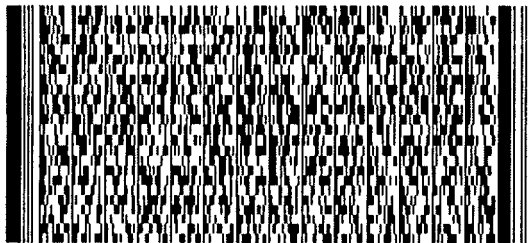
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FOLD on this line and place in shipping pouch with **bar code and delivery address** visible

1. Fold the first printed page in half and use as the shipping label.
2. Place the label in a waybill pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.
3. Keep the second page as a receipt for your records. The receipt contains the terms and conditions of shipping and information useful for tracking your package.