United States Bankrupcty Court for the District of Delaware Fill in this information to identify the case: (Select only one Debtor per claim form):	
 Sugarfina, Inc. (Case No. 19-11973) Sugarfina International, LLC (Case No. 19-11974) Sugarfina (Canada), Ltd. (Case No. 19-11975) 	RECEIVED FEB 2 1 2020 BMC GROUP
Modified Form 410 Proof of Claim	If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again. THIS SPACE IS FOR COURT USE ONLY 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?	Global Apogee Name of the current creditor (the person or entity to paid for this claim) Other name the creditor used with the debtor					
2. Has this claim been acquired from someone else?	No Yes. From whom?					
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)				
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Global Apogee ^{Name} 30 N Gould Suite 4000	Name				
	Number Street Sheridan WY 82801	Number Street				
	City State ZIP Code Contact phone 858-952-0856 Contact email operations@candygram.com	City State ZIP Code Contact phone 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?					
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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?	Subset Subset State				
8. What is the basis of the claim?	ples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). lisclosing information that is entitled to privacy, such as health care information. nark Infringement & Related Claims Case 2:18-cv-05162-RSWL-E US District Court Central District of CA				
9. Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property:				
10. Is this claim based on a lease?	No Yes. Amount necessary to cure any default as of the date of the petition.				
11. Is this claim subject to a right of setoff?	No Yes. Identify the property:				

Part 2: Give information about the Claim as of the Date the Case Was Filed

12. Is all or part of the claim entitled to priority under	No	
11 U.S.C. § 507(a)?	Yes. Check all that apply:	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.	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 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.	\$
	* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after	er the date of adjustment.

Part 3: Sign Below

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The person completing this proof of claim must	Check the appr	opriate box:					
sign and date it. FRBP 9011(b).	I am the creditor.						
If you file this claim	I am the creditor's attorney or authorized agent.						
electronically, FRBP 5005(a)(2) authorizes courts	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.						
to establish local rules specifying what a signature	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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.						
A person who files a fraudulent claim could be fined up to \$500,000,							
imprisoned for up to 5	I declare under penalty of perjury that the foregoing is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	02/18/2020						
3571.	and Executed on date 02/10/2020 MM / DD / YYYY MMWWW						
	Signature						
	Print the name of the person who is completing and signing this claim:						
	Name	Marian		Mey			
		First name	Middle name	Last na	ame		
	Title	CEO					
	Company	Global Apogee					
	Company GIODAI Apogee Identify the corporate servicer as the company if the authorized agent is a servicer.						
		30 N Gould Suite 4000					
	Address	Number Street					
		Sheridan		WY	82801		
		City		State	ZIP Code		
	Contact phone	702-242-8000	Email O	Email operations@candygram.com			

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