

Fill in this information to identify the case:

Debtor 1 <u>CB Theater Experience LLC</u>
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court <u>Southern District of Florida</u>
Case number: <u>20-14699</u>

FILED
 U.S. Bankruptcy Court
 Southern District of Florida
 7/6/2020
 Joseph Falzone, Clerk

**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?	<u>Worldpay, LLC</u>	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	<u>Vantiv, FIS</u>
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?	Where should payments to the creditor be sent? (if different)
	<u>Worldpay, LLC</u>	_____
	Name	Name
	<u>8500 Governors Hill Dr Symmes Township, OH 45249-1384</u>	_____
	Contact phone <u>678-587-1291</u>	Contact phone _____
	Contact email <u>Melissae.Andersen@fisglobal.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?	<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? _____	

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

<p>6. Do you have any number you use to identify the debtor?</p>	<p><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: _____</p>
<p>7. How much is the claim?</p>	<p>\$ <u>40983.02</u></p> <p>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).</p>
<p>8. What is the basis of the claim?</p>	<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><u>Merchant credit card processing</u></p>
<p>9. Is all or part of the claim secured?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property.</p> <p>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: _____</p> <p>Basis for perfection: _____</p> <p>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.)</p> <p>Value of property: \$ _____</p> <p>Amount of the claim that is secured: \$ _____</p> <p>Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</p> <p>Amount necessary to cure any default as of the date of the petition: \$ _____</p> <p>Annual Interest Rate (when case was filed) _____ %</p> <p><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</p>
<p>10. Is this claim based on a lease?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</p>
<p>11. Is this claim subject to a right of setoff?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____</p>

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 \$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).	\$ _____
	<input type="checkbox"/> 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).	\$ _____
	<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)(_) that applies	\$ _____
* Amounts are subject to adjustment on 4/1/22 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 7/6/2020
MM / DD / YYYY

/s/ Melissae Andersen

Signature

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

Name Melissae Andersen

First name Middle name Last name

Title Senior Credit Risk Manager

Company Worldpay by FIS

Identify the corporate servicer as the company if the authorized agent is a servicer

Address 201 17th St NW #1000

Number Street

Atlanta, GA 30363

City State ZIP Code

Contact phone 678-587-1291 Email Melissae.Andersen@fisglobal.com

Worldpay by FIS provides card merchant services (credit card processing) to Cinemex CB Theatre Experience LLC (merchant).

Please see below transaction history for each merchant chain and note the ACH reject totals, which comprise their outstanding balance.

COBB THEATRES III(76440455) 53:MPS 07/2019 To 07/2020
 Monthly Chain History

[More Tips](#) | [Show or Hide Columns](#)
NOTES
Save View

	mm/yyyy	Ach Rjt \$	Ach Rjt #	Chbk #	Chbk \$	Draft Ret. #	Draft Ret. \$	Rtn \$	Rtn #	Proc Vol.\$	Proc #	Auth #	Declined #	Declined %
	07/2019	\$0.00	0	70	\$2,477.26	0	\$0.00	\$22,905.28	1329	\$5,514,783.38	265601	260177	5096	1.92
	08/2019	\$0.00	0	105	\$3,898.32	1	\$15.85	\$12,058.38	683	\$3,160,213.90	158291	161086	2745	1.68
	09/2019	\$0.00	0	50	\$1,624.66	1	\$18.72	\$15,959.03	852	\$2,689,009.03	144494	140730	2614	1.82
	10/2019	\$0.00	0	58	\$2,478.87	0	\$0.00	\$17,496.36	900	\$3,170,451.38	168279	169039	2984	1.73
	11/2019	\$0.00	0	44	\$1,721.99	1	\$69.56	\$14,486.76	826	\$3,208,516.28	161850	169451	2897	1.68
	12/2019	\$0.00	0	46	\$1,939.66	0	\$0.00	\$17,750.66	962	\$4,032,216.85	188365	186773	3270	1.72
	01/2020	\$0.00	0	37	\$1,525.65	1	\$59.43	\$13,347.92	799	\$3,329,697.77	176104	173190	3075	1.74
	02/2020	\$0.00	0	38	\$1,473.17	0	\$0.00	\$9,399.60	523	\$2,419,021.96	125563	129387	2234	1.70
	03/2020	\$0.00	0	18	\$741.01	0	\$0.00	\$10,435.08	328	\$1,135,441.84	59340	51431	981	1.87
	04/2020	\$17,457.91	30	22	\$967.42	0	\$0.00	\$121.00	2	\$0.00	0	0	3	100.00
	05/2020	\$1,581.41	4	3	\$94.73	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0.00
	06/2020	\$0.00	0	0	\$0.00	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0.00
	07/2020	\$0.00	0	0	\$0.00	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0.00
Totals		\$19,039.32	34	491	\$18,942.74	4	\$163.56	\$133,958.07	7204	\$28,659,352.39	1447887	1441264	25899	1.77

COBB THEATRES IV(76447266) 53:MPS 07/2019 To 07/2020
 Monthly Chain History

[More Tips](#) | [Show or Hide Columns](#)
NOTES
Save View

	mm/yyyy	Ach Rjt \$	Ach Rjt #	Chbk \$	Chbk #	Draft Ret. #	Draft Ret. \$	Rtn \$	Rtn #	Proc Vol.\$	Proc #	Auth #	Total Auth #	Declined #	Declined %
	07/2019	\$0.00	0	\$20,851.95	304	9	\$755.97	\$98,220.23	3818	\$10,221,333	343636	342173	354305	12132	3.42
	08/2019	\$0.00	0	\$18,979.46	287	9	\$721.32	\$73,713.11	2780	\$6,601,287.6	223944	230748	238540	7792	3.27
	09/2019	\$0.00	0	\$11,407.81	169	6	\$737.70	\$69,114.48	2735	\$6,489,072.5	217606	216921	224353	7432	3.31
	10/2019	\$0.00	0	\$20,586.87	312	4	\$280.93	\$70,471.79	2607	\$7,323,948.1	249551	255388	264009	8621	3.27
	11/2019	\$0.00	0	\$16,049.44	242	4	\$339.02	\$79,685.02	2902	\$7,536,475.5	246666	265921	274455	8534	3.11
	12/2019	\$0.00	0	\$14,136.29	217	1	\$70.40	\$105,834.57	3657	\$10,549,349	318969	320379	329909	9530	2.89
	01/2020	\$0.00	0	\$13,449.10	211	4	\$430.06	\$76,599.32	2955	\$8,289,027.7	278832	279938	289069	9131	3.16
	02/2020	\$0.00	0	\$18,480.72	282	3	\$203.68	\$45,973.56	1754	\$6,052,140.7	196686	206207	212548	6341	2.98
	03/2020	\$0.00	0	\$10,242.25	151	8	\$448.16	\$32,433.71	1222	\$2,630,200.1	89345	77357	80072	2715	3.39
	04/2020	\$33,191.69	64	\$3,899.23	61	0	\$0.00	\$1,148.55	10	\$0.00	0	0	10	10	100.00
	05/2020	\$561.17	8	\$561.17	12	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0	0.00
	06/2020	\$0.00	0	\$143.84	2	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0	0.00
	07/2020	\$0.00	0	\$0.00	0	0	\$0.00	\$0.00	0	\$0.00	0	0	0	0	0.00
Totals		\$33,752.86	72	\$148,788.13	2250	48	\$3,987.24	\$653,194.34	24440	\$65,692,835	2165235	2195032	2267270	72238	3.19

Worldpay, LLC
 8500 Governors Hill Dr.
 Symmes Township, OH 45249-1384