

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____ Chapter 7

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Master Lending Group, LLC

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 20-3427148

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>440 Mall Blvd.</u> <u>Suite A</u> <u>Savannah, GA 31406</u> <small>Number, Street, City, State & ZIP Code</small>	<u>308 Megan Court</u> <u>Savannah, GA 31405</u> <small>P.O. Box, Number, Street, City, State & ZIP Code</small>
	<u>Chatham</u> <small>County</small>	Location of principal assets, if different from principal place of business _____ <small>Number, Street, City, State & ZIP Code</small>

5. Debtor's website (URL) _____

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: _____

Debtor **Master Lending Group, LLC**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9
- Chapter 11. Check all that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **Master Lending Group, LLC**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? No Yes.

List all cases. If more than 1, attach a separate list

Debtor _____ Relationship _____
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district? *Check all that apply:*
- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
 - A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? No Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? *(Check all that apply.)*

- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- It needs to be physically secured or protected from the weather.
- It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?

- No
- Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds *Check one:*
- Funds will be available for distribution to unsecured creditors.
 - After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|--|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input checked="" type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|---|--|

Debtor

Master Lending Group, LLC

Case number (if known)

Name

- \$50,001 - \$100,000
- \$100,001 - \$500,000
- \$500,001 - \$1 million

- \$10,000,001 - \$50 million
- \$50,000,001 - \$100 million
- \$100,000,001 - \$500 million

- \$1,000,000,001 - \$10 billion
- \$10,000,000,001 - \$50 billion
- More than \$50 billion

Debtor

Master Lending Group, LLC

Case number (if known)

Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition 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 July 6, 2023

MM / DD / YYYY

**X /s/ Gregory M. Hirsch (Via POA held by Judith
Hirsch)**

Signature of authorized representative of debtor

**Gregory M. Hirsch (Via POA held by Judith
Hirsch)**

Printed name

Title Owner

18. Signature of attorney

X /s/ Judson C. Hill

Signature of attorney for debtor

Date July 6, 2023

MM / DD / YYYY

Judson C. Hill 354277

Printed name

GASTIN & HILL

Firm name

**1020 DRAYTON STREET
SUITE 201
Savannah, GA 31401**

Number, Street, City, State & ZIP Code

Contact phone (912) 232-0203

Email address bankruptcy@gastinhill.com

354277 GA

Bar number and State

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule* _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 6, 2023

X /s/ Gregory M. Hirsch (Via POA held by Judith Hirsch)
Signature of individual signing on behalf of debtor

Gregory M. Hirsch (Via POA held by Judith Hirsch)
Printed name

Owner
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	
1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>6,070,100.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>6,070,100.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>		\$ <u>0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>0.00</u>	
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>42,966,950.00</u>	
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>42,966,950.00</u>	

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest
\$975,000.00

2. **Cash on hand**

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)
 Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account number

3.1. **Truist Bank**

Checking

6810

\$95,100.00

4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,070,100.00

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
 Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

Debtor Master Lending Group, LLC
Name

Case number (If known) _____

- No. Go to Part 5.
- Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
- Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
- Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
- Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- No. Go to Part 9.
- Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- No. Go to Part 10.
- Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 2701 Bull Street, Savannah GA 31401	Deed to Secure Debt & \$300,000 note executed by 2701 Bull Street, LLC in June 2018	Unknown		Unknown

Debtor Master Lending Group, LLC Case number (If known) _____
 Name

55.2. 10 West Victory Drive, Savannah GA 31405 Deed to Secure Debt & \$339,574 note executed by 10 West Victory LLC in June 2018 Unknown Unknown

55.3. 423 East River Street, Savannah GA 31401 Deed to Secure Debt and Note - Balance Unknown \$0.00 Unknown

56. **Total of Part 9.** **\$0.00**
 Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**
 No
 Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**
 No
 Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- No. Go to Part 11.
- Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**
 Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
- Yes Fill in the information below.

Current value of debtor's interest

71. **Notes receivable**
 Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**
 Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**
Unvested, Equitable Interest in Prudential Life Insurance Policy (Judith Hirsch, Beneficiary) \$5,000,000.00

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

Debtor Master Lending Group, LLC
Name

Case number *(If known)* _____

Breach of promissory note claims against Rison Advisory Group, LP; HCI Missouri Holdings Company, Inc; Idaho Home Care Holdings, Inc.; RTJ Real Estate Development, LTD; RDR Real Estate, LLC; Robin Deanne Riddle Children's Trust March 2009; Robin D. Riddle; William Riddle, Jr.

Balance @ \$16,000,000 as of June 2013 / present balance unknown.

Unknown

Nature of claim Unpaid debt arising from Revolving Loan Agreement executed June, 2011

Amount requested \$0.00

Breach of promissory note claims against Synergy Homes of Georgia, LLC; Synergy Homes of South Carolina, LLC & Affiliates; J. Read Brennan

Unknown

Nature of claim _____

Amount requested \$0.00

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$5,000,000.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- No
- Yes

Debtor Master Lending Group, LLC
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$1,070,100.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$5,000,000.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$6,070,100.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$6,070,100.00</u>

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F
Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
 Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Abe Klugman IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405-4000 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> Unknown
3.2	Nonpriority creditor's name and mailing address Adam Jacobowitz 16891-D Isle of Palms Drive Delray Beach, FL 33484 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> \$505,000.00
3.3	Nonpriority creditor's name and mailing address Alan Lipsitz 401 Wheeler Street Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> \$120,000.00
3.4	Nonpriority creditor's name and mailing address Albert Jacobowitz Irrevocable Trust c/o Michelle Jacobowitz, Trustee 16891-D Isle of Palms Drive Delray Beach, FL 33484 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> \$1,114,400.00

Debtor Name	Case number (if known)
Master Lending Group, LLC	
<p>3.5 Nonpriority creditor's name and mailing address Alter Yeshaya Slatus 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.6 Nonpriority creditor's name and mailing address Arlene G. Jaffie 6 Roundtree Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.7 Nonpriority creditor's name and mailing address Arlene Yellin IRA c/o Workmen's Circle CU 527 Stephenson Ave.,, Ste. 2 Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.8 Nonpriority creditor's name and mailing address Aronson Family Residence Trust 1 Diamond Causeway, Ste 21-308 Savannah, GA 31406 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$240,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.9 Nonpriority creditor's name and mailing address Avigail Slatus 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$87,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.10 Nonpriority creditor's name and mailing address Baila Simcha 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.11 Nonpriority creditor's name and mailing address Baldomero R. Luis P.O. Box 402202 Miami Beach, FL 33140 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$102,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Master Lending Group, LLC Case number (if known) _____
Name

3.12 Nonpriority creditor's name and mailing address **Barbara Aronson**
One Diamond Causeway, Ste 21-3008
Savannah, GA 31406
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$290,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.13 Nonpriority creditor's name and mailing address **Barbara Aronson IRA**
One Diamond Causeway, Ste 21-3008
Savannah, GA 31406
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$3,000,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.14 Nonpriority creditor's name and mailing address **Barbara Kooden**
6401 Habersham Street
Unit 1B
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$765,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.15 Nonpriority creditor's name and mailing address **Barbara Kooden IRA**
c/o Workmens' Circle CU
527 Stephenson Ave., Ste 2
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.16 Nonpriority creditor's name and mailing address **Beryl & Susan F. Lovitz Trust**
c/o Bob Lovitz
2020 SW Abercrombie Place
Portland, OR 97225
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.17 Nonpriority creditor's name and mailing address **Brett Bouy**
31 Bartow Point Drive
Savannah, GA 31404
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$500,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.18 Nonpriority creditor's name and mailing address **Broughton Kelly, Sr.**
401 Jackson Woods Blvd.
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$100,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
 Name _____

3.19	Nonpriority creditor's name and mailing address Catherine Royal 1367 La Vista Circle Pooler, GA 31322 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80,000.00
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3.20	Nonpriority creditor's name and mailing address Chaim Rabhan IRA 303 Johnson Street Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,000.00
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3.21	Nonpriority creditor's name and mailing address Chana Rabhan 308 McLaws Street Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,300.00
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3.22	Nonpriority creditor's name and mailing address Charles Grossman 5450 Abercorn Street Apt. 414 Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,000.00
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3.23	Nonpriority creditor's name and mailing address Colonial Shoe Co. Profit Sharing Plan 4701 Riverview Road Atlanta, GA 30327 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,000.00
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3.24	Nonpriority creditor's name and mailing address Dale Kaminsky 103 Lee Blvd. Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$325,000.00
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3.25	Nonpriority creditor's name and mailing address Daniel Kahn 674 S. Franklin St, Apt A Denver, CO 80209 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,000.00
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Debtor Name	Case number (if known)
Master Lending Group, LLC	
3.26 Nonpriority creditor's name and mailing address Daniel Klugman 401 Lee Blvd. Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$495,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27 Nonpriority creditor's name and mailing address Danny Kaminsky 402 Megan Court Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$140,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28 Nonpriority creditor's name and mailing address David Kahn 227 Waterfowl Road Bluffton, SC 29910 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$375,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29 Nonpriority creditor's name and mailing address David Rabhan 303 Johnson Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30 Nonpriority creditor's name and mailing address DGK Real Estate 5 Sir Lancelot Court Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31 Nonpriority creditor's name and mailing address Dorain Baruch 100 Stuart Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$550,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32 Nonpriority creditor's name and mailing address Doris Klugman P.O. Box 1596 Tybee Island, GA 31328 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
Name

3.33 Nonpriority creditor's name and mailing address **Doris Klugman IRA**
c/o Workmen's Circle CU
527 Stephenson Ave., Ste. 2
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

Unknown

3.34 Nonpriority creditor's name and mailing address **Dr. Fred E. Rabhan & Ester Rabhan**
314 Johnston Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

\$805,000.00

3.35 Nonpriority creditor's name and mailing address **Dr. Kalman Baruch**
100 Stuart Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

\$700,000.00

3.36 Nonpriority creditor's name and mailing address **Dr. Morris Geffen**
5 Breckenridge Lane
Savannah, GA 31411
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

\$325,000.00

3.37 Nonpriority creditor's name and mailing address **Elizabeth M. Jones**
224 Oatland Island Road
Savannah, GA 31410
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

Unknown

3.38 Nonpriority creditor's name and mailing address **Elizabeth Skeadas IRA**
c/o Workmen's Circle CU
527 Stephenson Ave., Ste. 2
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

Unknown

3.39 Nonpriority creditor's name and mailing address **Ephraim Rabhan**
308 McLaws Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

\$76,000.00

Debtor **Master Lending Group, LLC** Case number (if known) _____
Name

3.40	Nonpriority creditor's name and mailing address Ephraim Rabhan IRA 308 McLaws Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,500.00
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3.41	Nonpriority creditor's name and mailing address Estate of Dr. Leon Aronson One Diamond Causeway, Ste. 21-308 Savannah, GA 31406 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.42	Nonpriority creditor's name and mailing address Estate of Norman Dolgoff c/o Marcey Dolgoff Alter 740 Park Manor Drive SE Smyrna, GA 30082 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$763,000.00
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3.43	Nonpriority creditor's name and mailing address Ester Rabhan IRA 314 Johnston Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$108,000.00
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3.44	Nonpriority creditor's name and mailing address Eva Locker IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$206,000.00
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3.45	Nonpriority creditor's name and mailing address Eve Rabhan 303 Johnson Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372,000.00
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3.46	Nonpriority creditor's name and mailing address Francis Bouy IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste 2 Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,600.00
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Debtor Master Lending Group, LLC Case number (if known) _____
Name

3.47 Nonpriority creditor's name and mailing address **Frederick M. Halperin IRA**
c/o Jeffrey N. Berman, Esq.
3475 Piedmont Road NE, Suite 1460
Atlanta, GA 30305
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$2,185,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.48 Nonpriority creditor's name and mailing address **George Feehley IRA**
306 Jackson Woods Blvd.
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$27,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.49 Nonpriority creditor's name and mailing address **H.E.Y. Family Trust**
c/o Dr. Fred E. Rabhan
303 McLaws Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$101,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.50 Nonpriority creditor's name and mailing address **Harriet Simowitz**
6501 Habersham Street
Apartment 9
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$360,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.51 Nonpriority creditor's name and mailing address **Harry Howard & Louise Howard**
1 Savannah Square Drive
#207
Savannah, GA 31406
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$2,000,000.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.52 Nonpriority creditor's name and mailing address **Harry Yellin IRA**
c/o Workmen's Circle CU
527 Stephenson Ave., Ste. 2
GA 31450
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.53 Nonpriority creditor's name and mailing address **I.L. Aronson P.C. Employee Pension Plan**
1 Diamond Causeway, Ste 21-308
Savannah, GA 31404
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
Name

3.54	Nonpriority creditor's name and mailing address I.L. Aronson Pension Plan One Diamond Causeway, Suite 21-3008 Savannah, GA 31404 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.55	Nonpriority creditor's name and mailing address Isaac Rabhan 220 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.56	Nonpriority creditor's name and mailing address Jack Wardlaw 2702 Whatley Avenue Unit B-1 Savannah, GA 31404 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200,000.00
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3.57	Nonpriority creditor's name and mailing address James C. Wilson IRA c/o Workmen's Circle CU 527 Stephenson Ave, Ste. 2 Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275,000.00
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3.58	Nonpriority creditor's name and mailing address James C. Wilson, Jr. 7370 Hodgson Mem Blvd. Suite D-12 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000,000.00
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3.59	Nonpriority creditor's name and mailing address James E. Jones 224 Oatland Island Road Savannah, GA 31410 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000,000.00
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3.60	Nonpriority creditor's name and mailing address Jan Feehley 306 Jackson Woods Blvd Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **Master Lending Group, LLC** Case number (if known) _____
 Name _____

3.61 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$21,300.00**
Jan Feehley IRA
306 Jackson Woods Blvd
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.62 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$9,000.00**
Jan Feehley Roth IRA
306 Jackson Woods Blvd
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.63 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$200,000.00**
JEJ, Inc.
4607 Habersham Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.64 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$10,000.00**
Jeremy Slatus
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.65 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$200,000.00**
Jerry Wardlaw
2702 Whatley Avenue
Unit B-1
Savannah, GA 31404
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.66 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$300,000.00**
JGJ, Inc.
4607 Habersham Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.67 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$280,000.00**
John P. Skeadas
10 Liberty Creek Drive
Savannah, GA 31406
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
Name

3.68 Nonpriority creditor's name and mailing address **Johnny G. Feehley IRA** **\$15,000.00**
c/o Workmen's Circle CU
527 Stephenson Ave, Ste. 2
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.69 Nonpriority creditor's name and mailing address **Jones on 17th, LLC** **\$200,000.00**
4607 Habersham Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.70 Nonpriority creditor's name and mailing address **Joseph Slatos** **\$10,000.00**
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.71 Nonpriority creditor's name and mailing address **Julie Mazo** **\$235,000.00**
309 Wickersham Drive
Savannah, GA 31411
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.72 Nonpriority creditor's name and mailing address **Katherine Royal** **\$150,000.00**
124 High Cotton Drive
Statesboro, GA 30461
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.73 Nonpriority creditor's name and mailing address **Klugman Investments LLC** **\$575,000.00**
401 Lee Blvd.
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.74 Nonpriority creditor's name and mailing address **Lisa Kaminsky** **\$300,000.00**
402 Megan Court
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Master Lending Group, LLC Case number (if known) _____
Name

3.75	Nonpriority creditor's name and mailing address Louis Young IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$225,000.00
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3.76	Nonpriority creditor's name and mailing address Louis Young, Jr. 7370 Hodgson Mem Blvd. Savannah, GA 31406 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,000.00
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3.77	Nonpriority creditor's name and mailing address Louise Howard 11 Savannah Square Drive Unit 21 Savannah, GA 31406 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500,000.00
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3.78	Nonpriority creditor's name and mailing address Marcia Hirsch 2913 Ryton Court Raleigh, NC 27613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
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3.79	Nonpriority creditor's name and mailing address Marjorie C. Gordon c/o Mrs. Susan Klugman P.O. Boxn 1229 Tybee Island, GA 31328 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
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3.80	Nonpriority creditor's name and mailing address Mark T. Bouy 31 Bartow Point Drive Savannah, GA 31404 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500,000.00
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3.81	Nonpriority creditor's name and mailing address Marlene Dobbs IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor Name	Case number (if known)
Master Lending Group, LLC	
3.82 Nonpriority creditor's name and mailing address Marshall Jacobowitz 4902 Sarazen Drive Hollywood, FL 33021 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$450,000.00
3.83 Nonpriority creditor's name and mailing address Mary Amanda Young 83 Brown Pelican Drive Savannah, GA 31419 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$125,000.00
3.84 Nonpriority creditor's name and mailing address Matel Simcha 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$10,000.00
3.85 Nonpriority creditor's name and mailing address Mattel Rabhan 303 Johnson Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$10,200.00
3.86 Nonpriority creditor's name and mailing address Matti Slatus 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$10,000.00
3.87 Nonpriority creditor's name and mailing address Michael Dobbs IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$40,000.00
3.88 Nonpriority creditor's name and mailing address Michael Kooden P.O. Box 2388 Tybee Island, GA 31328 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$500,000.00

Debtor Name	Case number (if known)
Master Lending Group, LLC	
3.89 Nonpriority creditor's name and mailing address Michelle Jacobowitz 16891-D Isle of Palms Drive Delray Beach, FL 33484 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$1,198,000.00
3.90 Nonpriority creditor's name and mailing address Miriam Kreisel 218 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Unknown
3.91 Nonpriority creditor's name and mailing address Mordecai Simcha 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$10,000.00
3.92 Nonpriority creditor's name and mailing address Moshe Rabhan 308 McLaws Street Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$19,200.00
3.93 Nonpriority creditor's name and mailing address Moshe Simcha 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$10,000.00
3.94 Nonpriority creditor's name and mailing address Murray Klugman P.O. Box 1596 Tybee Island, GA 31328 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$250,000.00
3.95 Nonpriority creditor's name and mailing address Neal Markowitz 16 Bartow Point Drive Savannah, GA 31404 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	\$20,000.00

Debtor **Master Lending Group, LLC** Case number (if known) _____
Name

3.96 Nonpriority creditor's name and mailing address **Nicole Chu** **7640 Abercorn Street Savannah, GA 31406** **As of the petition filing date, the claim is: Check all that apply.** **\$100,000.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.97 Nonpriority creditor's name and mailing address **Norman Dolgoff** **c/o Marcey Dolgoff Alter 339 Oxford Drive Savannah, GA 31405** **As of the petition filing date, the claim is: Check all that apply.** **\$600,000.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.98 Nonpriority creditor's name and mailing address **Philip Rosenbaum Trust** **c/o Marshall Jacobowitz, Trustee 4902 Sarazen Dr. Hollywood, FL 33021** **As of the petition filing date, the claim is: Check all that apply.** **\$518,000.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.99 Nonpriority creditor's name and mailing address **Rabbi Avigdor Slatius** **233 Groveland Circle Savannah, GA 31405** **As of the petition filing date, the claim is: Check all that apply.** **\$2,000,000.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.100 Nonpriority creditor's name and mailing address **Randolph Chu** **7640 Abercorn Street Savannah, GA 31406** **As of the petition filing date, the claim is: Check all that apply.** **Unknown**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.101 Nonpriority creditor's name and mailing address **Randy Chu** **7640 Abercorn Street Savannah, GA 31406** **As of the petition filing date, the claim is: Check all that apply.** **\$1,500,000.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.102 Nonpriority creditor's name and mailing address **Randy Chu SEP IRA** **7640 Abercorn Street Savannah, GA 31406** **As of the petition filing date, the claim is: Check all that apply.** **Unknown**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____ **Basis for the claim:** _____
 Last 4 digits of account number _____ Is the claim subject to offset? No Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
 Name _____

3.103 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$90,000.00**
RBB Jacob R.D.F.
223 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.104 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$60,000.00**
Redfish, LLC
306 Jackson Woods Blvd.
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.105 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$100,000.00**
Renie Halperin
4701 Riverview Road NW
Atlanta, GA 30327
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.106 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Restaurant Equipment Company of Savannah
Profit Sharing Plan and Pension Plan
2601 Whitaker Street
Savannah, GA 31401
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.107 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$150,000.00**
Rita Slatos
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.108 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$0.00**
River Street Liquor, LLC
425 E. River Street
Savannah, GA 31401
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.109 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$1,601,000.00**
Robert M. Segall
405 Jackson Woods Blvd.
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
 Name _____

3.110 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$650,000.00**
Rochelle Javetz
1 South Grant Street
Savannah, GA 31419
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.111 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$245,000.00**
Sabrina Rabhan
308 McLaws Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.112 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$10,000.00**
Sarah Simcha
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.113 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$10,000.00**
Shaya Simcha
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.114 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$200,000.00**
Shlomo Slatus
233 Groveland Circle
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.115 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$24,500.00**
Shoshana Rabhan
303 Johnson Street
Savannah, GA 31405
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.116 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Susan S. Young IRA
c/o Workmen's Circle CU
527 Stephenson Ave., Ste. 2
Savannah, GA 31406
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor	Name	Case number (if known)
	Master Lending Group, LLC	
3.117	Nonpriority creditor's name and mailing address Teresa Wardlaw 2702 Whatley Avenue Unit B-1 Savannah, GA 31404 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118	Nonpriority creditor's name and mailing address Terry Jones 131 Falligant Avenue Savannah, GA 31410 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$900,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address Troy & Frances Bouy 31 Bartow Point Drive Savannah, GA 31404 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$502,250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address Troy Bouy IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 Savannah, GA 31405 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.121	Nonpriority creditor's name and mailing address Tzvi Rabhan 303 Johnson Street Savannah, GA 31405 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address Tzvi Slatas 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$400,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address Vanessa Jones 4607 Habersham Street Savannah, GA 31405 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Master Lending Group, LLC** Case number (if known) _____
 Name _____

3.124	Nonpriority creditor's name and mailing address Victor Belegorska Roth IRA c/o Workmen's Circle CU 527 Stephenson Ave., Ste. 2 GA 31400-5000 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.125	Nonpriority creditor's name and mailing address Victor Belogorska, Jr. P.O. Box 462 Eden, GA 31307 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$875,000.00
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3.126	Nonpriority creditor's name and mailing address William Hall, Jr. 27 Bartow Point Drive Savannah, GA 31404 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850,000.00
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3.127	Nonpriority creditor's name and mailing address Yaakov Rabhan 136 Stratford Place Lakewood, NJ 08701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00
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3.128	Nonpriority creditor's name and mailing address Yaakov Status 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175,000.00
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3.129	Nonpriority creditor's name and mailing address Yedidah Rabhan 220 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
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3.130	Nonpriority creditor's name and mailing address Yehudis Simcha 233 Groveland Circle Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **Master Lending Group, LLC**
Name

Case number (if known) _____

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Jay Javetz 308 Jackson Woods Blvd. Savannah, GA 31406	Line 3.110 <input type="checkbox"/> Not listed. Explain _____	—
4.2	Jeffrey Berman, Attorney 3475 Piedmont Road NE Suite 1640 Atlanta, GA 30305	Line 3.47 <input type="checkbox"/> Not listed. Explain _____	—
4.3	JGJ Inc. 403 N Duval St Claxton, GA 30417	Line 3.66 <input type="checkbox"/> Not listed. Explain _____	—
4.4	John Carson, Attorney 1901 Abercorn Street Savannah, GA 31401	Line 3.58 <input type="checkbox"/> Not listed. Explain _____	—
4.5	Rabbi Avigdor Slatos 5444 Abercorn Street Savannah, GA 31405	Line 3.99 <input type="checkbox"/> Not listed. Explain _____	—
4.6	Scott W. Peters 1100 Peachtree Street, NE Suite 800 Atlanta, GA 30309	Line 3.109 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ <u>0.00</u>
5b. Total claims from Part 2	5b. + \$ <u>42,966,950.00</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>42,966,950.00</u>

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
---	---

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____ Street _____ City State Zip Code	_____ <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.2	_____ Street _____ City State Zip Code	_____ <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.3	_____ Street _____ City State Zip Code	_____ <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
2.4	_____ Street _____ City State Zip Code	_____ <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	

Fill in this information to identify the case:

Debtor name Master Lending Group, LLC
 United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA
 Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2023 to Filing Date

Operating a business
 Other Liquidated Life Insurance Policies

\$1,875,635.00

For prior year:
From 1/01/2022 to 12/31/2022

Operating a business
 Other Liquidated Life Insurance Policies

\$4,000,000.00

For year before that:
From 1/01/2021 to 12/31/2021

Operating a business
 Other _____

\$4,790,676.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Master Lending Group, LLC**

Case number (if known)

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Exhibit A, Attached to Petition		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Debtor **Master Lending Group, LLC**

Case number (if known)

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
---	---	-------	-----------------------

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
 - diagnosing or treating injury, deformity, or disease, or
 - providing any surgical, psychiatric, drug treatment, or obstetric care?

Debtor **Master Lending Group, LLC**

Case number (if known)

- No. Go to Part 9.
- Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- No.
- Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
---------------------------	-----------------------------------	-----------------------------	----------------------------

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- None

Debtor **Master Lending Group, LLC**

Case number (if known)

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- No.
- Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. **Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name address	Describe the nature of the business	Employer Identification number <small>Do not include Social Security number or ITIN.</small>	Dates business existed
-----------------------	-------------------------------------	---	------------------------

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- None

Name and address	Date of service From-To
26a.1. Gregory Hirsch 440 Mall Blvd, Suite A Savannah, GA 31406	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- None

Debtor **Master Lending Group, LLC**

Case number (if known)

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Gregory Hirsch 440 Mall Blvd., Suite A Savannah, GA 31406	Mr. Hirsch is suffering from a terminal illness which has rendered him unable to communicate. Counsel is endeavoring to obtain complete business records, bank statements, etc.

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Gregory M. Hirsch	308 Megan Court Savannah, GA 31406	Sole Member	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Debtor **Master Lending Group, LLC**

Case number (if known)

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
- Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments 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 **July 6, 2023**

/s/ Gregory M. Hirsch (Via POA held by Judith Hirsch)

Signature of individual signing on behalf of the debtor

Gregory M. Hirsch (Via POA held by Judith Hirsch)

Printed name

Position or relationship to debtor **Owner**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
- Yes

**United States Bankruptcy Court
Southern District of Georgia**

In re Master Lending Group, LLC

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>40,000.00</u>
Prior to the filing of this statement I have received	\$	<u>40,000.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify): **Gregory Hirsch**

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. **Counsel anticipates the need for hiring third party professionals, and will pay all costs from the funds identified above.**

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 6, 2023

Date

/s/ Judson C. Hill

Judson C. Hill 354277

Signature of Attorney

GASTIN & HILL

1020 DRAYTON STREET

SUITE 201

Savannah, GA 31401

(912) 232-0203 Fax: (912) 236-3123

bankruptcy@gastinhill.com

Name of law firm

MASTER LENDING GROUP, LLC
308 MEGAN COURT
SAVANNAH GA 31405

AVIGAIL SLATUS
233 GROVELAND CIRCLE
SAVANNAH GA 31405

BROUGHTON KELLY, SR.
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SAVANNAH GA 31405

ABE KLUGMAN IRA
C/O WORKMEN'S CIRCLE CU
527 STEPHENSON AVE., STE. 2
SAVANNAH GA 31405-4000

BAILA SIMCHA
233 GROVELAND CIRCLE
SAVANNAH GA 31405

CATHERINE ROYAL
1367 LA VISTA CIRCLE
POOLER GA 31322

ADAM JACOBOWITZ
16891-D ISLE OF PALMS DRIVE
DELRAY BEACH FL 33484

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401 WHEELER STREET
SAVANNAH GA 31405

BARBARA ARONSON
ONE DIAMOND CAUSEWAY, STE 21-3008
SAVANNAH GA 31406

CHANA RABHAN
308 MCLAWS STREET
SAVANNAH GA 31405

ALBERT JACOBOWITZ IRREVOCABLE TRUST
C/O MICHELLE JACOBOWITZ, TRUSTEE
16891-D ISLE OF PALMS DRIVE
DELRAY BEACH FL 33484

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BARBARA KOODEN
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SAVANNAH GA 31405

COLONIAL SHOE CO. PROFIT SP
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SAVANNAH GA 31405

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SAVANNAH GA 31405

DALE KAMINSKY
103 LEE BLVD.
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ARLENE YELLIN IRA
C/O WORKMEN'S CIRCLE CU
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SAVANNAH GA 31405

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C/O BOB LOVITZ
2020 SW ABERCROMBIE PLACE
PORTLAND OR 97225

DANIEL KAHN
674 S. FRANKLIN ST, APT A
DENVER CO 80209

ARONSON FAMILY RESIDENCE TRUST
1 DIAMOND CAUSEWAY, STE 21-308
SAVANNAH GA 31406

BRETT BOUY
31 BARTOW POINT DRIVE
SAVANNAH GA 31404

DANIEL KLUGMAN
401 LEE BLVD.
SAVANNAH GA 31405

DANNY KAMINSKY
402 MEGAN COURT
SAVANNAH GA 31405

DR. MORRIS GEFFEN
5 BRECKENRIDGE LANE
SAVANNAH GA 31411

EVE RABHAN
303 JOHNSON STREET
SAVANNAH GA 31405

DAVID KAHN
227 WATERFOWL ROAD
BLUFFTON SC 29910

ELIZABETH M. JONES
224 OATLAND ISLAND ROAD
SAVANNAH GA 31410

FRANCIS BOUY IRA
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DAVID RABHAN
303 JOHNSON STREET
SAVANNAH GA 31405

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SAVANNAH GA 31405

FREDERICK M. HALPERIN IRA
C/O JEFFREY N. BERMAN, ESQ.
3475 PIEDMONT ROAD NE, SUITE 4
ATLANTA GA 30305

DGK REAL ESTATE
5 SIR LANCELOT COURT
SAVANNAH GA 31405

EPHRAIM RABHAN
308 MCLAWS STREET
SAVANNAH GA 31405

GEORGE FEEHLEY IRA
306 JACKSON WOODS BLVD.
SAVANNAH GA 31405

DORAIN BARUCH
100 STUART STREET
SAVANNAH GA 31405

EPHRAIM RABHAN IRA
308 MCLAWS STREET
SAVANNAH GA 31405

H.E.Y. FAMILY TRUST
C/O DR. FRED E. RABHAN
303 MCLAWS STREET
SAVANNAH GA 31405

DORIS KLUGMAN
P.O. BOX 1596
TYBEE ISLAND GA 31328

ESTATE OF DR. LEON ARONSON
ONE DIAMOND CAUSEWAY, STE. 21-308
SAVANNAH GA 31406

HARRIET SIMOWITZ
501 HABERSHAM STREET
APARTMENT 9
SAVANNAH GA 31405

DORIS KLUGMAN IRA
C/O WORKMEN'S CIRCLE CU
527 STEPHENSON AVE., STE. 2
SAVANNAH GA 31405

ESTATE OF NORMAN DOLGOFF
C/O MARCEY DOLGOFF ALTER
740 PARK MANOR DRIVE SE
SMYRNA GA 30082

HARRY HOWARD & LOUISE HOW
1 SAVANNAH SQUARE DRIVE
#207
SAVANNAH GA 31406

DR. FRED E. RABHAN & ESTER RABHAN
314 JOHNSTON STREET
SAVANNAH GA 31405

ESTER RABHAN IRA
314 JOHNSTON STREET
SAVANNAH GA 31405

HARRY YELLIN IRA
C/O WORKMEN'S CIRCLE CU
527 STEPHENSON AVE., STE. 2
GA 31450

DR. KALMAN BARUCH
100 STUART STREET
SAVANNAH GA 31405

EVA LOCKER IRA
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I.L. ARONSON P.C. EMPLOYEE P
1 DIAMOND CAUSEWAY, STE 21-
SAVANNAH GA 31404

I.L. ARONSON PENSION PLAN
ONE DIAMOND CAUSEWAY, SUITE 21-3008 JACKSON WOODS BLVD.
SAVANNAH GA 31404

JAY JAVETZ
3008 JACKSON WOODS BLVD.
SAVANNAH GA 31406

JOHNNY G. FEEHLEY IRA
C/O WORKMEN'S CIRCLE CU
527 STEPHENSON AVE, STE. 2
SAVANNAH GA 31405

ISAAC RABHAN
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SAVANNAH GA 31405

**United States Bankruptcy Court
Southern District of Georgia**

In re Master Lending Group, LLC

Debtor(s)

Case No. _____

Chapter 7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Master Lending Group, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

July 6, 2023

Date

/s/ Judson C. Hill

Judson C. Hill 354277

Signature of Attorney or Litigant

Counsel for Master Lending Group, LLC

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