

INFORMATION to identify the case:

United States Bankruptcy Court, Southern District of Florida

Date cases filed for chapter 11: **2/06/23****Official Form 309F1 (For Corporations or Partnerships)****Notice of Chapter 11 Bankruptcy Case**

Name of Debtor	Other Names Used by the Debtors (if any)	EIN	Case No.
Delphi Behavioral Health Group, LLC		81-0762076	Case No. 23-10945
61 Brown Street Holdings, LLC		38-3950007	Case No. 23-10946
Aloft Recovery LLC		46-3746674	Case No. 23-10947
Banyan Recovery Institute, LLC		46-3866998	Case No. 23-10948
Breakthrough Living Recovery Community, LLC		82-4265966	Case No. 23-10949
California Addiction Treatment Center LLC	d/b/a Desert View Recovery d/b/a California Highlands Addiction	47-2837655	Case No. 23-10950
California Vistas Addiction Treatment LLC		82-1258272	Case No. 23-10951
DBHG Holding Company, LLC		81-1466574	Case No. 23-10952
Defining Moment Recovery Community, LLC		82-4253532	Case No. 23-10953
Delphi Health BuyerCo, LLC		82-2442325	Case No. 23-10955
Delphi Health Group, LLC		32-0440570	Case No. 23-10956
Delphi Intermediate HealthCo, LLC		82-2736378	Case No. 23-10957
Delphi Management LLC		85-4126474	Case No. 23-10959
Desert View Recovery Community, LLC		83-4347437	Case No. 23-10960
DR Parent, LLC		84-4572700	Case No. 23-10961
DR Sub, LLC		84-4518183	Case No. 23-10963
Las Olas Recovery LLC	d/b/a Pathway to Hope	80-0809082	Case No. 23-10964
Maryland House Detox, LLC		37-1761626	Case No. 23-10965
New Perspectives, LLC		37-1880508	Case No. 23-10967
Next Step Housing LLC		82-1186975	Case No. 23-10969
Ocean Breeze Detox, LLC	d/b/a Arete Recovery d/b/a Arete Detox d/b/a Vista Pines d/b/a Pathway to Hope d/b/a Ocean Breeze Recovery	47-3657019	Case No. 23-10970
Ocean Breeze Recovery, LLC		45-3949621	Case No. 23-10972
Onward Living Recovery Community, LLC		82-4214735	Case No. 23-10973
Palm Beach Recovery, LLC	d/b/a Family Recovery Specialists, Inc. d/b/a Palm Beach Institute d/b/a Harmony Hills	81-3914459	Case No. 23-10975

Peak Health NJ, LLC		46-5077286	Case No. 23-10977
QBR Diagnostics, LLC		46-1127835	Case No. 23-10979
Rogers Learning, LLC		26-2371699	Case No. 23-10981
SBH Haverhill, LLC		47-3360971	Case No. 23-10982
SBH Union IOP LLC		46-3584139	Case No. 23-10983
Summit at Florham Park, LLC		46-5048226	Case No. 23-10984
Summit Behavioral Health Limited Liability Company		45-3913337	Case No. 23-10986
Summit Health BuyerCo, LLC		82-2452762	Case No. 23-10987
Summit IOP Limited		46-2734567	Case No. 23-10989
Union Fresh Start LLC		46-3566841	Case No. 23-10990

For the debtors listed above, a case has been filed under chapter 11 of the Bankruptcy Code. This notice has important information about the case for creditors, debtors, and trustees, including information about the meeting of creditors and deadlines. Read both pages carefully.

The filing of the case imposed an automatic stay against most collection activities. This means that creditors generally may not take action to collect debts from the debtor or the debtor's property. For example, while the stay is in effect, creditors cannot sue, assert a deficiency, repossess property, or otherwise try to collect from the debtor. Creditors cannot demand repayment from debtors by mail, phone, or otherwise. Creditors who violate the stay can be required to pay actual and punitive damages and attorney's fees.

Confirmation of a chapter 11 plan may result in a discharge of debt. A creditor who wants to have a particular debt excepted from discharge may be required to file a complaint in the bankruptcy clerk's office within the deadline specified in this notice. (See box 8 below for more information.)

You may want to consult an attorney to protect your rights. The bankruptcy clerk's office staff cannot give legal advice. Do not file this notice with any proof of claim or other filing in the case.

WARNING TO DEBTOR: WITHOUT FURTHER NOTICE OR HEARING, THE COURT MAY DISMISS YOUR CASE FOR FAILURE OF THE DEBTOR TO APPEAR AT THE MEETING OF CREDITORS OR FAILURE TO TIMELY FILE REQUIRED SCHEDULES, STATEMENTS OR LISTS.

1. Debtors' Full Names: Delphi Behavioral Health Group, LLC ** ** (See above for full names of all Debtors)		
2. All Other Names Used in the Last 8 Years:		
3. Address 1901 West Cypress Creek Road, Ste. 500 Fort Lauderdale, FL 33309		
4. Debtors' attorney Name and address	Paul Steven Singerman, Esq. Berger Singerman LLP 1450 Brickell Ave., #1900 Miami, FL 33131	Contact phone: (305) 755-9500
5. Bankruptcy Clerk's Divisional Office Where Assigned Judge is Chambered	Federal Building 299 E. Broward Blvd., Room 112 Ft. Lauderdale, FL 33301	Hours open 8:30 a.m. – 4:00 p.m. Contact Phone: (954) 769-5700

<p>Documents filed conventionally in paper may be filed at any bankruptcy clerk's office location. Documents may be viewed in electronic format via CM/ECF at any clerk's office public terminal (at no charge for viewing) or via PACER on the internet accessible at https://pacer.uscourts.gov (charges will apply). Case filing and unexpired deadline dates can be obtained by calling the Voice Case Information System toll-free at (866) 222-8029. As mandated by the Department of Homeland Security, ALL visitors (except minors accompanied by an adult) to any federal building or courthouse must present a current, valid, government-issued photo identification (e.g., driver's license, state identification card, passport, or immigration card.)</p>	<p>Clerk of Court: <u>Joseph Falzone</u></p> <p>Dated: <u>2/13/23</u></p>
<p>6. *MEETING OF CREDITORS* The debtor's representative must attend the meeting to be questioned under oath. Creditors may attend but are not required to do so.</p>	<p><u>3/10/2023 at 9:30 a.m.</u></p> <p>The meeting may be continued or adjourned to a later date. If so, the date will be on the court docket.</p> <p>*MEETING WILL BE HELD BY TELEPHONE*</p> <p>Trustee: Office of the US Trustee Call-in number: <u>1-866-915-4419</u> Participant Code: <u>6071331</u></p>
<p>7. Proof of Claim Deadline</p> <p><u>When Filing Proofs of Claim:</u> Claims may be delivered or mailed to:</p> <p><u>By First Class Mail:</u> Delphi Behavioral Health Group, LLC, et al. Claims Processing Center c/o Epiq Corporate Restructuring, LLC PO Box 4421 Beaverton, OR 97076-4421</p> <p><u>By Hand Delivery or Overnight Mail:</u> Delphi Behavioral Health Group, LLC, et al. Claims Processing Center c/o Epiq Corporate Restructuring, LLC 10300 SW Allen Blvd. Beaverton, OR 97005</p> <p>Proofs of Claim may also be filed electronically via the case website: https://dm.epiq11.com/DelphiHealth</p>	<p>Deadline for all creditors to file a proof of claim (except governmental units): Filing deadline: <u>4/17/2023</u></p> <p>Deadline for governmental units to file a proof of claim: Filing deadline: <u>8/7/2023</u></p> <p>Deadlines for Filing Proof of Claim:</p> <p>A proof of claim is a signed statement describing a creditor's claim. A proof of claim form may be obtained at www.flsb.uscourts.gov, any bankruptcy clerk's office, or on the case website at https://dm.epiq11.com/DelphiHealth.</p> <p>Your claim will be allowed in the amount scheduled unless:</p> <ul style="list-style-type: none"> • your claim is designated as <i>disputed</i>, <i>contingent</i>, or <i>unliquidated</i>; • you file a proof of claim in a different amount; or • you receive another notice. <p>If your claim is not scheduled or if your claim is designated as <i>disputed</i>, <i>contingent</i>, or <i>unliquidated</i>, you must file a proof of claim, or you might not be paid on your claim, and you might be unable to vote on a plan. You may file a proof of claim even if your claim is scheduled. You may review the schedules at the bankruptcy clerk's office or online at https://pacer.uscourts.gov or at the case website of https://dm.epiq11.com/DelphiHealth</p> <p>Secured creditors retain rights in their collateral regardless of whether they file a proof of claim. Filing a proof of claim submits the creditor to the jurisdiction of the bankruptcy court, with consequences a lawyer can explain. For example, a secured creditor who files a proof of claim may surrender important nonmonetary rights, including the right to a jury trial. The deadline for filing objections to claims will be established pursuant to Local Rule 3007-1(B)(1).</p> <p>Filing Deadline for a Creditor with a Foreign Address: The deadlines for filing proofs of claim in this notice apply to all creditors. If you are a creditor receiving a notice mailed to a foreign address, you may file a motion asking the court to extend the deadline to file a proof of claim. See also box 9 below.</p>
<p>8. Exception to Discharge Deadline The bankruptcy clerk's office must receive a complaint and any required filing fee by the following deadline. Writing a letter to the court or judge is not sufficient.</p>	<p>If § 523 applies to your claim and you seek to have it excepted from discharge, you must start a judicial proceeding by filing a complaint by the deadline stated below.</p> <p>Deadline for Filing the Complaint: <u>5/9/2023</u></p>
<p>9. Creditors with a Foreign Address</p>	<p>Consult an attorney familiar with United States bankruptcy law if you have any questions about your rights in this case.</p>

10. Filing a Chapter 11 Bankruptcy Case	Chapter 11 allows debtors to reorganize or liquidate according to a plan. A plan is not effective unless the court confirms it. You may receive a copy of the plan and a disclosure statement telling you about the plan, and you may have the opportunity to vote on the plan. You will receive notice of the date of the confirmation hearing, and you may object to confirmation of the plan and attend the confirmation hearing. Unless a trustee is serving, the debtor will remain in possession of the property and may continue to operate its business.
11. Option to Receive Notices Served by the Clerk by Email instead of by U.S. Mail	1) EBN program is open to all parties. Register at the BNC website https://bankruptcynotices.uscourts.gov , OR 2) DeBN program is open to debtors only. Register by filing with the Clerk of Court, Local Form "Debtor's Request to Receive Electronically Under DeBN Program." There is no charge for either option. See also Local Rule 9036-1(B) and (C).
12. Translating Services	Language interpretation of the meeting of creditors will be provided to the debtor at no cost, upon request to the trustee, through a telephone interpreter service. Persons with communications disabilities should contact the U.S. Trustee's office to arrange for translating services at the meeting of creditors.
13. Discharge of Debts	Confirmation of a chapter 11 plan may result in a discharge of debts, which may include all or part of your debt. See 11 U.S.C. §1141(d). A discharge means that creditors may never try to collect the debt from the debtor except as provided in the plan. If you want to have a particular debt owed to you excepted from the discharge and § 523 applies to your claim, you must start a judicial proceeding by filing a complaint and paying the filing fee in the bankruptcy clerk's office by the deadline in box 8.

PROOF OF CLAIM
UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF FLORIDA
FORT LAUDERDALE DIVISION
www.flsb.uscourts.gov

Name of Debtors

DELPHI BEHAVIORAL HEALTH GROUP, LLC, et al.

Case Numbers:

23-bk-10945-PDR

(Jointly Administered)

Indicate Debtor against which you assert a claim by checking the appropriate box below.

(Check only one Debtor per claim form)

Name of Debtor	Case Number
<input type="checkbox"/> Delphi Behavioral Health Group, LLC	Case No. 23-10945
<input type="checkbox"/> 61 Brown Street Holdings, LLC	Case No. 23-10946
<input type="checkbox"/> Aloft Recovery LLC	Case No. 23-10947
<input type="checkbox"/> Banyan Recovery Institute, LLC	Case No. 23-10948
<input type="checkbox"/> Breakthrough Living Recovery Community, LLC	Case No. 23-10949
<input type="checkbox"/> California Addiction Treatment Center LLC	Case No. 23-10950
<input type="checkbox"/> California Vistas Addiction Treatment LLC	Case No. 23-10951
<input type="checkbox"/> DBHG Holding Company, LLC	Case No. 23-10952
<input type="checkbox"/> Defining Moment Recovery Community, LLC	Case No. 23-10953
<input type="checkbox"/> Delphi Health BuyerCo, LLC	Case No. 23-10955
<input type="checkbox"/> Delphi Health Group, LLC	Case No. 23-10956
<input type="checkbox"/> Delphi Intermediate HealthCo, LLC	Case No. 23-10957
<input type="checkbox"/> Delphi Management LLC	Case No. 23-10959
<input type="checkbox"/> Desert View Recovery Community, LLC	Case No. 23-10960
<input type="checkbox"/> DR Parent, LLC	Case No. 23-10961
<input type="checkbox"/> DR Sub, LLC	Case No. 23-10963
<input type="checkbox"/> Las Olas Recovery LLC	Case No. 23-10964
<input type="checkbox"/> Maryland House Detox, LLC	Case No. 23-10965
<input type="checkbox"/> New Perspectives, LLC	Case No. 23-10967
<input type="checkbox"/> Next Step Housing LLC	Case No. 23-10969
<input type="checkbox"/> Ocean Breeze Detox, LLC	Case No. 23-10970
<input type="checkbox"/> Ocean Breeze Recovery, LLC	Case No. 23-10972
<input type="checkbox"/> Onward Living Recovery Community, LLC	Case No. 23-10973
<input type="checkbox"/> Palm Beach Recovery, LLC	Case No. 23-10975
<input type="checkbox"/> Peak Health NJ, LLC	Case No. 23-10977
<input type="checkbox"/> QBR Diagnostics, LLC	Case No. 23-10979
<input type="checkbox"/> Rogers Learning, LLC	Case No. 23-10981
<input type="checkbox"/> SBH Haverhill, LLC	Case No. 23-10982
<input type="checkbox"/> SBH Union IOP LLC	Case No. 23-10983
<input type="checkbox"/> Summit at Florham Park, LLC	Case No. 23-10984
<input type="checkbox"/> Summit Behavioral Health Limited Liability Company	Case No. 23-10986
<input type="checkbox"/> Summit Health BuyerCo, LLC	Case No. 23-10987
<input type="checkbox"/> Summit IOP Limited	Case No. 23-10989
<input type="checkbox"/> Union Fresh Start LLC	Case No. 23-10990

Official Form 410

Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim**1. Who is the current creditor?**

Name of the current creditor (the person or entity to be paid for this claim) _____

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

☐ No

☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?**Where should notices to the creditor be sent?****Where should payments to the creditor be sent? (if different)**

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Name _____

Name _____

Number _____ Street _____

Number _____ Street _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Contact phone _____

Contact phone _____

Contact email _____

Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?

☐ No

☐ Yes. Claim number on court claims registry (if known) _____

Filed on _____
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☐ No

☐ Yes. Who made the earlier filing? _____

Give Information About the Claim as of the Date the Case Was Filed

Part 2:

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

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

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
 Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
 Limit disclosing information that is entitled to privacy, such as health care information.
- _____

9. Is all or part of the claim secured? ☐ No
☐ Yes. The claim is secured by a lien on property.
- Nature of property:**
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
- Basis for perfection:** _____
 Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
- Value of property:** \$ _____
- Amount of the claim that is secured:** \$ _____
- Amount of the claim that is unsecured:** \$ _____
 (The sum of the secured and unsecured amounts should match the amount in line 7.)
- Amount necessary to cure any default as of the date of the petition:** \$ _____
- Annual Interest Rate** (when case was filed) _____ %
☐ Fixed
☐ Variable

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

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

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

☐ No

☐ Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

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

☐ Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

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

\$ _____

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

\$ _____

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

\$ _____

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Sign Below

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

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

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

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

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

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

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

Executed on date _____
MM / DD / YYYY

Signature

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

Name

First name

Middle name

Last name

Title

Company

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

Address

Contact phone

Email

Mail Claim Form to:

If by First Class Mail: Delphi Behavioral Health Group, LLC, *et al.*, Claims Processing Center, c/o Epiq Corporate Restructuring, LLC, P.O. Box 4421, Beaverton, OR 97076-4421; **If by Hand Delivery or Overnight Mail:** Delphi Behavioral Group, LLC, *et al.*, Claims Processing Center, c/o Epiq Corporate Restructuring, LLC, 10300 SW Allen Blvd., Beaverton, OR 97005, **or file your claim electronically via the following case website:** <https://dm.epiq11.com/DelphiHealth>