

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF FLORIDA
MIAMI-DADE DIVISION**

In re:

PROVIDENCE FIXED INCOME FUND, LLC

Case Number 16-20517-AJC

Chapter 7

Debtor.

_____ /

MOTION TO ALLOW LATE FILED CLAIM

Creditor, **SCOTT LACHUTE**, by and through his undersigned counsel, hereby files his *Motion to Allow Late Filed Claim*, and states as follows:

1. Creditor, Scott Lachute ("Creditor Lachute") holds a money judgment against the Debtor.
2. Debtor failed to list Creditor Lachute on their bankruptcy petition.
3. Creditor Lachute did not receive notice of the Debtor's bankruptcy filing or related deadlines.
4. Creditor Lachute has been prejudiced as he did not have an opportunity to file a proof of claim prior to the bar deadline.
5. Creditor Lachute seeks to have his proof of claim allowed as a late filed claim.

WHEREFORE, Creditor Lachute requests this Court to enter an Order allowing his claim as a late filed claim and for any other relief deemed just and proper in the circumstances.

VERIFICATION

Under penalties of perjury I declare that I have read the foregoing document and that the facts stated in it are true and correct.



SCOTT LACHUTE, Creditor

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing was sent, via CM/ECF, on April 5, 2017 to Maria Yip, Chapter 7 Trustee and to the parties listed below, and to all parties registered to receive service via CM/ECF.

James B. Miller, Esq. Counsel for Debtor <i>bkcmiami@gmail.com</i>	Sergio M. Cabanas Counsel for Debtor <i>SergioCabanasLaw@aol.com</i>
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**CERTIFICATE PURSUANT TO
LOCAL RULE 9011-4(B)**

I HEREBY CERTIFY that I am admitted to the Bar of the United States District Court for the Southern District of Florida and I am in compliance with the additional qualifications to practice in this Court set forth in Local Rule 2090-1(A).

KINGCADE & GARCIA, P.A

Counsel for the Defendant/Defendant
Kingcade Building
1370 Coral Way • Miami, Florida 33145-2960
Telephone: 305-285-9100 • Facsimile: 305-285-9542

/s/ Timothy S. Kingcade

- x Timothy S. Kingcade, Esq., FBN 082309
- Wendy Garcia, Esq., FBN 0865478
- Jessica L. McMaken, Esq., FBN 580163

Fill in this information to identify the case:	
Debtor 1	Providence Fixed Income Fund, LLC
Debtor 2	
(Spouse, if filing)	
United States Bankruptcy Court	Southern District of Florida
Case number:	16-20517

FILED
 U.S. Bankruptcy Court
 Southern District of Florida
 4/5/2017
 Joseph Falzone, Clerk

**Official Form 410
 Proof of Claim**

04/16

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?	Scott LaChute	
	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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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)
	Scott LaChute	Scott LaChute
	Name	Name
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	c/o Kingcade & Garcia PA 1370 Coral Way Miami, FL 33145
		9253 227th Avenue NE Redmond, WA 98053
	Contact phone	305-285-9100
Contact email	kingcadeserve@bellsouth.net	Contact email
		425-443-4729
		scottlachute@gmail.com
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) Filed on	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?	

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

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? \$ 415203.52
 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 healthcare information.
 Breach of Contract/Final Judgment

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: _____

<p>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. <i>Check all that apply.</i></p>	<p>Amount entitled to priority</p>
<p><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____</p> <p><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____</p> <p><input checked="" type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) 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). \$ 12475.00</p> <p><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____</p> <p><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____</p> <p><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies \$ _____</p>	<p><small>* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.</small></p>	

Part 3: Sign Below

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

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

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

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

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

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

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

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

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

Executed on date 4/5/2017

MM / DD / YYYY

/s/ Scott LaChute

Signature

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

Name Scott LaChute

First name Middle name Last name

Title _____

Company _____

Address Identify the corporate servicer as the company if the authorized agent is a servicer
9253 227 Avenue NE

Number Street

Redmond, WA 98053

City State ZIP Code

Contact phone _____ Email _____