

**Fill in this information to identify the case:**Debtor Air Pros Boca LLCUnited States Bankruptcy Court for the: Northern District of Georgia  
(State)Case number 25-10359**Modified Official Form 410  
Proof of Claim****12/24**

**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 or 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?	Department of Treasury - Internal Revenue Service	
	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?	<b>Where should notices to the creditor be sent?</b> See summary page	<b>Where should payments to the creditor be sent? (if different)</b> See summary page
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Contact phone <u>1-800-973-0424</u> Contact email <u>Cheryl.Mangham@irs.gov</u>	Contact phone <u>470-639-2964</u> Contact email <u>cheryl.mangham@irs.gov</u>
	Uniform claim identifier (if you use one):	
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>176</u> Filed on <u>06/28/2025</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Who made the earlier filing? <u>Cheryl.Mangham</u>	



**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: 1091 \_\_\_\_

7. How much is the claim? \$ 0.00 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.  
Taxes

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.  
**Nature or property:**  
☐ Real estate: If the claim is secured by the debtor's principle 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 amount 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)?

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

☒ No

☐ Yes. Check all that apply:

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

Amount entitled to priority

\$ \_\_\_\_\_

☐ 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.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

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)(3) 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 acknowledgement 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 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 09/10/2025  
MM / DD / YYYY

/s/Cheryl.mangham@irs.gov  
Signature

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

Name Cheryl.mangham@irs.gov  
First name Middle name Last name

Title Bankruptcy Specialist

Company Internal Revenue Service  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone \_\_\_\_\_ Email \_\_\_\_\_



# Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 927-7076 | International (310) 751-2650

<b>Debtor:</b> 25-10359 - Air Pros Boca LLC <b>District:</b> Northern District of Georgia, Newnan Division		
<b>Creditor:</b> Department of Treasury - Internal Revenue Service P. O. Box 7346  Philadelphia, GA, 19101-7346 <b>Phone:</b> 1-800-973-0424 <b>Phone 2:</b>  <b>Fax:</b>  <b>Email:</b> Cheryl.Mangham@irs.gov	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> Yes <b>Related Claim Filed By:</b> Cheryl.Mangham	
	<b>Filing Party:</b> Creditor	
<b>Disbursement/Notice Parties:</b> Department of Treasury - Internal Revenue Service 401 W. Peachtree St. NE, M/S 334-D  Atlanta, ga, 30308-3539 <b>Phone:</b> 470-639-2964 <b>Phone 2:</b>  <b>Fax:</b>  <b>E-mail:</b> cheryl.mangham@irs.gov <b>DISBURSEMENT ADDRESS</b>		
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> Yes - 176, 06/28/2025 <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Taxes	<b>Last 4 Digits:</b> Yes - 1091	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 0.00	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	
<b>Submitted By:</b> Cheryl.mangham@irs.gov on 10-Sep-2025 2:07:14 p.m. Pacific Time <b>Title:</b> Bankruptcy Specialist <b>Company:</b> Internal Revenue Service		

**Fill in this information to identify the case:**

Debtor 1 AIR PROS BOCA LLC

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN District of GEORGIA  
(State)

Case number 25-10359-PMB

## Official Form 410

### Proof of Claim

04/25

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**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. <b>Who is the current creditor?</b>	Department of Treasury - Internal Revenue Service _____ Creditor Number : _____ Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor _____	
2. <b>Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. <b>Where should notices and payments to the creditor be sent?</b>  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>  Internal Revenue Service Name _____ P.O. Box 7346 Number _____ Street _____ Philadelphia PA 19101-7346 City _____ State _____ ZIP Code _____  Contact phone <u>1-800-973-0424</u> Contact email _____  Uniform claim identifier (if you use one): _____	<b>Where should payments to the creditor be sent? (if different)</b>  Internal Revenue Service Name _____ 401 W PEACHTREE ST, NW, M/S 334-D Number _____ Street _____ ATLANTA GA 30308-3539 City _____ State _____ ZIP Code _____  Contact phone <u>470-639-2964</u> Contact email <u>cheryl.mangham@irs.gov</u>
4. <b>Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. <b>Do you know if anyone else has filed a proof of claim for this claim?</b>	<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: See Attachment

7. How much is the claim? \$ 0.00. 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.  
  
Taxes \_\_\_\_\_

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: See attachment

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

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

☒ No

☐ Yes. Check one:

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

Amount entitled to priority

\$ \_\_\_\_\_

☐ Up to \$3,800\* 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 \$17,150\*) 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 04/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

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

If you file this claim electronically, FRBP 5005(a)(3) 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 09/10/2025  
MM / DD / YYYY

/s/ CHERYL MANGHAM

Signature

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

Name	CHERYL	MANGHAM
	First name	Middle name Last name
Title	Bankruptcy Specialist	
Company	Internal Revenue Service	
	Identify the corporate servicer as the company if the authorized agent is a servicer.	
Address	401 W PEACHTREE ST, NW, M/S 334-D	
	Number	Street
	ATLANTA	GA 30308-3539
	City	State ZIP Code
Contact phone	470-639-2964	Email cheryl.mangham@irs.gov

# Proof of Claim for Internal Revenue Taxes



Form 410  
Attachment

Department of the Treasury/Internal Revenue Service

**In the Matter of:** AIR PROS BOCA LLC

150 S PINE ISLAND RD STE #200  
PLANTATION, FL 33324

Case Number

25-10359-PMB

Type of Bankruptcy Case

CHAPTER 11

Date of Petition

03/16/2025

The United States has the right of setoff or counterclaim. However, this determination is based on available data and is not intended to waive any right to setoff against this claim debts owed to this debtor by this or any other federal agency. All rights of setoff are preserved and will be asserted to the extent lawful.

This amended claim supercedes all previously filed claims.

Duplicate claim being withdrawn. Claim # remains active claim.

## Unsecured Priority Claims under section 507(a)(8) of the Bankruptcy Code

Taxpayer ID					
Number	Kind of Tax	Tax Period	Date Tax Assessed	Tax Due	Interest to Petition Date
XX-XXX1091	WT-FICA	03/31/2022	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	06/30/2022	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	09/30/2022	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	12/31/2022	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	FUTA	12/31/2022	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	03/31/2023	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	06/30/2023	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	09/30/2023	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	12/31/2023	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	FUTA	12/31/2023	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	03/31/2024	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	06/30/2024	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	09/30/2024	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	12/31/2024	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	FUTA	12/31/2024	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	03/31/2025	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
				\$0.00	\$0.00

**Total Amount of Unsecured Priority Claims:**

**\$0.00**

## Unsecured General Claims

Taxpayer ID					
Number	Kind of Tax	Tax Period	Date Tax Assessed	Tax Due	Interest to Petition Date
XX-XXX1091	WT-FICA	06/30/2020	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00



Continued from Page 1

<i>Taxpayer ID Number</i>	<i>Kind of Tax</i>	<i>Tax Period</i>	<i>Date Tax Assessed</i>	<i>Tax Due</i>	<i>Interest to Petition Date</i>
XX-XXX1091	WT-FICA	09/30/2020	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	12/31/2020	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	FUTA	12/31/2020	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	03/31/2021	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	06/30/2021	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	09/30/2021	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	WT-FICA	12/31/2021	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
XX-XXX1091	FUTA	12/31/2021	1 4-PER RECORDS/DEBTOR	\$0.00	\$0.00
				\$0.00	\$0.00

**Total Amount of Unsecured General Claims: \$0.00**

1 INFORMATION FROM DEBTOR OR RETURN RECEIVED THAT IS NOT YET ASSESSED. THIS CLAIM MAY BE AMENDED AS NECESSARY UPON ASSESSMENT OF THE LIABILITY OR EXAMINATION OF DEBTOR TAX RETURN.