

Fill in this information to identify the case:

Claim #557 Date Filed: 10/14/2025

Debtor 1 HGE FIC I LLC

Debtor 2
(Spouse, if
filing)

United States Bankruptcy Court for the: Northern District of Texas, Dallas Division

Case number 25-80145

Official Form 410

Proof of Claim

- ☒ Date Stamped Copy Returned
☐ No self addressed stamped envelope
☐ No copy to return

11/23

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?

214 E Hallandale Beach LLC

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

Other names the creditor used with the debtor See attached addendum

2. Has this claim been acquired from someone else?

☐ No

☒ Yes. From whom? See attached addendum

3. Where should notices and payments to the creditor be sent?

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

Where should notices to the creditor be sent?

214 E Hallandale Beach LLC
c/o Winstead PC Attn: Annmarie Chiarello
Name

500 Winstead Building, 2728 N. Harwood Street
Number Street

Dallas TX 75201
City State ZIP Code

Contact phone (214) 745-5410

Contact email achiarello@winstead.com

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

Where should payments to the creditor be sent? (if different)

214 E Hallandale Beach LLC
Attn: Martin Saidon
Name

1395 Brickell Avenue, Suite 760
Number Street

Miami FL 33131
City State ZIP Code

Contact phone 305.692.0334

Contact email martin@fortecnow.com

4. Does this claim amend one already filed?

☐ No

☒ Yes. Claim number on court claims registry #8

Filed on 07/10/2025
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? 214 E Hallandale Beach LLC

