

Fill in this information to identify the case:

Debtor Cytera Communications, LLC

United States Bankruptcy Court for the: _____ District of New Jersey
(State)

Case number 23-14852

**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 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?	<u>Atlantech Online, Inc.</u> <small>Name of the current creditor (the person or entity to be paid for this claim)</small>	
	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? See summary page	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Contact phone <u>3015893060</u>	Contact phone _____
	Contact email <u>efineran@atlantech.net</u>	Contact email _____
	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 _____ <small>MM / DD / YYYY</small>	
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: 3427 _____

7. How much is the claim? \$ 6,693.59. 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.
Telecommunications services performed.

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:

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> 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 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)(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 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 08/04/2023
MM / DD / YYYY

/s/Steve Royston
Signature

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

Name Steve Royston
First name Middle name Last name

Title General Manager

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

Address _____

Contact phone _____ Email _____



KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877)-726-6510 | International 001-310-823-9000

Debtor: 23-14852 - Cyxtera Communications, LLC		
District: District of New Jersey, Newark Division		
Creditor: Atlantech Online, Inc. 1010 Wayne Avenue Suite 630 Silver Spring, Maryland, 20910 United States Phone: 3015893060 Phone 2: 3017552230 Fax: Email: efineran@atlantech.net	Has Supporting Documentation: Yes, supporting documentation successfully uploaded	
	Related Document Statement:	
	Has Related Claim: No	
	Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No	
	Acquired Claim: No	
Basis of Claim: Telecommunications services performed.	Last 4 Digits: Yes - 3427	Uniform Claim Identifier:
Total Amount of Claim: 6,693.59	Includes Interest or Charges: Yes	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No	Nature of Secured Amount:	
Amount of 503(b)(9): No	Value of Property:	
Based on Lease: No	Annual Interest Rate:	
Subject to Right of Setoff: No	Arrearage Amount:	
	Basis for Perfection:	
	Amount Unsecured:	
Submitted By: Steve Royston on 04-Aug-2023 3:24:43 p.m. Eastern Time		
Title: General Manager		
Company: Atlantech Online		



1010 Wayne Ave • Suite 630 • Silver Spring, MD 20910

Remittance Section

Account Number	003427
Bill Date	6/1/2023
Billing Period	06/01/23 to 06/30/23
Due Date	6/21/2023
Invoice Number	73041
Total Amount Due	\$8,532.96
Amount Enclosed	\$

Please remit payment to:

IMMUNITY, INC.
2 ALHAMBRA PLAZA
STE PH1
CORAL GABLES FL, 33134

ATLANTECH ONLINE
1010 WAYNE AVE STE 630
SILVER SPRING, MD 20910

Please detach and return above portion with your payment. Please put your account number on your check and make payable to: **Atlantech Online**

Service Address

2231 Crystal Dr
Arlington, VA 22202

Account Summary

Account Number	3427
Customer Name	IMMUNITY, INC.
Invoice Date	6/1/2023
Invoice Number	73041

Summary of Charges - Invoice

Previous Balance	\$1,839.37
Payments Received - Thank you!	\$0.00

Past Due Balance **\$1,839.37**

Please contact our customer service dept. for past due charges
If payment was already sent, please disregard this note.

New Charges

Usage Charges	\$0.00
Recurring Charges	\$906.00
Non-Recurring Charges	\$5,787.59
Discounts	\$0.00
Taxes and Surcharges	\$0.00

Total New Charges Due by 6/21/2023 \$6,693.59

Total Invoice Amount **\$8,532.96**



Customer Service
301-589-3060

1010 Wayne Ave • Suite 630 • Silver Spring, MD 20910

Normal Business Hours: M-F 8am-6pm EST • 24/7 Support

Payment Options

Payment By Mail: If sending a payment by mail, please use the remittance address on remittance coupon. A courtesy reply envelope is supplied for your convenience. Please remove the coupon portion and make sure the address appears in the window.

Electronic Payment: Visit billing.atlantech.net. Payments may be made by credit card, ACH, or e-check.

Please Note: A surcharge of 2.75% will apply to the transaction amount on all credit card payments.

Important Message


Introducing atlantech|ddos protect

atlantech|ddos protect is a real-time DDoS (distributed denial of service) protection service that automatically and accurately mitigates DDoS attacks, provides comprehensive visibility and is highly scalable to meet your throughput requirements. Call us today at 301-589-3060 or go to <https://www.atlantech.net/atlantech-ddos-protect> for more information.

Terms and Conditions

Invoices are payable within 20 days of the invoice date. This due date is stated each month at the top front of your bill. It is important that payment is received before the due date. Please allow 5 to 7 days for standard mail delivery. A late fee of 1.5% of your balance will be charged on unpaid balances. Unpaid balances that exceed 30 days will result in service suspensions. There is a \$25.00 charge for any returned check. In addition you should be aware of Atlantech Online, Inc's policies regarding nonpayment for particular services. Atlantech provides a number of services including your local telephone service, long distance telephone service, Internet access, web hosting, data services, and certain professional services. Although nonpayment for local telephone service may result in a termination of local service, nonpayment of other services (such as long distance and Internet access) will not result in the termination of local telephone services. However, nonpayment for services other than local service may result in the termination of all services other than local telephone service.

HOW TO READ YOUR INVOICE

 atlantech|online
1010 Wayne Ave • Suite 630 • Silver Spring, MD 20910

1

Training Test Company
1860 HICKORY RD
ATLANTA, GA 30341-3206

1002160-94011206
9401-942

Remittance Section


Account Number	006446
Invoice Date	7/1/2019
Billing Period	06/07/19 to 07/31/19
Due Date	7/21/2019
Invoice Number	12442
Total Amount Due	\$3,023.69
Amount Enclosed	\$

Please remit payment to:
ATLANTECH ONLINE
1010 WAYNE AVE STE 630
SILVER SPRING, MD 20910

Please detach and return above portion with your payment. Please put your account number on your check and make payable to: **Atlantech Online**

Service Address	
1860 HICKORY RD ATLANTA, GA 30341	
Account Summary	
Account Number	006446
Customer Name	Training Test Company
Invoice Date	7/1/2019
Invoice Number	12442
Summary of Charges - Invoice 12442	
Previous Balance	\$0.00
Payment Received - Thank You	\$0.00
Balance Forward	\$0.00
New Charges	
Usage Charges	\$0.00
Recurring Charges	\$2,615.40
Nonrecurring Charges	\$310.00
Taxes and Surcharges	\$98.29
Total New Charges Due By 7/21/2019	\$3,023.69
Total Invoice Amount	\$3,023.69

2

 atlantech online Customer Service
301-589-3060
1010 Wayne Ave • Suite 630 • Silver Spring, MD 20910

Normal Business Hours: M-F 8am-5pm EST • 24/7 Support

Important Message

3

You Asked! We Listened! We now have an automated pay-by-phone system for our residential customers. To make a secure, fast, and easy payment by credit/debit card or bank account, please call 1-866-336-4466.

4

Enroll in auto bank draft or credit card payment today! Enrolling saves time, ensures your bill is paid on time and avoids a \$10 late fee. We will even give you a \$1 monthly credit for going green! With your account number, go to rittercommunications.com, click on My Bill and select TN to go green and start saving!

1 REMITTANCE SECTION

The Remittance portion should be removed and included with your payment in the envelope provided. Write in the amount enclosed in the space provided and indicate any changes on the back of the coupon.

2 STATEMENT INFORMATION

Information about your billing statement date, billing period and your account number are covered in this section.

3 SUMMARY OF CHARGES

An overview of the current status of your account starting with Beginning Balance, Payments and Adjustments applied since your last billing and your Current Balance. The current month's charges are summarized by category with the Total Amount Due at the bottom.

4 CUSTOMER MESSAGE

Watch this space for important information concerning your account and service.

Name: IMMUNITY, INC.
 Account #: 3427

Invoice Date: 6/1/2023
 Invoice #: 73041

Nonrecurring Charges

Description	Qty	Rate	Amount
OneTime - Charge for termination of service	1.00	5,760.00	5,760.00
Late Fee	1.00	27.59	27.59
Subtotal			\$5,787.59

Recurring Charges

Dedicated Ethernet : 2231 Crystal Drive, Suite 201 Arlington, VA 22202

Description	Qty	Rate	Amount
1Gig Dedicated Ethernet Internet Service	1.00	900.00	900.00
Recurring Charges Subtotal			\$900.00

Value Added/Additional Services Account Level Charges: 2231 Crystal Dr Arlington, VA 22202-3711

Description	Qty	Rate	Amount
POSTAL BILLING MONTHLY	1.00	6.00	6.00
Recurring Charges Subtotal			\$6.00



Immunity, Inc. - SALES OVERVIEW

New or Existing Customer: CID: 3427

Quote Number: N/A

Technical Contact (name, phone, email): Kevin McClure, (903) 744-2817, kevin.mcclure@appgate.com

Billing Contact: Same

Install address (includes Suite/Floor number): 2231 Crystal Drive Suite 201
Arlington VA 22202

Local Loop price: n/a

Bandwidth price: n/a

Domain Name and OS (for shared hosting): n/a

Third Party Contact information (for example... phone system vendor, LAN Integrator, web site designer):

Phone Numbers to be ported (or will there be all new numbers): n/a

Current Phone Company & Account #: n/a

Account Security Passphrase: Arlington VA

Postal or email billing: Same

Special Instructions: 1Gig Upgrade

Rev.io Entry
Date 12/9/2021
By RB



Sales Quotation

Company: Immunity, Inc.
 Contact: Kevin McClure
 Phone: (903) 744-2817
 Email: kevin.mcclure@appgate.com

Quote Date: 11/1/2021
 Quote ID: 211101-4784
 Sales Rep: Morgan Henry
 Phone: (301) 755-2251
 Email: mhenry@atlantech.net
 Term (Months): 24

Quote expires: 12/1/2021

Billing Address:

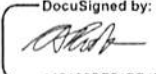

2231 Crystal Drive, Suite 201
 Arlington, VA 22202
 Send Invoices to: accountspayable@appgate.com

Monthly Recurring Charges	Description	Price	Qty	Total \$/Month
1GIAB	1Gig Dedicated Ethernet Internet Service	\$900.00	1	\$900.00

Quotation Summary:

Non Recurring Charges: \$0.00
 Security Deposit: \$0.00
 Monthly Recurring Charges: \$900.00
 Hardware: \$0.00
 Estimated Tax: \$0.00

Total Due Upon Execution: \$0.00

<p>Customer</p> <p>DocuSigned by:  142186BF51BB4FD</p> <p>Signature</p> <p>Rene Rodriguez</p> <hr/> <p>Print Name</p> <p>CFO</p> <hr/> <p>Title</p> <p>07-Dec-2021 2:57 PM EST</p> <hr/> <p>Date</p>	<p>Atlantech Online</p> <p>Signature</p> <p> Signature</p> <hr/> <p>Print Name</p> <p>Morgan Henry Director of Sales & Business Development</p> <hr/> <p>Title</p> <p>12/9/2021</p> <hr/> <p>Date</p>
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Governing MSA: Not applicable. An MSA has not been signed between Immunity and Atlantec.

Service Details:

- Pricing does not include taxes, fees or surcharges. Invoice sent via postal mail is \$5.00 per month. Emailed invoices are free.