

B2500A (Form 2500A) (12/15)

United States Bankruptcy Court

SOUTHERN District Of TEXAS (HOUSTON)

In re <u>Global Wound Care Medical Group, a Professional Corporation</u> , Debtor)	Case No. <u>24-34908 (CML)</u>
)	
)	Chapter <u>11</u>
)	
<u>Global Wound Care Medical Group, a Professional Corporation</u> Plaintiff)	
)	
v.)	Adv. Proc. No. <u>25-03121 (CML)</u>
)	
<u>Wells Fargo Bank, N.A.</u> Defendant)	

SUMMONS IN AN ADVERSARY PROCEEDING

YOU ARE SUMMONED and required to file a motion or answer to the complaint which is attached to this summons with the clerk of the bankruptcy court within 30 days after the date of issuance of this summons, except that the United States and its offices and agencies shall file a motion or answer to the complaint within 35 days.

Address of the clerk: U.S. Bankruptcy Court for the Southern District of Texas
 Bob Casey, United States Courthouse
 515 Rusk Avenue
 Houston, Texas 77002
 Attn: Case Manager to the Honorable Christopher M. Lopez

At the same time, you must also serve a copy of the motion or answer upon the plaintiff's attorney.

Name and Address of Plaintiff's Attorney: Togut, Segal & Segal LLP
 One Penn Plaza, Suite 3335
 New York, New York 10119
 Attention: Kyle J. Ortiz, Esq.

If you make a motion, your time to answer is governed by Fed. R. Bankr. P. 7012.

IF YOU FAIL TO RESPOND TO THIS SUMMONS, YOUR FAILURE WILL BE DEEMED TO BE YOUR CONSENT TO ENTRY OF A JUDGMENT BY THE BANKRUPTCY COURT AND JUDGMENT BY DEFAULT MAY BE TAKEN AGAINST YOU FOR THE RELIEF DEMANDED IN THE COMPLAINT.

Nathan Ochsner, Clerk of Court



Date: April 9, 2025



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CERTIFICATE OF SERVICE

I, _____(name), certify that service of this summons and a copy of the complaint was made _____(date) by:

- Mail service: Regular, first class United States mail, postage fully pre-paid, addressed to:

- Personal Service: By leaving the process with the defendant or with an officer or agent of defendant at:

- Residence Service: By leaving the process with the following adult at:

- Certified Mail Service on an Insured Depository Institution: By sending the process by certified mail addressed to the following officer of the defendant at:

- Publication: The defendant was served as follows: [Describe briefly]

- State Law: The defendant was served pursuant to the laws of the State of _____, as follows: [Describe briefly]

If service was made by personal service, by residence service, or pursuant to state law, I further certify that I am, and at all times during the service of process was, not less than 18 years of age and not a party to the matter concerning which service of process was made.

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

Date _____ Signature _____

Print Name: _____

Business Address: _____
