Hearing Date: No hearing scheduled
Location: <<CourtRoomNumber>>
Judge: Calendar, I

FILED
12/8/2022 9:31 AM
IRIS Y. MARTINEZ
CIRCUIT CLERK
COOK COUNTY, IL
2022L010246
Calendar, I
20595990

FILED DATE: 12/8/2022 9:31 AM 2022L010246

IMPORTANT: The *Summons* form is currently being revised. **If you are suing more than 1 Defendant/Respondent, fill out a *Summons* form for each Defendant/Respondent.** Ignore the directions on the *Summons* to fill out an *Additional Plaintiff/Petitioner Contact Information* form or *Additional Defendant/Respondent Contact Information* form.

Please check back on this site when the new *Summons* is available.

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STATE OF ILLINOIS, CIRCUIT COURT

Cook **COUNTY**

SUMMONS

For Court Use Only

Instructions

Enter above the county name where the case was filed.

Enter your name as Plaintiff/Petitioner.

Enter the names of all people you are suing as Defendants/ Respondents.

Enter the Case Number given by the Circuit Clerk.

30 Degree Design LLC, Brad, Behmer, Kenneth Mayle
Plaintiff / Petitioner *(First, middle, last name)*

v.

GP Opportunity Fund LLC
Defendant / Respondent *(First, middle, last name)*

2022 L 010246
Case Number

In **1**, if your lawsuit is for money, enter the amount of money you seek from the Defendant/ Respondent.

In **2**, enter your contact information. If more than 1 person is bringing this lawsuit, attach an *Additional Plaintiff/Petitioner Contact Information* form.

In **3**, enter the name of the person you are suing and their address. If more than 1 person is being sued, attach an *Additional Defendant/Respondent Contact Information* form.

1. Information about the lawsuit:

Amount claimed: $ 171.60

2. Contact information for the Plaintiff/Petitioner:

Name *(First, Middle, Last)*: Matthew Gurvey
Street Address, Apt #: 1793 Saunders Road
City, State, ZIP: Riverwoods IL 60015
Telephone: (312) 391-7420
See attached for additional Plaintiff/Petitioner contact information

3. Contact information for the Defendant/Respondent:

Name *(First, Middle, Last)*: GP Opportunity Fund LLC c/o GP Opportunity Corp
Street Address, Apt #: 7355 Garden Street
City, State, ZIP: River Forest IL 60305
Telephone:
See attached for additional Defendant/Respondent contact information

Important Information for the person receiving this form:

You have been sued.

Follow the instructions on the next page on how to appear/answer.

- If you do not appear/answer the court may decide the case without hearing from you and enter a judgment against you for what the plaintiff/petitioner is asking.
- Your written appearance/answer must be filed on time and in the proper form.
- Forms for a written appearance/answer are available here: http://www.illinoiscourts.gov/forms/approved/default.asp

If you cannot afford to pay the fee for filing your appearance/answer, ask the circuit clerk for an *application for waiver of court fees.*

You should read all of the documents attached.

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In **4**, the Circuit Clerk will give you the court date or appearance date, check any boxes that apply, and include the address of the court building and room where the Defendant/ Respondent must file their response.

4. Instructions for person receiving this form (Defendant/Respondent):

To respond to this *Summons* you must:

☑ Go to court:
On this date: 01/17/2023 at this time: 9:30 ☑ a.m. ☐ p.m.
Address: 50 W Washington Court Room: 1906 via Zoom
City, State, ZIP: Chicago IL 60601

☐ File a written *Appearance* and *Answer/Response* with the court:
On or before this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____

☐ File a written *Appearance* and *Answer/Response* with the court within 30 days from the day you receive this *Summons* (listed below as the "Date of Service").
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____

12/8/2022 9:31 AM IRIS Y. MARTINEZ

STOP!
The Circuit Clerk will fill in this section.

Witness this Date: _____

Clerk of the Court: _____

CIRCUIT COURT OF COOK COUNTY, ILLINOIS

Seal of Court

STOP!
The officer or process server will fill in the Date of Service.

This *Summons* must be served within 30 days of its date, listed above.

Date of Service: _____

(Date to be entered by an officer or process server on the copy of this Summons left with the Defendant/Respondent or other person.)

Plaintiff/Petitioner: To serve this *Summons*, you must hire the sheriff (or a private process server outside of Cook County) to deliver it and your Complaint/Petition to the Defendant/Respondent. If the sheriff (or private process server outside of Cook County) tries but can't serve the *Summons*, fill out another summons and repeat this process.

Attention: E-Filing is now mandatory for documents in civil cases with limited exemptions. To e-file, you must first create an account with an e-filing service provider. Visit http://efile.illinoiscourts.gov/service-providers.htm to learn more and to select a service provider. If you need additional help or have trouble e-filing, visit http://www.illinoiscourts.gov/faq/gethelp.asp. or talk with your local circuit clerk's office.

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STATE OF ILLINOIS, CIRCUIT COURT Cook COUNTY	AFFIDAVIT OF SERVICE OF SUMMONS AND COMPLAINT/PETITION	For Court Use Only

Instructions	
Enter above the county name where the case was filed.	
Enter your name as Plaintiff/Petitioner.	30 Degree Design LLC, Brad, Behmer, Kenneth Mayle **Plaintiff / Petitioner** *(First, middle, last name)*
Enter the name of the person you are suing as Defendant/Respondent.	v.
Enter the Case Number given by the Circuit Clerk.	GP Opportunity Fund LLC **Defendant / Respondent** *(First, middle, last name)* 2022 L 010246 **Case Number**

****Stop. Do not complete the form. The sheriff will fill in the form.****

DO NOT complete this section. The sheriff will complete it.

My name is _____ **and I swear under oath**
First, Middle, Last

that I served the *Summons* and Complaint/Petition on the Defendant/Respondent

_____ **as follows:**
First, Middle, Last

☐ Personally on the Defendant/Respondent:
Male: ☐ Female: ☐ Approx. Age: _____ Hair Color: _____
Height: _____ Weight: _____
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____

☐ At the Defendant/Respondent's home:
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____
And left it with: _____
First, Middle, Last
Male: ☐ Female: ☐ Approx. Age: _____
and by sending a copy to this defendant in a postage-paid, sealed envelope to the above address on _____ , 20 _____ .

☐ On the Corporation's agent, _____
First, Middle, Last
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____

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DO NOT complete this section. The sheriff, or private process server will complete it.

By:

_____
Signature

_____
Print Name

FEES

By certified/registered $ _____
Service and Return $ _____
Miles: _____ $ _____
Total $ _____