

IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT
IN AND FOR BROWARD COUNTY, FLORIDA

SEMINOLE TRIBE OF FLORIDA,
A federally recognized Indian Tribe
Under 25 U.S.C. § 476, d/b/a CCC/SG,
d/b/a SEMINOLE CLASSIC CASINO, and
d/b/a SEMINOLE HARD ROCK HOTEL &
CASINO-TAMPA

CASE NO.: _____

CIRCUIT CIVIL DIVISION

Plaintiff,

vs.

JEFFREY TOLL

Defendant,

COMPLAINT FOR MONEY DAMAGES

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. § 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

GENERAL ALLEGATIONS

1. This is an action for money damages that exceed \$15,000.00.
2. Defendant is *sui juris*.
3. Plaintiff is a federally recognized Indian Tribe under 25 U.S.C. § 476.
4. Plaintiff is authorized and does conduct business under the fictitious name of CCC/SG.
5. Plaintiff is authorized and does conduct business under the fictitious name of SEMINOLE CLASSIC CASINO.
6. Plaintiff is authorized and does conduct business under the fictitious name of SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA.
7. Venue is proper in Broward County, Florida: (1) As the instruments of debt, which form the basis of this action, were signed and delivered in Broward County and; (2) The parties agreed, in Plaintiff's attached Exhibit C, that venue would be in the

county in which the Plaintiff is located, and the Plaintiff is located in Broward County, Florida.

COUNT I

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. & 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

8. Plaintiff hereby adopts and re-alleges above allegations numbered 1-7, inclusive.
9. On May 24, 2017, May 25, 2017, May 26, 2017, May 29, 2017, June 25, 2017 & June, 26, 2017, JEFFREY TOLL executed written orders for payment to CCC/SG, in the total amount of \$399,990.00. Said written orders, commonly called checks, were then delivered to the Plaintiff by JEFFREY TOLL. Copies of the checks (numbering a total of 10) are hereby attached to and incorporated herein as Plaintiff's Exhibit A. The checks were presented for payment to the drawee bank, but payment, as to all checks, was refused.
10. To date, JEFFREY TOLL has repaid \$6,394.11 of the amount claimed as due and owing.
11. JEFFREY TOLL owes Plaintiff \$393,595.89 that is due with interest from June 26, 2017, on the checks.
12. Plaintiff is obligated to pay Plaintiff's attorney a reasonable fee for the attorney's services.

WHEREFORE Plaintiff demands judgement for damages against JEFFREY TOLL.

COUNT II

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. § 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

13. Plaintiff hereby adopts and re-alleges above allegations numbered 1-7, inclusive.
14. On May, 24th, 25th, 26th, 29th, 2017, & June 25th, & 26th, 2017, JEFFREY TOLL executed written orders for payment to CCC/SG, in the total amount of 399,990.00: Said written orders, commonly called drafts, were delivered to the Plaintiff by JEFFREY TOLL. Copies of the drafts (numbering a total of 10), are hereby attached to and incorporated herein as Plaintiff's Exhibit A.
15. The drafts were presented for payment to the drawee bank, but payment, as to all drafts, was refused.
16. To date, JEFFREY TOLL has repaid \$6,394.11 of the amount claimed as due and owing.
17. JEFFREY TOLL owes Plaintiff \$393,595.89 that is due with interest from the June 26th, 2017, on the drafts.
18. Plaintiff is obligated to pay Plaintiff's attorney a reasonable fee for attorney's services.

WHEREFORE Plaintiff demands judgement for damages against JEFFREY TOLL.

COUNT III

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. § 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

19. Plaintiff hereby adopts and re-alleges above allegations numbered 1-7, inclusive.
20. On May 24th, 25th, 26th, 29, 2017, & June 25th, & 26th, 2017, JEFFREY TOLL executed written orders for payment to CCC/SG, in the total amount of \$399,990.00: Said written orders, commonly called checks, were delivered to the Plaintiff by JEFFREY TOLL. Copies of the checks (numbering a total of 10), are hereby attached to and incorporated herein as Plaintiff's Exhibit A.
21. The checks were presented for payment to the drawee bank, but payment, as to all checks, was refused.
22. To date, JEFFREY TOLL has repaid \$6,394.11 of the amount claimed as due and owing.

23. JEFFREY TOLL owes Plaintiff \$393,595.89 that is due with interest from June 26th, 2017, on the checks.
24. Plaintiff provided Defendant formal notice as required by statute, a copy of which is attached hereto and incorporated herein as Plaintiff's Composite Exhibit B. Defendant has failed to pay the amount stated in the notice.
25. All conditions precedent have been performed.
26. Plaintiff has retained undersigned counsel and is obliged to pay its attorney a reasonable fee for legal services. Florida Statutes, Section 68.065 allows Plaintiff to recover a reasonable attorney's fee.
27. JEFFREY TOLL expressly acknowledged application of F.S. 68.065 by way of Plaintiff's Exhibit C.

WHEREFORE Plaintiff demands judgment against JEFFREY TOLL for damages, in the amount of \$318,595.89, plus three times the amount of the checks, service charges or five percent of the total check amount, interest, costs and attorney's fees.

COUNT IV

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. § 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

28. Plaintiff hereby adopts and re-alleges above allegations numbered 1-7, inclusive.
29. Defendant owes Plaintiff \$393,595.89 that is due with interest since June 26th, 2017, for money lent by Plaintiff to JEFFREY TOLL.

WHEREFORE Plaintiff demands judgment for damages against JEFFREY TOLL.

COUNT V

Plaintiff, SEMINOLE TRIBE OF FLORIDA, a federally recognized Indian Tribe, under 25 U.S.C. § 476, d/b/a CCC/SG, d/b/a SEMINOLE CLASSIC CASINO, and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA, sues Defendant, JEFFREY TOLL, and alleges:

30. Plaintiff hereby adopts and re-alleges above allegations numbered 1-7, inclusive.
31. Pursuant to that certain Credit Request, dated 12-1-16, and subsequently amended by way of Limit Changes, JEFFREY TOLL did request that the Plaintiff extend him credit. The Credit Request is attached hereto and incorporated herein as Plaintiff's Exhibit C.
32. Acting in reliance on the promise of payment by JEFFREY TOLL, as set forth in Plaintiff's Exhibit C, Plaintiff did extend credit to JEFFREY TOLL, on May 24th, 25th, 26th, 29, 2017, & June 25th & 26th, 2017, in the total amount of \$399,990.00, as evidenced by Plaintiff's Exhibit A.
33. Defendant is legally obligated to act and perform per the terms and conditions of Plaintiff's Exhibit C.
34. Pursuant to the terms and conditions of Plaintiff's Exhibit C, JEFFREY TOLL owes Plaintiff \$393,595.89, plus interest from June 26th, 2017, and all attorney's fees and costs incurred by Plaintiff's.

WHEREFORE Plaintiff demands judgment for damages against JEFFREY TOLL.

KOPPEN, WATKINS, PARTNERS
& ASSOCIATES, A Professional Association
Attorneys for Plaintiff, Seminole Tribe of Florida
900 W. Linton Blvd., Suite 202
Delray Beach, Florida 33444
Telephone: 561-279-9872
Fax: 561-279-9873
E-mail: law@koppwatpa.com

BY: /s/ R. Daniel Koppen, Esq.
R. DANIEL KOPPEN, Esq.
Fla. Bar No.:230065

This is an attempt to collect a debt, and any information obtained will be used for that purpose.

For user: [redacted] Security Code: 00000000
 Account #: [redacted] Card type: 00000000 Expiration Date: 000000000000

①

STEPHANIE KIRSCHBAUM
 JEFFREY W. TOLL
 215 SE 8TH AVE. UNIT 1030
 FORT LAUDERDALE, FL 33301

E*TRADE COMPLETE 1019
 05/26/17
 Date

Pay to the Order of: ccc/sg \$ 25,000
Twenty Five Thousand Dollars

For: Marker Payment

E*TRADE Bank, Arlington, VA

For Deposit Only to
 Seminar Note
 Seminole
 Classic
 Deposited by: tallen
 CHECK # 014883
 Date: 05/27/17

Do not write on this check
 If you have any questions
 call 1-800-368-6767

Electronic Data Service

| Date | Sequence | Bank # | Bank Type | TRF | AC | Bank Name |
|------------|------------------|------------------|--------------|-----|----|---------------------|
| 05/31/2017 | [redacted] 1794 | [redacted] 01573 | Undetermined | N | A | E*TRADE BANK |
| 05/30/2017 | [redacted] 1794 | [redacted] 0146 | Undetermined | N | A | FEDERAL RES BANK OF |
| 06/01/2017 | [redacted] 0324 | [redacted] 2822 | Undetermined | N | A | BANK OF AMERICA, NA |
| 06/01/2017 | [redacted] 73970 | [redacted] 0146 | Undetermined | N | A | FEDERAL RES BANK OF |

DOC NO SPK 033615
 EX A PG 1 of 0

Account: ██████████ Sequence Number: 0111100700
Account: ██████████ Capture Date: 06/27/2017 Product Code: 000000 ACCOUNT

Check Number: 931000 Check Amount: ██████████

③

WELLS FARGO BANK, NA
12700 WOODBRIDGE BLVD
MIDLAND, TX 79706
USA

SMK000070

Pay to the Order of: CCG/SS
Fourteen Thousand Nine Hundred Dollars and 00/100

14,900.00

75630

000014900000

Seq: 18
Dep: 015671
Date: 06/27/17

For Depos
Only to
State of Florida
Seminar
Classic
Deposited
y: Intrel

Electronic Endorsements:

| Date | Sequence | Bank # | Endrs Type | TRF | REC | Bank Name |
|------------|----------------|-----------------|--------------|-----|-----|----------------------|
| 06/28/2017 | ██████████5200 | ██████████1022 | Undetermined | N | D | BANK OF AMERICA, NA |
| 06/27/2017 | ██████████7986 | ██████████70743 | Undetermined | N | D | WELLS FARGO BANK, NA |

Account: ██████████ Reference Number: 0001151005
 Account: ██████████ Reference Number: 0001151005 Branch Code: 0000000000

Serial Number: 61000111 Check Number: 2

WELLS FARGO BANK NA 0001151005 0000000000
 WELLS FARGO BANK NA 0001151005 0000000000
 WELLS FARGO BANK NA 0001151005 0000000000

Pay to the Order of: 000000
 Five Thousand Ninety Dollars and Zero Cents

④

751301 0000000000

Seq: 26
 Depr: 015671
 Date: 06/27/2017

For Deposit Only to
 Savings
 Certificate of Florida
 Deposited in
 Florida

Electronic Endorsements:

| Date | Sequence | Bank # | Endro Type | TRM | RFC | Bank Name | |
|------------|------------|-----------|--------------|--------------|-----|-----------|----------------------|
| 06/27/2017 | 0000012300 | 7504 | 121270742 | Undetermined | N | D | WELLS FARGO BANK, NA |
| 06/25/2017 | 0000012307 | 111012822 | Undetermined | N | D | D | BACK OF AMERICA, NA |

Account: [REDACTED]
Account: [REDACTED]

Sequence Number: 2034068296
Capture Date: 06/28/2017
Reason Code: CLEDDO ACC00077

Bank Number: 63100177

Check Number: 9

WELLS FARGO BANK, NA
VILLANOVA UNIVERSITY
300 E LANCASTER AVE
VILLANOVA, Pennsylvania 19085

TOLL, JEFFREY W
401 E LAS OLAS BLVD STE 120-192
FORT LAUDERDALE FL 33301-2310

STAK10007213

Acct: [REDACTED] 88571
Date: 06/28/2017

Pay to the Order of: CCGSB
Fifty Thousand Dollars and No Cents

\$50,000.00

Signed

I represent that the amount shown on this check is now on deposit to my credit in the bank named herein, and I hereby authorize payment. I agree to pay this check payment. I authorize the payee to cash this check.

[REDACTED SIGNATURE]

Seq: 19
Dep: 015671

For Deposit Only to
Seminole State of Florida
Classic
Deposited by hand

Electronic Endorsements:

| Date | Sequence | Bank # | Endrs Type | TTM | RFC | Bank Name |
|------------|------------------|------------|--------------|-----|-----|----------------------|
| 06/27/2017 | [REDACTED] 17567 | [REDACTED] | Undetermined | H | D | WELLS FARGO BANK, NA |
| 06/29/2017 | [REDACTED] 5205 | [REDACTED] | Undetermined | H | D | BANK OF AMERICA, NA |

Amount: [REDACTED] Sequence Number: 2034153296
Account: [REDACTED] Capture Date: 06/29/2017 Federal Office: CLOSED ACCOUNT

Bank Number: 43187277 Check Number: 0

WELLS FARGO BANK, NA TOULI, JEFFREY W. A/C# 10087318
VILLANOVA UNIVERSITY 601 E LAS OLAS BLVD STE 130-192
800 E CANCASTER AVE FORT LAUDERDALE FL 33301-0210
VILLANOVA PENNSYLVANIA 19085

Pay to the Order of: CCE/SG \$20,000.00
Twenty Thousand Dollars and No Cents

I warrant that the amount shown on this check is due and payable to my order or to the order of the person named above and to be duly cashed in person. Failure to do so may result in the issuer being liable to the payee for the amount of this check.

Seq: 20
Exp: 015671

For Deposit Only to
Seminole State of Florida
Classic
Deposited by: karel

Electronic Endorsements:

| Date | Sequence | Bank # | Ends Type | TRN | RFC | Bank Name |
|------------|-----------------|------------|--------------|-----|-----|----------------------|
| 06/27/2017 | [REDACTED] 7500 | [REDACTED] | Undetermined | N | D | WELLS FARGO BANK, NA |
| 06/29/2017 | [REDACTED] 5200 | [REDACTED] | Undetermined | N | D | BANK OF AMERICA, NA |

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CLOSED ACCOUNT

WELLS FARGO BANK, NA
VILLANOVA UNIVERSITY
800 E LANCASTER AVE
VILLANOVA PENNSYLVANIA 19085

TOLL JEFFREY W
401 E LAS OLAS BLVD STE 130-192
FORT LAUDERDALE FL 33301-2210

Acct: [REDACTED]
Date: 5/29/2017
TMK10101304

Pay to the Order of: CCC/SG
Twenty Thousand Dollars and No Cents

I represent that the amount shown on this check is now on deposit in my account in the bank named herein, free of any claims, and hereby assigned in return. I enclose my receipt and a payment. I authorize the return to someone in possession of this check.

Signed
[Signature]

\$20,000.00

000000001*
1390*
5*

RETURN REASON-D
CLOSED ACCOUNT

This is a LEGAL COPY of your check. You can use it the same way you would use the original check.

28822*
07/03/2017
[REDACTED]

6426324
1380 06/29/2017

KOPPEN, WATKINS, PARTNERS & ASSOCIATES
A PROFESSIONAL ASSOCIATION

R. DANIEL KOPPEN
ATTORNEY AT LAW

Jeffrey Toll
401 E. Las Olas Blvd.
Suite 130-192
Fort Lauderdale, FL 33301-2210

900 W. LINTON BLVD., SUITE 202
DELRAY BEACH, FLORIDA 33444
PHONE: 561-279-9872
FAX: 561-279-9873
E-mail: law@koppwatpa.com

Cert mail no.: 7017-1070-0000-8587-2375

January 13, 2018

RE: STATUTORY NOTICE

Dear Mr. Toll:

You are hereby notified that the below identified checks (copies of which are hereby attached), in the total face amount of \$324,990.00, issued by Jeffrey W. Toll, drawn upon E-TRADE Bank, Arlington, VA., Account No. [REDACTED] as to below identified Document Nos. 1-2; and Wells Fargo Bank, N.A., Account No. [REDACTED] as to below identified Document Nos. 3-7; all seven (7) payable to CCC/SG, have been dishonored:

| DOCUMENT | DOC NO | DATE | FACE AMOUNT |
|--------------|--------|---------|--------------|
| SPK 033615 | 1 | 6-26-17 | \$25,000.00 |
| SPK 034092 | 2 | 5-24-17 | \$150,000.00 |
| SMK 095078 | 3 | 5-25-17 | \$ 14,900.00 |
| SMK 095091 | 4 | 5-26-17 | \$5,090.00 |
| SMK 10007213 | 5 | 6-25-17 | \$50,000.00 |
| SMK 10007214 | 6 | 6-25-17 | \$60,000.00 |
| SMK 10007218 | 7 | 6-25-17 | \$20,000.00 |

NOTE: The above seven (7) dishonored documents total \$324,990.00: However, between the inclusive dates of 6-4-17 and 8-5-17 several payments in the total amount of \$6,394.11 were received and applied to the principal debt; thus reducing the debt to \$318,595.89. The following 5% service charge was calculated on the principal sum of \$318,595.89.

Pursuant to Florida law, you have 30 days from receipt of this notice to tender payment of the full amount of the checks plus a service charge of \$25, if the face value does not exceed

EX B 1 of 8

\$50, \$30 if the face value exceeds \$50 but does not exceed \$300, \$40 if the face value exceeds \$300, or 5 percent of the face amount of the checks, whichever is greater, the total amount due being \$334,525.68. Unless this amount is paid in full within the 30 day period, the holder of the checks or instruments may file a civil action against you for three times the amount of the checks, but in no case less than \$50, in addition to payment of the checks plus court costs, reasonable attorneys' fees, and any bank fees incurred by the payee in taking the action.

Florida State Statute §68.065 is applicable to the above identified instruments, as set forth in the attached Credit Request, dated 12-1-16.

The original and current Creditor, to whom the debt is owed, is SEMINOLE TRIBE OF FLORIDA, A Federally recognized Indian Tribe Under 25 U.S.C § 476, d/b/a CCC/SG and d/b/a SEMINOLE CLASSIC CASINO. The Creditor has retained Debt Collector, HUGHES, MARTINI & ASSOCIATES, LLC, a Florida limited liability company, d/b/a Martini, Hughes & Grossman (hereinafter referred to as MHG); and MHG has retained the undersigned law firm/debt collector, to serve as the attorney for MHG.


Unless you, within thirty days after receipt of this notice, dispute the validity of the debt, or any portion thereof, the debt will be assumed to be valid by the debt collectors.

If you notify the debt collectors in writing within the thirty-day period that the debt, or any portion thereof, is disputed, the debt collectors will obtain verification of the debt or a copy of a judgment against you and copy of such verification or judgment will be mailed to you by the debt collectors.

Upon your written request within the thirty-day period, the debt collectors will provide you with the name and address of the original creditor, if different from the current creditor.

THE ABOVE IDENTIFIED DEBT COLLECTORS ARE ATTEMPTING TO COLLECT A DEBT. ANYTHING YOU SAY AND ANY INFORMATION YOU GIVE TO THE DEBT COLLECTORS WILL BE USED FOR THAT PURPOSE.

KOPPEN, WATKINS, PARTNERS
& ASSOCIATES, A Professional Association
900 W. Linton Blvd., Suite 202
Delray Beach, Florida 33444
Telephone: 561-279-9872
Fax: 561-279-9873
E-mail: law@koppwatpa.com

BY: 
R. DANIEL KOPPEN, Esq.
Fla. Bar No.:230065

EX B 2 of 8

KOPPEN, WATKINS, PARTNERS & ASSOCIATES

A PROFESSIONAL ASSOCIATION

R. DANIEL KOPPEN
ATTORNEY AT LAW

Jeffrey Toll
401 E. Las Olas Blvd.
Suite 130-192
Fort Lauderdale, FL 33301-2210

900 W. LINTON BLVD., SUITE 202
DELRAY BEACH, FLORIDA 33444
PHONE: 561-279-9872
FAX: 561-279-9873
E-mail: law@koppwatpa.com

Cert mail no.: 7017-1070-0000-8587-2382

January 13, 2018

RE: STATUTORY NOTICE

Dear Mr. Toll:

You are hereby notified that the below identified checks (copies of which are hereby attached), in the total face amount of \$75,000.00, issued by Jeffrey W. Toll, drawn upon Wells Fargo Bank, N.A., Account No. [REDACTED] and payable to CCC/SG, have been dishonored:

| DOCUMENT | DATE | FACE AMOUNT |
|--------------|---------|--------------|
| TMK 10181304 | 5-29-17 | \$20,000.00 |
| TMK 211979 | 5-29-17 | \$30,000.00 |
| TMK 212000 | 5-29-17 | \$ 25,000.00 |

Pursuant to Florida law, you have 30 days from receipt of this notice to tender payment of the full amount of the checks plus a service charge of \$25, if the face value does not exceed \$50, \$30 if the face value exceeds \$50 but does not exceed \$300, \$40 if the face value exceeds \$300, or 5 percent of the face amount of the checks, whichever is greater, the total amount due being \$78,750.00. Unless this amount is paid in full within the 30 day period, the holder of the checks or instruments may file a civil action against you for three times the amount of the checks, but in no case less than \$50, in addition to payment of the checks plus court costs, reasonable attorneys' fees, and any bank fees incurred by the payee in taking the action.

Florida State Statute §68.065 is applicable to the above identified instruments, as set forth in the attached Credit Request, dated 12-1-16.

The original and current Creditor, to whom the debt is owed, is SEMINOLE TRIBE OF FLORIDA, A Federally recognized Indian Tribe Under 25 U.S.C § 476, d/b/a CCC/SG and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA. The Creditor has retained Debt Collector, HUGHES, MARTINI & ASSOCIATES, LLC, a Florida limited liability company, d/b/a Martini,

Ex B 3 of 8

Hughes & Grossman (hereinafter referred to as MHG); and MHG has retained the undersigned law firm/debt collector, to serve as the attorney for MHG.

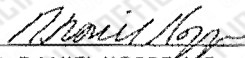
Unless you, within thirty days after receipt of this notice, dispute the validity of the debt, or any portion thereof, the debt will be assumed to be valid by the debt collectors.

If you notify the debt collectors in writing within the thirty-day period that the debt, or any portion thereof, is disputed, the debt collectors will obtain verification of the debt or a copy of a judgment against you and copy of such verification or judgment will be mailed to you by the debt collectors.

Upon your written request within the thirty-day period, the debt collectors will provide you with the name and address of the original creditor, if different from the current creditor.

THE ABOVE IDENTIFIED DEBT COLLECTORS ARE ATTEMPTING TO COLLECT A DEBT. ANYTHING YOU SAY AND ANY INFORMATION YOU GIVE TO THE DEBT COLLECTORS WILL BE USED FOR THAT PURPOSE.

KOPPEN, WATKINS, PARTNERS
& ASSOCIATES, A Professional Association
900 W. Linton Blvd., Suite 202
Delray Beach, Florida 33444
Telephone: 561-279-9872
Fax: 561-279-9873
E-mail: law@koppwatpa.com

BY: 
R. DANIEL KOPPEN, Esq.
Fla. Bar No.:230065

EX B 4 of 8

KOPPEN, WATKINS, PARTNERS & ASSOCIATES

A PROFESSIONAL ASSOCIATION

R. DANIEL KOPPEN
ATTORNEY AT LAW

Jeffrey Toll
215 S.E. 8th Ave.
Unit 1930
Fort Lauderdale, FL 33301-2210

900 W. LINTON BLVD., SUITE 202
DELRAY BEACH, FLORIDA 33444
PHONE: 561-279-9872
FAX: 561-279-9873
E-mail: law@koppwatpa.com

Cert mail no.: 7017-1070-0000-8587-2399

January 16, 2018

RE: STATUTORY NOTICE

Dear Mr. Toll:

You are hereby notified that the below identified checks (copies of which are hereby attached), in the total face amount of \$324,990.00, issued by Jeffrey W. Toll, drawn upon E-Trade Bank, Arlington, VA, Account No. [REDACTED] as to below identified Documents Nos. 1-2; and Wells Fargo Bank, N.A., Account No. [REDACTED] as to below identified Documents Nos. 3-7; all seven(7) payable CCC/SG, have been dishonored:

| DOCUMENT | DOC NO. | DATE | FACE AMOUNT |
|--------------|---------|---------|--------------|
| SPK 033615 | 1 | 6-26-17 | \$25,000.00 |
| SPK 034092 | 2 | 5-24-17 | \$150,000.00 |
| SMK 095078 | 3 | 5-25-17 | \$ 14,900.00 |
| SMK 095091 | 4 | 5-26-17 | \$5,090.00 |
| SMK 10007213 | 5 | 6-25-17 | \$50,000.00 |
| SMK 10007214 | 6 | 6-25-17 | \$60,000.00 |
| SMK 10007218 | 7 | 6-25-17 | \$20,000.00 |

NOTE: The above seven (7) dishonored documents total \$324,900.00: However, between the inclusive dates of 6-4-17 and 8-5-17 several payments in the total amount of \$6,394.11 were received and applied to the principal debt; thus reducing the debt to \$318,595.89. The following 5% service charge was calculated on the principal sum of \$318,595.89.

Pursuant to Florida law, you have 30 days from receipt of this notice to tender payment of the full amount of the checks plus a service charge of \$25, if the face value does not exceed

EX B 5 of 8

\$50, \$30 if the face value exceeds \$50 but does not exceed \$300, \$40 if the face value exceeds \$300, or 5 percent of the face amount of the checks, whichever is greater, the total amount due being \$334,525.68. Unless this amount is paid in full within the 30 day period, the holder of the checks or instruments may file a civil action against you for three times the amount of the checks, but in no case less than \$50, in addition to payment of the checks plus court costs, reasonable attorneys' fees, and any bank fees incurred by the payee in taking the action.

Florida State Statute §68.065 is applicable to the above identified instruments, as set forth in the attached Credit Request, dated 12-1-16.

The original and current Creditor, to whom the debt is owed, is SEMINOLE TRIBE OF FLORIDA, A Federally recognized Indian Tribe Under 25 U.S.C § 476, d/b/a CCC/SG and d/b/a SEMINOLE CLASSIC CASINO. The Creditor has retained Debt Collector, HUGHES, MARTINI & ASSOCIATES, LLC, a Florida limited liability company, d/b/a Martini, Hughes & Grossman (hereinafter referred to as MHG); and MHG has retained the undersigned law firm/debt collector, to serve as the attorney for MHG.

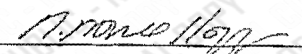
Unless you, within thirty days after receipt of this notice, dispute the validity of the debt, or any portion thereof, the debt will be assumed to be valid by the debt collectors.

If you notify the debt collectors in writing within the thirty-day period that the debt, or any portion thereof, is disputed, the debt collectors will obtain verification of the debt or a copy of a judgment against you and copy of such verification or judgment will be mailed to you by the debt collectors.

Upon your written request within the thirty-day period, the debt collectors will provide you with the name and address of the original creditor, if different from the current creditor.

THE ABOVE IDENTIFIED DEBT COLLECTORS ARE ATTEMPTING TO COLLECT A DEBT. ANYTHING YOU SAY AND ANY INFORMATION YOU GIVE TO THE DEBT COLLECTORS WILL BE USED FOR THAT PURPOSE.

KOPPEN, WATKINS, PARTNERS
& ASSOCIATES, A Professional Association
900 W. Linton Blvd., Suite 202
Delray Beach, Florida 33444
Telephone: 561-279-9872
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BY: 
R. DANIEL KOPPEN, Esq.
Fla. Bar No.:230065

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KOPPEN, WATKINS, PARTNERS & ASSOCIATES
A PROFESSIONAL ASSOCIATION

R. DANIEL KOPPEN
ATTORNEY AT LAW

Jeffrey Toll
215 S.E. 8th Ave.
Unit 1930
Fort Lauderdale, FL 33301-2210

900 W. LINTON BLVD., SUITE 202
DELRAY BEACH, FLORIDA 33444
PHONE: 561-279-9872
FAX: 561-279-9873
E-mail: law@koppwatpa.com

Cert mail no.: 7017-1070-0000-8587-2412

January 16, 2018

RE: STATUTORY NOTICE

Dear Mr. Toll:

You are hereby notified that the below identified checks (copies of which are hereby attached), in the total face amount of \$75,000.00, issued by Jeffrey W. Toll, drawn upon Wells Fargo Bank, N.A., Account No. [REDACTED] and payable to CCC/SG, have been dishonored:

| DOCUMENT | DATE | FACE AMOUNT |
|--------------|---------|-------------|
| TMK 10181304 | 5-29-17 | \$20,000.00 |
| TMK 211979 | 5-29-17 | \$30,000.00 |
| TMK 212000 | 5-29-17 | \$25,000.00 |

Pursuant to Florida law, you have 30 days from receipt of this notice to tender payment of the full amount of the checks plus a service charge of \$25, if the face value does not exceed \$50, \$30 if the face value exceeds \$50 but does not exceed \$300, \$40 if the face value exceeds \$300, or 5 percent of the face amount of the checks, whichever is greater, the total amount due being \$78,750.00. Unless this amount is paid in full within the 30 day period, the holder of the checks or instruments may file a civil action against you for three times the amount of the checks, but in no case less than \$50, in addition to payment of the checks plus court costs, reasonable attorneys' fees, and any bank fees incurred by the payee in taking the action.

Florida State Statute §68.065 is applicable to the above identified instruments, as set forth in the attached Credit Request, dated 12-1-16.

The original and current Creditor, to whom the debt is owed, is SEMINOLE TRIBE OF FLORIDA, A Federally recognized Indian Tribe Under 25 U.S.C § 476, d/b/a CCC/SG and d/b/a SEMINOLE HARD ROCK HOTEL & CASINO-TAMPA. The Creditor has retained Debt Collector, HUGHES, MARTINI & ASSOCIATES, LLC, a Florida limited liability company, d/b/a Martini,

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Hughes & Grossman (hereinafter referred to as MHG); and MHG has retained the undersigned law firm/debt collector, to serve as the attorney for MHG.

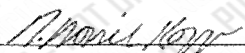
Unless you, within thirty days after receipt of this notice, dispute the validity of the debt, or any portion thereof, the debt will be assumed to be valid by the debt collectors.

If you notify the debt collectors in writing within the thirty-day period that the debt, or any portion thereof, is disputed, the debt collectors will obtain verification of the debt or a copy of a judgment against you and copy of such verification or judgment will be mailed to you by the debt collectors.

Upon your written request within the thirty-day period, the debt collectors will provide you with the name and address of the original creditor, if different from the current creditor.

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Player Card No: 4488671
 Reference: DAWN MARIE

MAX CREDIT REQUEST \$
\$20,000.00

Name: TOLL Last JEFFREY MI

Res. Address: 401 E LAS OLAS BLVD #130-192

City: FT LAUDERDALE State: FL Zip Code: 33301

Employment Firm Name: RETIRED Type of Business: TRUST FUND

Bus. Address: _____

City: _____ State: _____ Zip Code: _____

Send Mail To: Home Business None

Home Tel # 954-300-0000 Business Tel # / _____ E-mail: _____

Soc. Sec. # _____ D.O.B. _____

Street Address: _____ City: _____ State: _____ Zip: _____

Bank #1: WELLS FARGO

ABA# 07513 Personal A/C # _____

Street Address: _____ City: _____ State: _____ Zip: _____

Bank #2 (ref only): _____

I certify that I am 21 years of age or older. I understand that persons under the age of 21 are not permitted to gamble. Accordingly, I must be 21 years of age or older to apply for credit at the Casino. I am aware that false misrepresentation of my age on this application subjects me to criminal prosecution.


I represent and warrant that I am applying for credit from the Casino for my own personal gaming purposes and that any credit extended to me by the Casino will be used only by me and only for that purpose. I agree that I am liable for repayment of any and all credit that is extended to me by the Casino regardless of how or by whom such credit is used. I hereby irrevocably and unconditionally waive any claim or defense that I am not liable for the repayment of any portion of the credit that is extended to me for any reason, including, but not limited to, the allegation that such credit was used by, or for the benefit of another person, with or without the knowledge or consent of the Casino.

I authorize the Casino to investigate my credit record and to conduct such other investigations as it deems necessary, and to furnish information concerning my credit record to credit reporting agencies and others who may properly receive this information. I acknowledge that the Casino has not offered or agreed to defer the presentation of any check I have given to it or may hereafter give to it, and that Fla. Stat. sections 569.401 through 569.408 have no application to any transaction between the Casino and me. I agree that if I fail to pay any indebtedness due to the Casino and the indebtedness is placed with an attorney for collection, I will pay the attorney fees and costs incurred by the Casino. I hereby authorize the Casino, at its sole discretion, to apply any and all chips I may redeem first to the reduction of my outstanding credit balance, with the remainder if any, to be returned to me.

I acknowledge receipt of the Seminole Tribe of Florida Casino Credit Privacy Notice.

I agree that Florida law applies to this application and to any credit extended and/or checks cashed by the Casino for me. I specifically agree that Fla. Stat. section 68.065 applies in determining the Casino's remedies in connection with any bad check I may give to the Casino for any reason. I further agree that jurisdiction for any litigation arising in connection with the repayment of any credit extended to me by the Casino or the collection of any bad check given by me to the Casino properly lies in Florida and that venue for any such litigation lies in the same county circuit or federal district in which the Casino is located. I hereby specifically waive any right I may otherwise have to litigate any such matter in another state under the doctrine of "forum non conveniens". However, I acknowledge that each agreement contained in this paragraph is made for the benefit of the Casino and may be waived by it at any time. I hereby consent to the domestication in any country or jurisdiction in which I have ever resided or in which I have ever owned property any judgment that is entered against me in connection with any bad check that I give to the Casino, and I hereby irrevocably and unconditionally waive any and all defenses to such domestication, procedural and substantive, that I might otherwise have. I agree that such judgment may be enforced against me or my property in any such country or jurisdiction in the same manner and to the same extent, as a judgment that is rendered by a court in such country or jurisdiction.

I certify that all of the information provided on the application is true and accurate. I am aware that I may be subject to civil or criminal liability if any material information provided by me is willfully false.

| | | |
|--|--|---|
| OFFICE | Under penalties of perjury, I certify that The number shown on this form is my correct taxpayer identification number Please Sign within the Box Below | |
| | Date of Birth: <u>04/24/1970</u> Sex: <input checked="" type="radio"/> M <input type="radio"/> F |  |
| | Drivers Lic. # <u>12345678</u> State: <u>PA</u> Description: <input checked="" type="radio"/> Y <input type="radio"/> N Photo: <input checked="" type="radio"/> Y <input type="radio"/> N | |
| APPLICATION SIGNATURE VERIFICATION Date: <u>12/1/2016</u> Time: <u>6PM</u> am/pm Name: <u>[Signature]</u> Lic. No: <u>65892</u> | | |

EXC