

Forms are generic suggestions. Parties and their attorneys should revise them to address the unique circumstances of each case.

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA

DIVISION
www.flmb.uscourts.gov

In re _____)
)
,) Case No. ____: ____-bk-____-____
) Chapter
Debtor.*)
_____)

MOTION TO EXTEND THE AUTOMATIC STAY

Debtor(s), [insert Debtor(s) name(s)], by and through undersigned counsel, respectfully request(s) that this Court extend the automatic stay pursuant to 11 U.S.C. § 362(c)(3), and in support state(s) as follows:

1. Debtor(s) filed this Chapter 13 bankruptcy petition on [insert date].
2. On [insert date], Debtor filed Bankruptcy Case No. [insert case number] (“Prior Case”), in the United States Bankruptcy Court, Middle District of Florida, [insert Division] Division, under Chapter [insert Chapter number]. The Prior Case was subsequently dismissed on [insert dismissal order date] for [insert reason for dismissal].
3. Debtor had no other pending bankruptcy cases dismissed in the preceding one-year period.
4. Debtor did not have any prior cases dismissed in the past year for any of the following reasons:
 - a. failure to file or amend other required documents without substantial excuse;

*All references to “Debtor” include and refer to both debtors in a case filed jointly by two individuals.

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- b. failure to provide adequate protection as ordered by the Court; or
- c. failure to perform the terms of a plan confirmed by the Court.

5. There has been a substantial change in the Debtor(s) circumstances since the dismissal of the Prior Case. [insert reasons why circumstances have changed, in detail].

6. Debtor(s), [insert Debtor(s) name(s)], [insert additional reasons to support granting motion].

WHEREFORE, the Debtor(s) request(s) this Court grant this Motion to Extend the Automatic Stay as to all creditors, after notice and opportunity to be heard, and for all other proper relief.

Dated: [insert date].

/s/ Signature
Attorney Name
Attorney Bar No.
Attorney E-Mail
Attorney Address
Attorney Phone Number
Attorney for Debtor(s)

PROOF OF SERVICE

A true and correct copy of the foregoing has been sent by either electronic transmission or U.S. Mail on _____, to: [insert Chapter 7 or Chapter 13] Trustee,; Debtors; and all creditors and interested parties as listed on attached matrix [be sure to add the matrix].

/s/ Signature
Attorney Name
Attorney Bar No.
Attorney E-Mail
Attorney Address
Attorney Phone Number

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Attorney for Debtor(s)