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 _ )                                   |
| MOTIC  | ON TO EXTEND TIME  |
| [Insert name party filing the mo   | tion]("Movant") requests an extension of time for [insert      |
| summary of extension request] and state  | es:  |
| 1. Under Fed. R. Bankr.  | P. [insert applicable Bankruptcy Rule number], the             |
| Bankruptcy Court may, upon motion,   | grant an extension or enlargement of time for [explain         |
| extension request.].   |  |
| 2. An extension is appropria   | ate because [insert basis for an extension.].                  |
| 3. An extension is requested   | d until [insert a specific date for the requested extension.]. |
| WHEREFORE, Movant reques   | ts an extension of time until [insert a specific date] to      |
| [summarize extension request] and for s  | such further relief as the Court deems appropriate.            |
| Dated: [insert date].  |  |
|  |  |
|  | /s/ Signature<br>Attorney Name                                 |

Implemented 8/14/2020

<sup>\*</sup> All references to "Debtor" include and refer to both debtors in a case filed jointly by two individuals.

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Attorney Bar No.
Attorney E-Mail
Attorney Address
Attorney Phone Number
Attorney for [insert name of client]

## **PROOF OF SERVICE**

| A true and correct copy of | of the foregoing has been sent by either electronic transmission |
|----------------------------|--|
| or U.S. Mail on            | to:  |
|                            |  |
|                            |  |
|                            | /s/ Signature  |
|                            | Attorney Name  |
|                            | Attorney Bar No.   |
|                            | Attorney E-Mail  |
|                            | Attorney Address   |
|                            | Attorney Phone Number  |
|                            | Attorney for [insert name of client]                             |