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Case 1:24-cv-03744-BAH

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal" PLAINTIFF COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC. et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Ohana Growth Partners, LLC. SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 212 West Padonia Road Timonium Maryland 21093 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps Number of parties to be 1334 Maple Avenue 29 served in this case Essex Maryland 21221 Check for service Х on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to Company (1), and six (6) individuals. Personal Address' are not currently available. DATE TELEPHONE NUMBER Signature of Attorney other Originator requesting service on behalf of: × PLAINTIFF Ryan Dillon-Capps Figurally signed by Ryan Dillon-Capps Earls: 2024.12.17 19:33:23 -05'00' ☐ DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total **Total Process** District of District to Signature of Authorized USMS Deputy or Clerk Date number of process indicated, Origin Serve (Sign only for USM 285 if more No. No. than one USM 285 is submitted) I hereby certify and return that I 🔲 have personally served, 🔲 have legal evidence of service, 🔲 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Time Date Name and title of individual served (if not shown above) ☐ am 🔲 pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above) Costs shown on attached USMS Cost Sheet >> REMARKS

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service				,	See <u>"Instruct</u>	tions for Service o	f Process by U.S	S. Marsha
PLAINTIFF '						COURT CASE NUI	MBER	
Ryan Dillon-Capps								
DEFENDANT				·		TYPE OF PROCES	S	
Ohana Growth Partners, Ll	.C. et al					Personal		
		COMPANY, CO	PORATION, I	ETC. TO SERVE	OR DESCRIPT	ON OF PROPERTY	TO SEIZE OR CON	DEMN
DERVE	. Victor							
AT ADDRESS 212 We	<i>(Street or RFD,</i> est Padonia l	<i>Apartment No.</i> , Road Timon	City, State and Zi ium Marylan	<i>IP Code)</i> d 21093				
SEND NOTICE OF SERVICE COPY				•	***.***	Number of process t		9
Ryan Dillon-Capps						served with this For	11 203	
1334 Maple Avenue Essex Maryland 21221						served in this case		9
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All Telephone Numbers, and Estima	ted Times Availa	ble for Service).	; !== alicalatera.la	Damanal Ad	d====1 === ==		abla	
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Signature of Attorney other Originato	$\boldsymbol{\Lambda}^{-}$		X PLAII		TELEPHONE	NUMBER	DATE	
Ryan Dillon-Capps	Pate: 2024.12.17	19:35:02 -05'00'	□ DEFE	NDANT	703-303-1	113	12/17/2024	
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Name and title of individual served (i	f not shown abov	re)				Date	Time	☐ am ☐ pm
Address (complete only different than	shown above)					Signature of U.S. M	arshal or Deputy	
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REMARKS					,			
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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC. et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Norris, Glenn **SERVE** ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 212 West Padonia Road Timonium Maryland 21093 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service X on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to Company (1), and six (6) individuals. Personal Address' are not currently available. Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE ▼ PLAINTIFF Ryan Dillon-Capps (pigitally signed by Ryan Dillon-Capps of the pigitally signed by Ryan Dillon-Capps of the pi DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total Total Process District of District to Date Signature of Authorized USMS Deputy or Clerk number of process indicated. Origin Serve (Sign only for USM 285 if more No. No. than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served, 🗀 have legal evidence of service, 📋 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) Date Time ☐ am ☐ pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above) Costs shown on attached USMS Cost Sheet >> REMARKS

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U.S. Department of Justice

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Onited States Marshals	Service					See <u>"Instruct</u>	tions for Service of	rrocess by O	.S. Marsnai
PLAINTIFF					·		COURT CASE NUM	ABER	
Ryan Dillon-Capps									
DEFENDANT							TYPE OF PROCESS	<u> </u>	
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		and, Justin	JOINTAIN 1, CO	rformion, d	IC. IO SERVE	OK DESCRIPTI	ON OF FROFERIT I	O SEIZE OR CO	INDEMIN
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SEND NOTICE OF SERV	ICE COPY	TO REQUEST!	ER AT NAME A	ND ADDRESS I	BELOW		Number of process to served with this Form		29
Ryan Dillon-Capps 1334 Maple Avenue	€						Number of parties to be		 29
Essex Maryland 21	221						served in this case		
							Check for service on U.S.A.		X
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All Telephone Numbers, a Office Hours - Serv	nd Estimat	<i>led Times Availa</i> Ampany (1)	<i>ble for Service):</i> and six (6) is	ndividuals l	Personal Add	dress' are no	nt currently avails	able	
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Signature of Attorney other	r Originato	requesting servi	ce on behalf of:	ĭ≍ PLAIN	TITEE	TELEPHONE	NUMBER	DATE	
Ryan Dillon-C	anne	Digitally signed by	Ryan Dillon-Capp	s DEFE					
Ttyan Dillon C	appoi	Datē: 2024.12.17	19:36:13 -05'00'		NDAI1	703-303-1	113	12/17/2024	
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United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

Sinica States Maishais Scivic				Ä	See Thritici	ions for service of	Frocess ov O.	o. www.snai
PLAINTIFF	-				<u></u>	COURT CASE NUM	IBER	
Ryan Dillon-Capps	•							
DEFENDANT						TYPE OF PROCESS	}	
Ohana Growth Partners, L	LC. et al					Personal		
SERVE NAME OF		COMPANY, CO	RPORATION, E	TC. TO SERVE	OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR COM	NDEMN
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SEND NOTICE OF SERVICE COP Ryan Dillon-Capps	Y TO REQUEST	ER AT NAME A	ND ADDRESS	BELOW		Number of process to served with this Form		29
1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	he	29
						Check for service on U.S.A.		X
SPECIAL INSTRUCTIONS OR OT All Telephone Numbers, and Estima Office Hours - Service to C	ated Times Availa	ble for Service):			•		-	
Signature of Attorney other Originat	or requesting serv	ice on behalf of:			TELEPHONE	NUMBER	DATE	
Ryan Dillon-Capps	Digitally signed by Date: 2024.12.17	Ryan Dillon-Capp 19:36:48 -05'00'	PLAIN DEFE	NDANT	703-303-1°	113	12/17/2024	
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☐ I hereby certify and return that I	am unable to loca	e the individual,	company, corpor	ration, etc. named	l above <i>(See rem</i>	arks below)		
Name and title of individual served	if not shown abov	e)				Date	Time	am pm
Address (complete only different tha	n shown above)					Signature of U.S. Ma	urshal or Deputy	
		Costs	shown on <u>attach</u>	ed USMS Cost S	heet>>			
REMARKS								

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

Omited States Marshals Service					Dec Tibli nei	ions for Service of	Trocess by C	.o. marsnar
PLAINTIFF		·				COURT CASE NUM	IBER	
Ryan Dillon-Capps								
DEFENDANT						TYPE OF PROCESS		
Ohana Growth Partners, LL	.C. et al					Personal		
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Ryan Dillon-Capps 1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	ha	29
,						Check for service on U.S.A.		X
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Signature of Attorney other Originato	rrequesting service	e on behalf of:			TELEPHONE	NUMBER	DATE	· · · · · · · · · · · · · · · · · · ·
Ryan Dillon-Capps	Digitally signed by R Date: 2024.12.17 19	Ryan Dillon-Capp 3:37:21 -05'00'	PLAIN DEFE	NDANT	703-303-1	113	12/17/2024	,
SPACE BE	LOW FOR U	SE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	LINE	
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I hereby certify and return that I I hindividual, company, corporation, etc.								d on the
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Address (complete only different than	shown above)					Signature of U.S. Ma	ershal or Deputy	
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REMARKS								

Case 1:24-cv-03744-BAH

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC. et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Hartman, Richard SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 212 West Padonia Road Timonium Maryland 21093 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service X on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to Company (1), and six (6) individuals. Personal Address' are not currently available. TELEPHONE NUMBER DATE Signature of Attorney other Originator requesting service on behalf of: × PLAINTIFF Ryan Dillon-Capps Date: 2024.12.17 19:37:47 -0500° ☐ DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total **Total Process** District of District to Date Signature of Authorized USMS Deputy or Clerk number of process indicated. Origin Serve (Sign only for USM 285 if more No. No. than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served, 🔲 have legal evidence of service, 🛄 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) Time ☐ am pm pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above)

REMARKS

Costs shown on attached USMS Cost Sheet >>

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service					See <u>"Instruc</u>	tions for Service o	f Process by U.	S. Marshal'
PLAINTIFF Ryan Dillon-Capps	-					COURT CASE NUM	MBER	
DEFENDANT						TYPE OF PROCESS	<u> </u>	
Ohana Growth Partners, LL	.C. et al					Personal	3	
· · · · · · · · · · · · · · · · · · ·		COMPANY CO	DRPORATION I	TO TO SERVE	OR DESCRIPT	ION OF PROPERTY	TO SEIZE OR CO	NDFMN
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Ryan Dillon-Capps 1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	1	29
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Ryan Dillon-Capps	;		× PLAII	NTIFF NDANT	703-303-1		12/17/2024	
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☐ I hereby certify and return that I a	m unable to loca	te the individual	, company, corpo	ration, etc. name	d above <i>(See ren</i>	arks below)		
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Address (complete only different than	shown above)					Signature of U.S. M	arshal or Deputy	
		Costs	shown on <u>attac</u>	neil USMS Cost S	Sheet >>			
REMARKS								

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service				¥	See <u>"Instruct</u>	ions for Service of	Process by U.S	. Marshai"
PLAINTIFF						COURT CASE NUM	IBER	
Ryan Dillon-Capps								
DEFENDANT						TYPE OF PROCESS	ı	
Ohana Growth Partners, Ll	C. et al					Personal		
SERVE Bryan,	Charles A. \	Bengur Brya	ın		OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR CON	DEMN
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1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	be . 29	9
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Signature of Attorney other Originate	r requesting serv	ice on behalf of:	E DY ATA	harr	TELEPHONE	NUMBER	DATE	
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I hereby certify and return that I individual, company, corporation, etc.								on the
☐ I hereby certify and return that I	ım unable to loca	te the individual,	company, corpo	ration, etc. name	d above <i>(See rem</i>	arks below)		
Name and title of individual served (f not shown abov	e)				Date	Time	☐ am ☐ pm
Address (complete only different than	a shown above)					Signature of U.S. Ma	urshal or Deputy	
		Costs	shown on attach	ed USMS Cost S	Sheet >>			
REMARKS		-						

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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Date	Time am
	☐ pm
Signature of U.S. M	Iarshal or Deputy
	shown at the address in: remarks below) Date

USCA4 Appeal: 25-1162 Doc: 25-4 Filed: 04/29/2025

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service				0	Dee Thomas	ions for Service of	1 7 000030 0 V O.D.	27247 97141
PLAINTIFF Ryan Dillon-Capps						COURT CASE NUM	1BER	
DEFENDANT		· · · · · ·			-	TYPE OF PROCESS	•	-
Ohana Growth Partners, LL	.C. et al					Personal		
SERVE Brenner	n, Robert S.				OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR COND	EMN
AT ADDRESS 100 Ligit	<i>(Street or RFD, .</i> ht Street Bal	Apartment No., (timore Mary	City, State and ZI land 21202	P Code)				
SEND NOTICE OF SERVICE COPY	TO REQUESTI	ER AT NAME A	ND ADDRESS I	BELOW		Number of process to served with this Forn	·······································	
Ryan Dillon-Capps 1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	· ·	
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SPECIAL INSTRUCTIONS OR OTH All Telephone Numbers, and Estimat Office Hours - Service to Co	ed Times Availa	ble for Service):			•		te Addresses,	
Signature of Attorney other Originator	requesting servi	ce on behalf of:	× PLAIN	ernee	TELEPHONE	NUMBER	DATE	
Ryan Dillon-Capps	Disitally signed by Date: 2024.12.17	Ryan Dillon-Capp 19:39:54 -05'00'	DEFEI		703-303-1°	113	12/17/2024	
SPACE BE	LOW FOR	USE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	SLINE	
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of A	uthorized USMS	Deputy or Clerk	Date	
I hereby certify and return that I hindividual, company, corporation, etc.	ave personally s , at the address s	erved, have	legal evidence of he on the individ	f service, ha ual, company, co	ve executed as sh rporation, etc. sh	own in "Remarks", the	e process described or erted below.	the
I hereby certify and return that I a	m unable to loca	te the individual,	company, corpor	ration, etc. name	l above <i>(See rem</i>	arks below)		
Name and title of individual served (i)	not shown abov	ε)			<u>-</u> , -	Date	Time	am pm
Address (complete only different than	shown above)				-	Signature of U.S. Ma	arshal or Deputy	
		Costs	shown on attach	ed USMS Cost S	heet>>			.
REMARKS							A. A	
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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** COURT CASE NUMBER Ryan Dillon-Capps **DEFENDANT** TYPE OF PROCESS Ohana Growth Partners, LLC, et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Frenkil, Stephen D. SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 100 Light Street Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service X on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service); Office Hours - Service to Company AND Individuals (5) Personal Address' are not currently available. Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE × PLAINTIFF Ryan Dillon-Capps Digitally signed by Ryan Dillon-Capps Diago. 2024.12.17 19:40:24 -05:00 ☐ DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total **Total Process** District of District to Signature of Authorized USMS Deputy or Clerk Date number of process indicated. Origin Serve (Sign only for USM 285 if more No. No. than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served, 🔲 have legal evidence of service, 🔲 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual company, corporation, etc. named above (See remarks below) Date Time Name and title of individual served (if not shown above) am am ☐ pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above) Costs shown on attached USMS Cost Sheet >> REMARKS

Signature of Attorney other Originator requesting service on behalf of:

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TELEPHONE NUMBER

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

DATE

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC, et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Butler, Holly D. SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 100 Light Street Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service Х on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to Company AND Individuals (5) Personal Address' are not currently available.

Signature of Attorney office Original			I ELEFHONE NUMBER D		DATE			
Ryan Dillon-Capps	Digitally signed by Date: 2024.12.17	y Ryan Dillon-Cap; 19:40:57 -05'00'	ps DEFE	NDANT	703-303-1	113	12/17/2024	
SPACE BI	ELOW FOR	USE OF U.S	. MARSHAL	ONLY - DO	NOT WRIT	TE BELOW THI	S LINE	
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of A	uthorized USMS	Deputy or Clerk	Date	
I hereby certify and return that I [] individual, company, corporation, etc								on the
☐ I hereby certify and return that I a	unable to loca	te the individual,	, company, corpo	ration, etc. name	d above <i>(See rem</i>	arks below)		
Name and title of individual served (f not shown abov	ve)				Date	Time	☐ am ☐ pm
Address (complete only different than	shown above)			*		Signature of U.S. M	arshal or Deputy	
		Costs	shown on attach	ed USMS Cost S	heet>>	1		
REMARKS						·		

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal" PLAINTIFF COURT CASE NUMBER Ryan Dillon-Capps TYPE OF PROCESS DEFENDANT Ohana Growth Partners, LLC. et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Duvall, Jessica L. SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 100 Light Street Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service Х on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to Company AND Individuals (5) Personal Address' are not currently available.

Signature of Attorney other Originato	g ·		TELEPHONE NUMBER DATE		DAIE			
Ryan Dillon-Capps	Digitally signed by Date: 2024.12.17	y Ryan Dillon-Capp 19:41:24 -05'00'	DEFE	NDANT	703-303-1113 12/17/2024			
SPACE BE	LOW FOR	USE OF U.S.	. MARSHAL	ONLY - DO	NOT WRIT	TE BELOW THIS	SLINE	
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve No.	Signature of A	uthorized USMS	Deputy or Clerk	Date	
I hereby certify and return that I tindividual, company, corporation, etc								n the
☐ I hereby certify and return that I a	m unable to loca	te the individual,	, сотрапу, согро	ration, etc. name	d above <i>(See rem</i>	arks below)		
Name and title of individual served (i)	f not shown abor	re)				Date !	Time	m am
Address (complete only different than	shown above)					Signature of U.S. Ma	arshal or Deputy	
		Costs	shown on attach	ed USMS Cost S	Sheet>>			
REMARKS								

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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PLAINTIFF						COURT CASE NUM	/BER		
Ryan Dillon-Capps									
DEFENDANT						TYPE OF PROCESS	3		
Ohana Growth Partners, LL	.C. et al					Personal			
		COMPANY, CO artman Exec			OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR C	ONDEMN	
AT ADDRESS 1954 G	(Street or RFD, reenspring I	Apartment No., O Drive, Suite 3	City, State and Zi 320, Timoniu	P Code) m Maryland	21093				
SEND NOTICE OF SERVICE COPY	TO REQUEST	ER AT NAME A	ND ADDRESS	BELOW		Number of process to		29	
Ryan Dillon-Capps 1334 Maple Avenue						served with this Form			
Essex Maryland 21221						served in this case		29	
						Check for service on U.S.A.		X	
SPECIAL INSTRUCTIONS OR OTE All Telephone Numbers, and Estima Office Hours - Service to Co	ted Times Availa	ble for Service):			•				
Signature of Attorney other Originato	r requesting serv	ice on behalf of;	× PLAIN	TTEE	TELEPHONE	NUMBER	DATE	, ,	
Ryan Dillon-Capps Date: 2024.12.17 19:41:51 -05'00' DEFENDANT 703-303-1113 12/17/2024									
SPACE BE	LOW FOR	USE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	LINE		
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Au	nthorized USMS	Deputy or Clerk	Dat	е	
I hereby certify and return that I lindividual, company, corporation, etc								ed on the	
☐ I hereby certify and return that I a	m unable to loca	te the individual,	company, corpo	ration, etc. named	l above (See rem	arks below)			
Name and title of individual served (i)	f not shown abov	e)			· ·	Date	Time	— am	
								pm	
Address (complete only different than	shown above)					Signature of U.S. Ma	arshal or Deputy		
-		Costs	shown on <u>attach</u>	ed USMS Cost S	heet>>				
REMARKS				····					
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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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PLAINTIFF Ryan Dillon-Capps						COURT CASE NUM	IBER	
ryan Dillon-Capps							<u> </u>	
DEFENDANT					i	TYPE OF PROCESS	•	
Ohana Growth Partners, LL	.C. et al					Personal		
	INDIVIDUAL, C Randall \ C			TC. TO SERVE	OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR CON	DEMN
	(Street or RFD, A	<i>partment No., C</i> rive, Suite 3	City, State and ZI 300, Timoniu	P Code) m Maryland	21093			
SEND NOTICE OF SERVICE COPY						Number of process to	be o	
Ryan Dillon-Capps	101000012					served with this Form		y
1334 Maple Avenue						Number of parties to	be 25	9
Essex Maryland 21221						served in this case Check for service		
						on U.S.A.	×	(
SPECIAL INSTRUCTIONS OR OTE All Telephone Numbers, and Estima Office Hours - Service to Co	ted Times Availab	le for Service):					и линеты,	
Signature of Attorney other Originato		a an habalf of			TELEPHONE	NT IMPED	DATE	
Ryan Dillon-Capps			× PLAIN DEFE	TIIFF NDANT	703-303-1		12/17/2024	
	LOW FOR U	JSE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	S LINE	
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of A	uthorized USMS	Deputy or Clerk	Date	
I hereby certify and return that I individual, company, corporation, etc.	nave personally se ,, at the address sh	rved, have nown above on t	legal evidence of he on the individ	f service, har	ve executed as shorporation, etc. sh	own in "Remarks", the	e process described o	on the
I hereby certify and return that I a	m unable to locate	e the individual,	company, corpor	ration, etc. named	i above (See rem	arks below)		
Name and title of individual served (i)	f not shown above	·)			·	Date	Time	am
• · · · · · · · · · · · · · · · · · · ·		,						☐ pm
Address (complete only different than	shown above)					Signature of U.S. Ma	ershal or Deputy	
		Costs	shown on <u>attac</u> h	ed USMS Cost S	iheet>>			
REMARKS		-						

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC, et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Stringer, H. Patrick **SERVE** ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 200 Saint Paul Place Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 Essex Maryland 21221 served in this case Check for service X on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):
Office Hours - Service to State of Maryland (1) AND Individuals (12) Attorney General Has Designated the Following Persons to Recieve Service: JULIA DOYLA, JOSHUA R. CHAZEN, RYAN R. DIETRICH, HOWER R. FELDMAN, DANIEL M'KORBIN, JEFFREY S. LUOMA, ROBERT A. SCOTT, JOSHUA M. SEGAL, WENDY L. SHIFF Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE ▼ PLAINTIFF Ryan Dillon-Capps Date: 2024.12.17 19:42:52 -05:00* ☐ DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total **Total Process** District of District to Signature of Authorized USMS Deputy or Clerk Date number of process indicated. Origin Serve (Sign only for USM 285 if more No No. than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served, 🔲 have legal evidence of service, 🔲 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Time Name and title of individual served (if not shown above) Date am ☐ pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above) Costs shown on attached USMS Cost Sheet >> REMARKS

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Ryan Dillon-Capps						COURT CASE NUM	IBER		
DEFENDANT						TYPE OF PROCESS			
Ohana Growth Partners, LL	Cetal					Personal			
NAME OF			RPORATION, E	TC. TO SERVE	OR DESCRIPTI		O SEIZE OR CONDEMN		
AT ADDRESS	(Street or RFD,	Apartment No., C e Baltimore l	City, State and ZI Maryland 21	 P Code) 202					
SEND NOTICE OF SERVICE COPY						Number of process to	be as		
Ryan Dillon-Capps	TOTALQUEST	J. 111 14 Lind 11	10710010007	0.000		served with this Form 285			
1334 Maple Avenue Essex Maryland 21221 Number of parties to be served in this case									
			Check for service on U.S.A.	X					
SPECIAL INSTRUCTIONS OR OTH All Telephone Numbers, and Estimat Office Hours - Service to St Attorney General Has Desig DIETRICH, HOWER R. FE WENDY L. SHIFF	ed Times Availa ate of Maryl gnated the F	<i>ble for Service):</i> and (1) AND ollowing Per	Individuals	(12) ieve Service	: JULIA DO	/LA, JOSHUA R	. CHAZEN, RYAN R.		
Signature of Attorney other Originator	7 · ·	TELEPHONE	NUMBER	DATE					
Ryan Dillon-Capps	Digitally signed by Date: 2024.12.17	703-303-1	113	12/17/2024					
SPACE BE	LOW FOR	USE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	LINE		
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Au	nthorized USMS	Deputy or Clerk	Date		
I hereby certify and return that I \(\square\) h individual, company, corporation, etc.									
☐ I hereby certify and return that I a	m unable to locat	e the individual,	company, corpor	ration, etc. named	l above <i>(See rem</i>	arks below)	a :		
Name and title of individual served (i)	not shown abov	e)		- -		Date	Time am pm		
Address (complete only different than	Address (complete only different than shown above) Signature of U.S. Marshal or Deputy								
		Costs	shown on <u>attach</u>	ed USMS Cost S	heet >>				
REMARKS									

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" PLAINTIFF COURT CASE NUMBER Ryan Dillon-Capps DEFENDANT TYPE OF PROCESS Ohana Growth Partners, LLC, et al Personal NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Barranco, Michael S. SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) AT 200 Saint Paul Place Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 29 served with this Form 285 Ryan Dillon-Capps 1334 Maple Avenue Number of parties to be 29 served in this case Essex Maryland 21221 Check for service Х on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to State of Maryland (1) AND Individuals (12) Attorney General Has Designated the Following Persons to Recieve Service: JULIA DOYLA, JOSHUA R. CHAZEN, RYAN R. DIETRICH, HOWER R. FELDMAN, DANIEL M'KORBIN, JEFFREY S. LUOMA, ROBERT A. SCOTT, JOSHUA M. SEGAL, WENDY L. SHIFF Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE × PLAINTIFF Ryan Dillon-Capps Digitally signed by Ryan Dillon-Capps Date: 2024.12.17 19:43:45 - neron ☐ DEFENDANT 703-303-1113 12/17/2024 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE I acknowledge receipt for the total District to **Total Process** District of Signature of Authorized USMS Deputy or Clerk Date number of process indicated. Origin Serve (Sign only for USM 285 if more No. No. than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served , 🔲 have legal evidence of service, 🗌 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) Date Time am am ☐ pm Signature of U.S. Marshal or Deputy Address (complete only different than shown above) Costs shown on attached USMS Cost Sheet >> REMARKS

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Ryan Dillon-Capps						COURT CASE NUM	BER		
DEFENDANT						TYPE OF PROCESS			
Ohana Growth Partners, LL	.C. et al					Personal			
	INDIVIDUAL, O	COMPANY, CO	RPORATION, E	TC. TO SERVE	OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR CON	DEMN	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 200 Saint Paul Place Baltimore Maryland 21202									
SEND NOTICE OF SERVICE COPY	TO REQUEST!	ER AT NAME A	ND ADDRESS I	BELOW		Number of process to		<u> </u>	
Ryan Dillon-Capps			served with this Form	1 285					
1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	^{be} 29	9	
ESSON Maryland 2 122 1						Check for service on U.S.A.	×	ζ	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Office Hours - Service to State of Maryland (1) AND Individuals (12) Attorney General Has Designated the Following Persons to Recieve Service: JULIA DOYLA, JOSHUA R. CHAZEN, RYAN R. DIETRICH, HOWER R. FELDMAN, DANIEL M KORBIN, JEFFREY S. LUOMA, ROBERT A. SCOTT, JOSHUA M. SEGAL, WENDY L. SHIFF									
Signature of Attorney other Originator	requesting servi	TELEPHONE	NUMBER	DATE					
Ryan Dillon-Capps	703-303-1		12/17/2024						
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I acknowledge receipt for the total	Total Process	District of	District to		thorized USMS		Date		
number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)		Origin No.	Serve No.	Signature of Ac	iniorized OSIMS	t Cicix	Dat		
I hereby certify and return that I hindividual, company, corporation, etc.								on the	
I hereby certify and return that I a	m unable to locat	e the individual,	company, corpor	ration, etc. named	l above <i>(See rem</i>	arks below)			
Name and title of individual served (i)	not shown above	2)		-		Date	Time	am	
Address (complete only different than	shown above)					Signature of U.S. Ma	urshal or Deputy		
		Costs	shown on <u>attach</u>	ed USMS Cost S	heet>>				
REMARKS									

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

	·			k.					
PLAINTIFF Ryan Dillon-Capps						COURT CASE NUMBER			
DEFENDANT						TYPE OF PROCESS			
Ohana Growth Partner	s, LLC. et al					Personal			
	E OF INDIVIDUAL, tista, Andrew M.	COMPANY, CO	RPORATION, E	TC. TO SERVE	OR DESCRIPTI	ON OF PROPERTY T	O SEIZE OR CONI	DEMN	
AT $\frac{}{ADD}$	RESS (Street or RFD,) Saint Paul Plac	Apartment No., (e Baltimore	City, State and ZI Maryland 21	P Code) 202		• •		-	
SEND NOTICE OF SERVICE	COPY TO REQUEST	ER AT NAME A	ND ADDRESS I	BELOW		Number of process to		3	
Ryan Dillon-Capps 1334 Maple Avenue Essex Maryland 21221						Number of parties to served in this case	1 282		
LSSEX Waryland 21221						Check for service on U.S.A.	×		
All Telephone Numbers, and E Office Hours - Service Attorney General Has I DIETRICH, HOWER R WENDY L. SHIFF	to State of Maryl Designated the F	and (1) AND ollowing Per	Individuals rsons to Rec	leve Service	: JULIA DO) MA, ROBER	/LA, JOSHUA R T A. SCOTT, JO	. CHAZEN, RY SHUA M. SEG	AN R. BAL,	
Signature of Attorney other Originator requesting service on behalf of: X PLAINTIFF TELEPHO						NUMBER	DATE	•	
Ryan Dillon-Cap	703-303-1°	113	12/17/2024						
SPAC	E BELOW FOR	USE OF U.S.	. MARSHAL	ONLY - DO	NOT WRIT	E BELOW THIS	LINE		
I acknowledge receipt for the to number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted		District of Origin No.	District to Serve No.	Signature of At	thorized USMS	Deputy or Clerk	Date	,	
I hereby certify and return that I individual, company, corporation	have personally s							n the	
☐ I hereby certify and return t	hat I am unable to loca	te the individual,	company, corpor	ration, etc. named	i above <i>(See rem</i> e	arks below)			
Name and title of individual ser	ved (if not shown abov	e)				Date	Time	am pm	
Address (complete only differen	t than shown above)					Signature of U.S. Ma	urshal or Deputy		
		Costs	shown on attach	ed USMS Cost S	heet>>				
REMARKS			•			ı			
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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

							ions jor Service o		-
PLAINTIFF Ryan Dillon-Capps	 ;				2		COURT CASE NUM	/BER	
DEFENDANT							TYPE OF PROCESS	<u> </u>	
Ohana Growth Par	rtners. L1	C. et al					Personal	•	
			YOMBANIV CO	DDOD ATTON D	TO TO SERVE	OD DESCRIPTI	ON OF PROPERTY 7	TO SEIZE OP CON	IDEMN
SERVE \$	Alexand	der, Jan M.					ON OF TROTERTY		
AT \	200 Sai	(Street or RFD, . int Paul Plac	Apartment No., C e Baltimore	State and 21 Maryland 21	P Code) 202				
SEND NOTICE OF SER		TO REQUEST	ER AT NAME A	ND ADDRESS	BELOW		Number of process to served with this Form		29
Ryan Dillon-Capps 1334 Maple Avenu Essex Maryland 2	ie						Number of parties to served in this case	t	29
Check for service X on U.S.A.								X	
Office Hours - Sen Attorney General I DIETRICH, HOWE WENDY L. SHIFF	las Desig	gnated the F	ollowing Per	rsons to Rec	ievė Service				
Signature of Attorney oth	er Originato	r requesting servi	ce on behalf of:			TELEPHONE	NUMBER	DATE	
Ryan Dillon-0	Capps	Digitally signed by Date: 2024.12.17	Ryan Dillon-Capp 19:45:16 -05'00'	× PLAIN DEFE	NDANT	703-303-1	703-303-1113 12/17/2024		
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USCA4 Appeal: 25-1162 Doc: 25-4 Case 1:24-cv-03744-BAH

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U.S. Department of Justice

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United States Marshals Service

See "Instructions for Service of Process by U.S. Marshal"

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Ryan Dillon-Capps								
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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by ILS Marshal"

DEFENDANT Ohana Growth Partners, LLC. et al NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PR DeSimone, Marc A. Jr. ADDRESS (Street or RFD. Apartment No., City, State and ZIP Code) 200 Saint Paul Place Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of Served in Paul Place Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of Served in Paul Place Baltimore Maryland 21202 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of Served in Numbers, and Estimated Times Available for Service): Office Hours - Service to State of Maryland (1) AND Individuals (12) Attorney General Has Designated the Following Persons to Recieve Service: JULIA DOYLA, JO DIETRICH, HOWER R. FELDMAN, DANIEL M KORBIN, JEFFREY S. LUOMA, ROBERT A. SC WENDY L. SHIFF Ryan Dillon-Capp Settle 2024.12.17 19:46:55-0500 TELEPHONE NUMBER Ryan Dillon-Capp Settle 2024.12.17 19:46:55-0500 TELEPHONE NUMBER Ryan Dillon-Capp Settle 2024.12.17 19:46:55-0500 TOTAL Process Indicated. Total Process District of District to Signature of Authorized USMS Deputy or No.	Service of Trocess ov	O.D. Marsh		
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Filed: 04/29/2025

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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PLAINTIFF Ryan Dillon-Capps						COURT CASE NUM	BER	
DEFENDANT					-	TYPE OF PROCESS		
Ohana Growth Partners, Li	LC. et al					Personal		
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REMARKS								

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

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Signature of Attorney other Originator	NUMBER	DATE							
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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal"

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U.S. Department of Justice

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

United States Marshals Service				-	See <u>Instruc</u>	nons jor service o	Frocess by	O.S. Marshai	
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Ryan Dillon-Capps	Digitally signed by Date: 2024.12.17	Ryan Dillon-Cap 19:49:02 -05'00'	pps DEFENDANT 703-303-1			113	12/17/202	/17/2024	
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