



**PUBLIC SAFETY COMMITTEE MEETING
TUESDAY, JUNE 14, 2022
1 P.M. – CITY COUNCIL CHAMBERS
COUNCILOR LATONYA A. TATE CHAIRMAN**

AGENDA

A. CALL TO ORDER

B. APPROVAL OF MINUTES – May 24, 2022

C. LIQUOR LICENSES

- 1. Alpha Charlie Grill – NEW APPLICATION**
- 2. Avenue D Events - NEW APPLICATION**
- 3. Bar La Fete – NEW APPLICATION**
- 4. Gifts of Love Banquet Hall – NEW APPLICATION**
- 5. Graymont Food – TRANSFER**
- 6. Iron City Birmingham – TRANSFER**
- 7. Residence Inn by Marriot - TRANSFER**
- 8. The Spun Cow - NEW APPLICATION**

D. SPECIAL EVENTS LICENSES

- 9. TWG Avondale Park – NEW APPLICATION**
- 10. TWG BSC Berylson Soccer Park – NEW APPLICATION**
- 11. TWG Bill Battle Coliseum – NEW APPLICATION**
- 12. TWG John Carroll High School – NEW APPLICATION**
- 13. TWG Powell Steam Plant – NEW APPLICATION**
- 14. TWG UAB PNC Field – NEW APPLICATION**

E. RESOLUTION

- 15. A Resolution approving payment to ACE American Life Insurance Company for renewal of lump sum and disability cancer benefits for eligible City of Birmingham Firefighters.**
- 16. A Resolution authorizing a renewal agreement with Symetra Life Insurance Company.**

F. ADJOURNMENT

LIQUOR LICENSES

<p>1. Alpha Charlie Grill 4900 East Lake Blvd Brian Kemp</p>	<p>Restaurant Retail Liquor NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>2. Avenue D Events 3008 4th Ave South Jonathan Meador</p>	<p>Special Retail License (over 30 days) NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>3. Bar La Fete 2212 Morris Ave Suite 201 Victor King</p>	<p>Restaurant Retail Liquor NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>4. Gifts of Love Banquet Hall 1343 Bessemer Road Pamela Tubbs</p>	<p>Special Retail License (over 30 days) NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>5. Graymont Food 541 Graymont Ave West Lynette Peters</p>	<p>Beer Off Premise Wine Off Premise TRANSFER</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>6. Iron City Birmingham 513 22nd Street South Brooke Garrison</p>	<p>Special Retail License (over 30 days) TRANSFER</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>

<p>7. Residence Inn by Marriot 821 20th Street South Melinda Sellers</p>	<p>Beer Off Premise Wine Off Premise</p> <p>TRANSFER</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>8. The Spun Cow 2900 7th Ave South, Apt 420 Javier Grijava</p>	<p>Restaurant Retail Liquor</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>

SPECIAL EVENTS

<p>9. TWG Avondale Park 4101 5th Ave South Jonathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>10. TWG BSC Berylson Soccer Park 900 Arkadelphia Road Jonathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>11. TWG Bill Battle Coliseum 801 Bruno Drive Johnathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>12. TWG John Carroll High School 300 Lakeshore Parkway Jonathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>

<p>13. TWG Powell Steam Plant 1800 Powell Avenue South Jonathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>14. TWG UAB PNC Field 800 11th Street South Jonathan Meador</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 30 days)</p> <p>NEW APPLICATION</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>

RESOLUTIONS

<p>15. A Resolution approving payment to ACE American Life Insurance Company for renewal of lump sum and disability cancer benefits for eligible City of Birmingham Firefighters for a period of 12 months, commencing July 1, 2022 and ending June 30, 2023, in the amount of Eighty-One Thousand, Eight Hundred and Ten Dollars (\$81,810.00), as mandated by ACT 2019-361 (Alabama HB 360).</p> <p>Submitted by: Human Resources</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>16. A Resolution authorizing a renewal agreement with Symetra Life Insurance Company for the provision of medical stop loss coverage, for a term of one (1) year, commencing July 1, 2022, and ending June 30, 2023, in the amount of One Million, Three Hundred Sixty-Six Thousand, Five Hundred Forty-Eight Dollars (\$1,366,548.00).</p> <p>Submitted by: Human Resources</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DO NOT RECOMMEND <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>



JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING
TUESDAY, MAY 24, 2022 | 1:00 P.M.
COUNCIL CHAMBERS

MINUTES

COUNCILOR LATONYA A. TATE COMMITTEE CHAIR
COUNCILORS CRYSTAL N. SMITHERMAN & HUNTER WILLIAMS, COMMITTEE MEMBERS

Councilor(s) Present: Tate, Smitherman

A. CALL TO ORDER

The Meeting was called to order by the Committee Chair, Councilor Tate.

B. APPROVAL OF MINUTES – May 10, 2022

Action Taken:

Councilor Tate Motioned to Approve the Minutes.

Councilor Smitherman Seconded the Motion.

The May 10, 2022 Joint Public Safety and Special Called Committee of the Whole Meeting Minutes were Approved as Recorded.

C. LIQUOR LICENSES

Alpha Charlie Grill

4900 East Lake Blvd

Contact: Brian Kemp

Restaurant Retail Liquor/NEW APPLICATION

Uptown Jazz

2250 9th Ave North, Suite B

Contact: Patrick Chatman

Lounge Retail Liquor Class I/NEW APPLICATION

There were incidents reported for the location.

The applicant meets Zoning requirements.

The applicant does not have any tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

D. SPECIAL EVENTS LICENSES

Puffs Chucks and Solo Cups

1532 Cleveland Ave SW

Contact: Erika Hubbard

Event Date: 6/5/2022

Special Retail Liquor (7 days or less)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

MINUTES

Steel City Smooth Jazz Festival

Linn Park

Contact: Cedric Allen

Event Date: 6/17-18, 2022

Special Retail Liquor (7 days or less)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

Pride Fest

Linn Park

Contact: Melissa Armstrong

Event Date: 6/12/2022

Special Retail Liquor (7 days or less)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

E. BINGO PERMITS

Birmingham Aids Outreach

205 32nd Street South

Contact: Karen Musgrove

NEW APPLICATION

The applicant meets Zoning requirements.

The applicant does not have any tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

The National Alumni Society of the UAB

1301 10th Avenue South

Contact: Dr. Jennifer Breland

NEW APPLICATION

The applicant meets Zoning requirements.

The applicant does not have any tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

F. AMENDED AGENDA FOR NEW BUSINESS

Councilor Smitherman Motioned to Amend the Agenda to add New Business Item.

Councilor Tate Seconded the Motion.

MINUTES

NEW BUSINESS

A Resolution authorizing the City of Birmingham, Alabama, through its Fire and Rescue Service (BFRS) to dispose of certain items of personal property, as listed in the attachment, for training purposes and to also donate the said property to the Birmingham City Schools Fire Science Program.

Submitted by: Assistant City Attorney Mike Fliegel

Department: OCA Extension: 2369

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

Item Recommended to the City Council Consent Agenda.

G. ADJOURNMENT

Councilor Smitherman Motioned to Adjourn.

Councilor Tate Seconded the Motion.

The Meeting was Adjourned.

LICENSE STATUS REPORT FORM

Date: 3/25/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Alpha Charlie Grill LLC
Business Name Alpha Charlie Grill
Business Address 4900 East Lake Blvd

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input checked="" type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input checked="" type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Inglenook Neighborhood Association met on 8/14/05/2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

8 Attendance 0 Oppose 8 Support ___ No Recommendation

Reason for Opposition No Opposition

Applicant: Yes attended NA meeting ___ did not attend NA meeting


President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Retail Beer/Wine (On/Off Premise)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Alpha Charlie Grill LLC
Mailing Address: 4900 East Lake Blvd
Birmingham, AL 35217
Trade Name: Alpha Charlie Grill
Location Address: 4900 East Lake Blvd
Contact Number: (205) 508-5998
Contact Person: Brian Kemp

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input checked="" type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input checked="" type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 12TBS/81CHS

Date Applied: 3/25/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RETAIL BEER-TYPE 040/WINE-TYPE 060(ON OFF PRE
(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Alpha Charlie Grill LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
<u>ALDL # [REDACTED] Brian Alan Kemp</u>	<u>Member</u>	<u>[REDACTED] Birmingham AL</u>	<u>1662 Big Mountain Dr Birmingham, AL 35235</u>	<u>6 years</u>

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 840-323 Page: 1 of 3 Date: 3/14/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Alpha Charlie Grill
- 4(a) Location 4900 East Lake Blvd
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35217 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: 4900 East Lake Blvd Birmingham, AL 35217
- (d) Business Phone _____ Fax: _____ Other Contact: (205)508-5998

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

- 6 (a) Owner of real estate for which license is desired Romeo Whiskey Holdings LLC
1012 Irving Rd Homewood, AL 35209
Address _____
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 12TBS/81CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other? _____

- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: 81
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

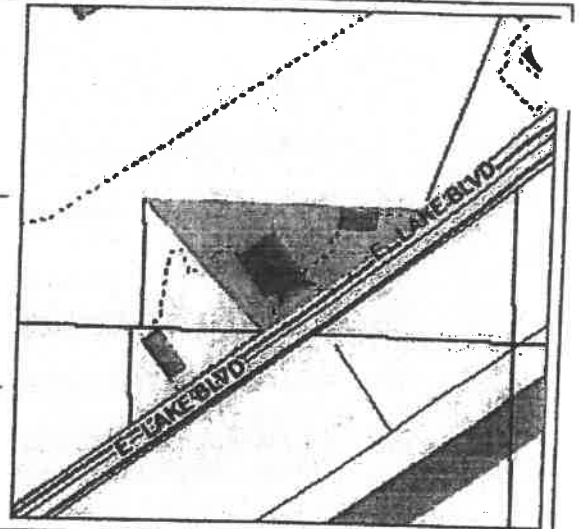
Sworn and subscribed before me this 25th day of March, 2021

Brian [Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

PARCEL ID: 012300084002048000



SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Thursday, March 25, 2021 9:37:51 AM

OWNER: ROMEO WHISKEY HOLDINGS LLC

ADDRESS: 1012 IRVING RD

CITY/STATE: HOMEWOOD AL

ZIP+4: 35209

SITE ADDR:

CITY/STATE: , AL

ZIP:

LAND: \$342,800.00

BLDG: \$290,700.00

OTHER: \$0.00

AREA: 49,331.07

ACRES: 1.13

SUBDIVISION INFORMATION:

NAME DOCKERYS AD-BHAM 23-17-1

BLOCK:

LOT: 1

:

Section: 8-17-2W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Inglenook (502)

Communities: East Birmingham (5)

Council Districts: District - 4 (Councilor: William Parker)

Zoning Outline: QM1

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

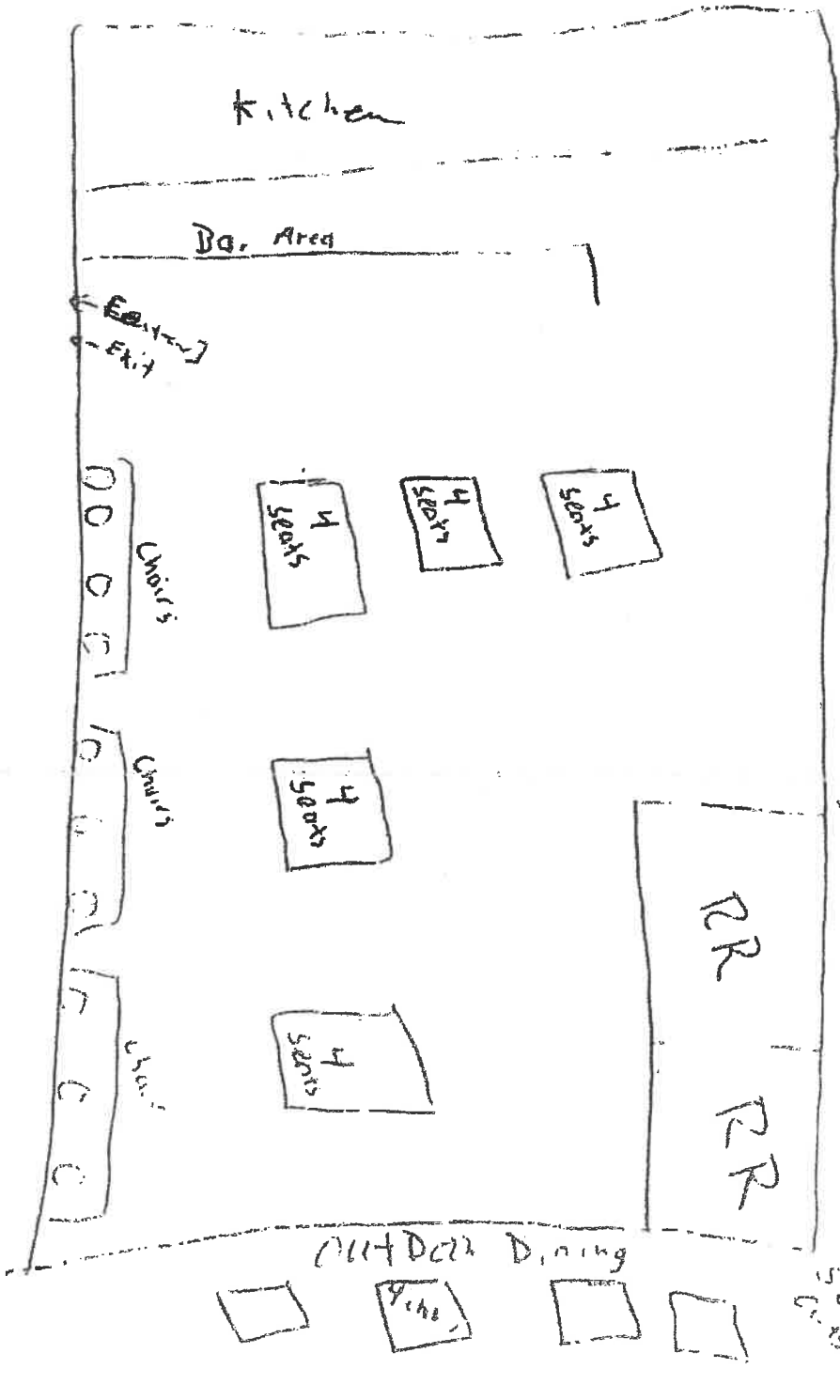
Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.



105 seats
 150 seats
 81
 Total
 255 seats

16
 16 seats
 16 seats

New Application: Special Retail Liq Type 160/ More than 30 Days

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama ST
Auburn, AL 36832

Trade Name: Avenue D Events

Location Address: 3008 4th Ave S

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- Lounge Retail Liquor Class I
- Club Liquor Class I (Fraternal)
- Beer Off Premise
- Wine Off Premise
- Restaurant Retail Liquor
- Special Retail Liquor (over 30 days)

- Lounge Retail Liquor Class II (Package Store)
- Club Liquor Class II (Private)
- Beer On & Off Premise
- Wine On & Off Premise
- Special Retail Liquor (7 days or less)
- Special Retail Liquor (under 30 days)

Division I Dance Permit (customer)

Division II Dance Permit (entertainers)

Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 5/27/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL LIQ TYPE 160 / MORE 30 DAYS

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Bobby Thelin Greenawalt	Member	[REDACTED] Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Avenue D Events
- 4(a) Location 3008 4th Ave S
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35233 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **209 Alabama St Auburn, AL 36832**
- (d) Business Phone _____ Fax: _____ Other Contact: **(334)734-2468**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired E Hughes Enterprises LLC
4508 6th Ave S Birmingham, AL 35233
Address

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Catered Foods
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____

- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 27th day of May, 2022

[Signature]
 Signature of Affiant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
special Retail Lic Type 160/More than 90 days

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:
(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334)734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Avenue D Events
Attention: _____
Address: 3008 4th Ave S
City: Birmingham State: AL Zip: 35233
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business.
If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 - TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify)
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify) **Event Center**
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
- 10. Transient Vendors/Special Events:
Date(s) of the Event _____
Event Location _____

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Event Center Product: Alcohol/Special Events/ Catered Food

Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
 Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 - Tax Liabilities Check the taxes for which you are liable.

- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- State of Alabama Sales Tax Number _____
 State of Alabama Sellers Use Tax Number _____
 State of Alabama Consumers Use Tax Number _____
 State of Alabama Lease Tax Number _____
 State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	[REDACTED]

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State _____ Zip Code _____
 Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:


 Signature of Person Completing This Application

5/27/22
 Date

Lance Ledbetter
 Print the Name of the Person Completing This Application

256-609-7489
 Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
 OK-M1-A05-5-27-2022
 Must be approved by City Council 4/5/22

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
 BLIC _____
 TERRITORY _____
 ANNEX _____
 HEALTH DEPT PERMIT _____
 OTHER REQUIRED PERMIT _____
 ARTICLES OF INCORPORATION _____
 CERTIFICATE OF AUTHORITY _____
 TAX FORMS ORDERED NBL ORDERED



DRIVER LICENSE

ALABAMA



NO. 7304690 CLASS DV
D.O.B. 04-17-1986 EXP 04-17-2025

BOBBY THELIN
GREENAWALT

4157 CREEKVIEW CT
AUBURN AL 36832-7839

ENDORSEMENTS

HT 6-03 EYES GRN
WT 280 HAIR BLN

REST
SEX M

ISS 04-22-2021

[Handwritten Signature]

Secretary Hal Taylor
Secretary of Law Enforcement

VETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

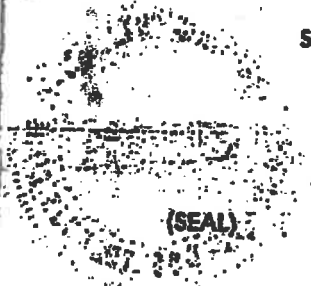
was born in Goshen Elkhart County, Indiana
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed Recorded locally
(or Local No.)

Signed *Stanley Ledy* Health Officer



Date Issued

Officer Address, Length of time at Current Residence, and SSN

- Bobby Greenawalt
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: [REDACTED]

ALABAMA LIMITED POWER OF ATTORNEY

BE IT ACKNOWLEDGED that I, Bobby Greenawalt
Full Name
[REDACTED], the "Principal", do hereby grant a limited
social security number
and specific power of attorney to Jonathan Meador of
Full Name
938 SW 56th Ter., Gainesville, FL 32607 863-557-3198
Address Phone
as my "Attorney-in-Fact".

Said Attorney-in-Fact shall have full power and authority to undertake and perform only the following acts on my behalf:

1. Preparation and submittal of licensing applications
2. Payment of licensing fees and taxes
3. _____

The authority herein shall include such incidental acts as are reasonably required to carry out and perform the specific authorities granted herein. My Attorney-in-Fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interest, as my Attorney-in-Fact in its discretion deems advisable. This power of attorney is effective upon execution.

This power of attorney may be revoked by any of the following:

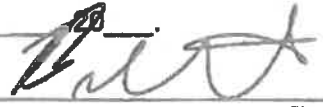
(Initial and Check the Box if Applicable)

- X • - By the Principal at anytime by authorizing a Revocation.
- - When the above stated one (1) time power or responsibility has been completed.
- - On the ____ day of _____, 20__.

This power of attorney form shall automatically be revoked upon my death or incapacitation, provided any person relying on this power of attorney shall have full rights to accept and reply upon the authority of my Attorney-in-Fact until in receipt of actual notice of revocation.

State Law. This Power of Attorney is governed by the laws of the State of
Alabama

Signed this 12th day of May


Signature
Bobby Greenawalt
Print Name

ACCEPTANCE OF APPOINTMENT

I, Jonathan Meador, the attorney-in-fact named above, hereby accept
appointment as attorney-in-fact in accordance with the foregoing instrument.


Attorney-in-Fact's Signature
Jonathan Meador
Attorney-in-Fact's Printed Name


ACKNOWLEDGMENT OF NOTARY PUBLIC

STATE OF Alabama
Lee County, ss.

On this 12th day of May, 2022, before me appeared
Bobby Greenawalt, as Principal of this Power of Attorney who proved to me through
government issued photo identification to be the above-named person, in my presence
executed foregoing instrument and acknowledged that he executed the same as his free
act and deed.


Notary Public
My commission expires: 1/29/25

ALABAMA LIMITED POWER OF ATTORNEY

BE IT ACKNOWLEDGED that I, Bobby Greenawalt
Full Name
 social security number, the "Principal", do hereby grant a limited
and specific power of attorney to Lance Ledbetter of
Full Name
2901 4th Ave. S, Apt 314, Birmingham, AL 35233
Address Phone
as my "Attorney-in-Fact".

Said Attorney-in-Fact shall have full power and authority to undertake and perform only the following acts on my behalf:

1. Sign for alcoholic beverages application & license
2. Sign required zoning forms for alcoholic beverages application and license
3. _____

The authority herein shall include such incidental acts as are reasonably required to carry out and perform the specific authorities granted herein. My Attorney-in-Fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interest, as my Attorney-in-Fact in its discretion deems advisable. This power of attorney is effective upon execution.

This power of attorney may be revoked by any of the following:

(Initial and Check the Box if Applicable)

_____ By the Principal at anytime by authorizing a Revocation.

_____ When the above stated one (1) time power or responsibility has been completed.

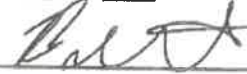
X On the 31st day of May, 2022.

This power of attorney form shall automatically be revoked upon my death or incapacitation, provided any person relying on this power of attorney shall have full rights to accept and reply upon the authority of my Attorney-in-Fact until in receipt of actual notice of revocation.



State Law. This Power of Attorney is governed by the laws of the State of
Alabama.

Signed this 24th day of May, 2022.




Signature

Bobby Greenawalt

Print Name

ACCEPTANCE OF APPOINTMENT

I, Lance Ledbetter, the attorney-in-fact named above, hereby accept appointment as attorney-in-fact in accordance with the foregoing instrument.


Attorney-in-Fact's Signature

Lance Ledbetter
Attorney-in-Fact's Printed Name

ACKNOWLEDGMENT OF NOTARY PUBLIC

STATE OF Alabama

Lee County, ss.

On this 27th day of May, 2022, before me appeared Lance Ledbetter, as Principal of this Power of Attorney who proved to me through government issued photo identification to be the above-named person, in my presence executed foregoing instrument and acknowledged that he executed the same as his free act and deed.


Notary Public
My commission expires: 1-29-25



**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.


05/25/2021

Date

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594850 1/2
Bk: LR200905 Pg:18907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594050 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00


BOBBY T. GREENAWALT

Total of Fees and Taxes-\$51.00
HATCHERK

EXCLUSIVE CONCESSION SERVICES AGREEMENT

THIS CONCESSION SERVICES AGREEMENT (the "Agreement") with an Effective Date of the 3rd day of March 2022 (the "Effective Date") and entered by Avenue D Events, Inc and GREENAWALT HOSPITALITY, LLC, an Alabama limited liability company, (the "Concessionaire", and together with Avenue D Events, Inc, the "Parties" or singularly the "Party").

RECITALS

WHEREAS, Avenue D Events, Inc operates as a special events and entertainment facility known as Avenue D, located at 3008 4th Ave S, Birmingham, Alabama 35233, (the "Facility"); and

WHEREAS, Avenue D Events, Inc and the Concessionaire wish to enter into this Agreement for Concessionaire to procure, serve and sell non-alcoholic beverages, beer, wine, and liquor (the "Concession Services") at the Facility.

NOW THEREFORE, in consideration of the foregoing and in exchange of mutual promises and consideration, the receipt and adequacy of which are hereby acknowledged, the Parties agree as follows:

ARTICLE 1 CONCESSION SERVICES

1.1 **Exclusive Rights Granted.** Subject to the terms and conditions of this Agreement, the Concessionaire shall have the exclusive right to serve and sell non-alcoholic beverages, beer, wine, and liquor (collectively the "Alcoholic Beverages") at events scheduled by Avenue D Events, Inc at the Facility (the "Events").

1.2 **Limitation on Exclusive Rights.** The Concessionaire shall have no rights for the sale of food or other items, such items being specifically excluded from this Agreement.

1.3 **The Concessionaire's Obligation.** The Concessionaire shall provide Concession Services for the Facility pursuant to the terms and conditions of this Agreement.

1.4 **License Granted; Lease.** This Agreement is a license to the Concessionaire to provide Concession Services at the Facility upon the terms and conditions provided in this Agreement but shall be construed as a lease for the sole purpose, and for no other, of obtaining and maintaining Alabama Alcohol Beverage Control Board (ABC Board) Alcohol License for the Facility as required by the ABC Board Rules and Regulations.

1.5 **General Purpose of Operations.** The Concessionaire agrees that it shall provide Concession Services in the Facility in compliance with all federal, state and local laws, including Alabama Beverage Control Board rules and regulations.

1.6 **Concession Services.** Concession Services shall include, in addition to the other provisions herein, (i) the sale and serving of Alcoholic Beverages in compliance with

applicable federal, state and local law, (ii) the providing of mixers, appropriate cups and glasses, napkins, stir sticks and other ancillary items necessary to provide Concession Services; (iii) the checking of proper identification at the point of service or point of sale; and (iv) setup and takedown of points of service and sale.

ARTICLE 2 TERM

2.1 **Commencement and Term.** This Agreement shall commence on the Effective Date and shall remain in full force and effect for two (2) years after the Effective Date (the "Term"), unless extended or terminated as provided herein.

2.2 **Options to extend.** The term of this Agreement shall extend for an additional two (2) year period after the Term if (i.e.) Concessionaire gives Avenue D Events, Inc, written request to extend the Term no later than sixty (60) days prior to the expiration of the Term and (ii) Avenue D Events, Inc in its sole and absolute discretion does not provide the Concessionaire notice of its intent not to renew within thirty (30) days thereafter. If an extension is granted, a similar option to extend shall exist with respect to the then-current term, also subject to the sole and absolute discretion of Avenue D Events, Inc, with each extension being on the same terms and conditions (including notice requirements) set forth herein.

ARTICLE 3 FINANCIAL CONSIDERATION

3.1 **Financial Consideration.** Concessionaire shall pay Avenue D Events, Inc fifteen percent (15%) of the total received revenue per event excluding taxes and gratuities. This amount is due and payable to Avenue D Events, Inc and post marked by the 20th of the following month. A complete accounting of all sales for each individual event will accompany payment for said event.

ARTICLE 4 PERFORMANCE OF THE CONCESSION SERVICES

4.1 **Level of Service.** The Concessionaire shall perform the Concession Services at the highest levels of quality and competence comparable to other concession service providers for comparable facilities.

4.2 **Employee Training.** The Concessionaire agrees that it shall continuously train and monitor its employees regarding cleanliness, safety, courtesy, service expected of a first-class concession service and service in the compliance with applicable law for the serving of Alcohol Beverages.

4.3 **The Concessionaire's Sales Activities.** Concession Services shall be provided in a pleasant and dignified manner and the Concessionaire, its employees and agents shall use no pressure, coercion or persuasion in an attempt to influence the purchase of Alcoholic Beverages at the Facility.

4.4 **Scheduling of Events.** Avenue D Events, Inc shall book all Events requiring the services of the Concessionaire. Any proposed events offered by the Concessionaire utilizing the Facility may be rejected by Avenue D Events, Inc or accepted and incorporated into the calendar of events at Avenue D Events, Inc sole and absolute discretion.

4.5 **The Concessionaire's Employees.**

4.5.1 The Concessionaire shall employ and compensate its own employees and all such employees shall meet all the pertinent requirements set forth herein.

4.5.2 The Concessionaire shall require that its employees maintain personal cleanliness and shall be polite and courteous towards the patrons and their fellow employees.

4.5.3 Avenue D Events, Inc reserves the right to deny access to the Facility for any of the Concessionaire's employees or to request that an employee not work at the Facility if that individual employee is considered, in the sole and absolute discretion of Avenue D Events, Inc unsatisfactory or whose presence at the Facility is not in the best interest of Avenue D Events, Inc.

4.5.4 The employees of the Concessionaire shall be required to comply with all rules and regulations applicable to all other employees working at the Facility.

4.5.5 The Concessionaire agrees that the use of illegal drugs and narcotic substances by any of its employees on the job shall not be tolerated and infractions shall bring immediate removal from the Facility.

4.5.6 The Concessionaire shall be solely responsible for payment of all federal, state, and local employment taxes and health and welfare benefit plans and other fringe benefits, if any, for its employees.

4.6 **Time of Operation.** The Concessionaire shall provide Concession Services for Events from the scheduled beginning time to the scheduled ending time for each Event.

4.7 **Storage.** Storage of Alcoholic Beverages shall be permitted only in designated locations approved by Avenue D Events, Inc, with Avenue D Events, Inc retaining the right to change the location of such storage from time to time at Avenue D Events, Inc sole and absolute discretion. Concessionaire shall have access to the location of all stored alcohol/inventory prior to and after each Event, and at such other time on an "as needed" basis. Avenue D Events, Inc is not to inspect, inventory or otherwise access the storage area without the Concessionaire being present.

4.8 **Safety.** The Concessionaire must conduct all of its operations at the Facility in a safe manner necessary for the safety of employees, patrons, or licensees, and the protection of the Facility.

4.9 **Security.** The Concessionaire is not responsible for providing security for any Event.

4.10 **Utilities.** Avenue D Events, Inc is responsible for providing all power and other utility services in order that the Concessionaire can perform its obligation under this Agreement. Avenue D Events, Inc shall, at their own expense and always, maintain the premises in good and safe condition, including plate glass, electrical wiring, plumbing, and heating installations and any other system or equipment upon the premises. All connections for necessary utility services on the premises shall be made in the name of Avenue D

Events, Inc, and they alone shall be solely liable for utility charges as they become due, including those for sewer, water, gas, electricity, internet, and telephone services.

4.11 Marketing and Notice of Services. Avenue D Events, Inc will present the Concessionaire's company name, logo, website address, and phone number on all marketing materials where events are presented to potential clients, not limited to but including printed materials, website, social media platforms, etc. All clients should be notified prior to booking an event at Avenue D Events, Inc that all alcoholic beverages must be provided by the Concessionaire. Avenue D Events, Inc shall notify all approved caterers to inform them that all alcoholic beverages must be provided by the Concessionaire.

ARTICLE 5 PRICES

5.1 Price Schedule and Service Charges. The Concessionaire shall disclose their price schedule for all Alcoholic Beverages and any service charges it proposes to impose on certain types of Concession Services within the Facility and is subject to approval from Avenue D Events, Inc.

ARTICLE 6 RECORDS, ACCOUNTING AND TAXES

6.1 The Concessionaire shall be responsible for all accounting records and documents regarding the sale of Alcoholic Beverages at the Facility throughout the Term, all in accordance with generally accepted accounting principles and applicable law.

6.2 Inventory of Alcoholic Beverages. The Concessionaire shall maintain an inventory of all Alcoholic Beverages stored at the Facility.

6.3 Taxes. The Concessionaire shall collect and promptly pay all sales, transaction, privilege, license, excise or similar taxes imposed by federal, state and local authorities (the "Taxes") and shall pay any applicable Taxes relating to the Concession Services. The Concessionaire shall fully indemnify and defend Avenue D Events, Inc from and against all liabilities for Taxes relating to the Concession Services.

ARTICLE 7 LIABILITY, INDEMNITY AND INSURANCE

7.1 Dram Shop Liquor Law Liability Insurance. Concessionaire shall maintain dram shop liquor law liability coverage with a minimum coverage of \$1,000,000 per occurrence. The Concessionaire shall hold harmless Avenue D Events, Inc, its members/managers and all Avenue D Events, Inc employees from liability. The Concessionaire shall provide Avenue D Events, Inc with a Certificate of Insurance showing them as additional insureds.

7.2 Inspection of Insurance. Concessionaire agrees to permit Avenue D Events, Inc at all reasonable times to inspect the policies of insurance required by this Agreement.

7.3 Indemnification of Avenue D Events, Inc Concessionaire agrees to indemnify and hold Avenue D Events, Inc harmless from all claims, actions, judgments, suits, losses, fines, penalties, demands, costs and expenses and liability whatsoever, including reasonable attorneys' fees, expert fees and court costs ("Indemnified Claims") on account of (i) any damage or liability occasioned in whole or in part from the serving of Alcoholic Beverages contrary to the terms of this Agreement; and (ii) by any act or omission of Concessionaire, which shall include but not be limited to Concessionaire, its agents, contractors, servants, employees, invitees and guests (ii) the use of the Facility and Common Areas and conduct of Concessionaire's business at the Facility, or any other activity, work or thing done, permitted, in or about the Facility or elsewhere on the site; and/or (iii) any default by Concessionaire of any obligations on Concessionaire's part to be performed under the terms of this Agreement. In case any action or proceeding is brought against Avenue D Events, Inc by reason of any such Indemnified Claims, Concessionaire, upon notice from Avenue D Events, Inc, shall defend the same at Concessionaire's expense by counsel approved in writing by Avenue D Events, Inc, which approval shall not be unreasonably withheld. Concessionaire's indemnification obligation under this Agreement shall survive the expiration or earlier termination of this Agreement.

ARTICLE 8 TERMINATION

8.1 Termination with Cause. The Concessionaire is solely responsible for all training, supervision and monitoring of its employees including compliance with all ABC Rules and Regulations applicable to the serving and on-premise consumption of Alcoholic Beverages. Any willful or negligent violation of ABC Rules and Regulations by any employee of the Concessionaire could result in termination of this Agreement.

8.1.1 Termination of this contract should be used as a last resort. Both parties will professionally communicate on issues between the parties and attempt to solve any issues before resulting to the termination of this agreement.

8.1.2 Avenue D Events, Inc may terminate this agreement if Concessionaire has willfully or by neglect violated any ABC Rules and Regulations. Termination notices must be in writing and allow a 60-day period. During this 60-day period, the concessionaire will continue to provide its services at the highest of standards and will not hurt, damage, or defame the name and reputation of Avenue D Events, Inc.

8.2 Concessionaire Not Responsible for Violation. The Concessionaire shall not be responsible for any violation of any ABC Rule or Regulation if it is violated by any employee of Avenue D Events, Inc, or its subcontractors. The Concessionaire is not responsible for obtaining security for Avenue D Events, Inc and is therefore not responsible for having identifications checked at the door.

ARTICLE 9 ALCOHOLIC BEVERAGES

9.1 **Liquor Licenses.** In performing under this Agreement, the Concessionaire shall obtain all required licenses and permits ("Liquor License") necessary for the sale of Alcoholic Beverages in the Facility and keep them in good standing at all times during the Term hereof. Avenue D Events, Inc shall make reasonable efforts to assist the Concessionaire in obtaining the Liquor License, but at the cost of the Concessionaire.

9.2 **The Concessionaire's Responsibilities.** The Concessionaire shall comply with all applicable laws, ordinances and codes regarding the sale, use or provision of Alcoholic Beverages in the Facility. The Concessionaire shall always exercise prudent, responsible and experienced judgment in the serving of Alcoholic Beverages. The decision to refuse service of any Alcoholic Beverage to any individual shall be the sole responsibility of the Concessionaire. Concessionaire is responsible for the checking of proper identifications at the point of sale or point of serving Alcohol Beverages.

9.3 Avenue D Events, Inc shall determine whether Alcoholic Beverages may be sold at any Event. If Alcoholic Beverages shall be sold during any Event, Avenue D Events, Inc may direct, subject to applicable laws, when Concessionaire shall discontinue the sale of Alcohol Beverages, either by category of beverage or by time, notwithstanding a previously scheduled ending time for the Event.

ARTICLE 10 EXCULPATION

10.1 Anything in this Agreement to the contrary notwithstanding, Concessionaire agrees that it shall look solely to the profits from Events for the collection of any judgment (or other judicial process) requiring the payment of money by Avenue D Events, Inc in the event of any default or breach by Avenue D Events, Inc with respect to any of the terms, covenants, and conditions of this Agreement to be observed or performed by Avenue D Events, Inc, and no other property or assets of Avenue D Events, Inc shall be subject to levy, execution or other procedures for the satisfaction of Concessionaire's remedies.

ARTICLE 11 MISCELLANEOUS

11.1 **Modification.** No agreement to modify, or modification of, this Agreement shall be binding on the Parties unless the same is reduced to writing and executed by both Parties.

11.2 **Independent Contractor.** The Concessionaire shall be an independent contractor, and nothing contained within this Agreement shall be construed to create a joint venture, partnership, or an employer/employee relationship by and between Avenue D Events, Inc and the Concessionaire.

11.3 **Notices.** All notices and other communications pursuant to this Agreement shall be in writing to the Avenue D Events, Inc or to the Concessionaire, and shall be

deemed properly given if sent by personal delivery, by certified United States mail, postage prepaid, return receipt requested, or by nationally recognized overnight delivery service with proof of delivery retained, addressed as follows:

The Facility:
ATTN: Laura Turner
Avenue D Events, Inc
3008 4th Ave S
Birmingham, Al 35233

The Concessionaire:
Bobby T. Greenawalt
Greenawalt Hospitality, LLC
209 Alabama Street
Auburn, Alabama 36832

11.4 **Severability.** If any provision of this Agreement is determined to be illegal or unenforceable by a court of competent jurisdiction, the remainder of this Agreement will, nevertheless, remain in full force and effect in accordance with its terms (other than the unenforceable provision, which shall be deemed stricken).

11.5 **Entire Agreement.** This Agreement constitutes the entire understanding of the parties with respect to the subject matter of this Agreement.

11.6 **Construction.** The headings in this Agreement are inserted for convenience only and shall not constitute a part of this Agreement and shall not be used to construe or interpret any of its provisions. The Parties have participated jointly in negotiating and drafting this Agreement. If a question of interpretation arises, this Agreement shall be construed as if drafted jointly by the Parties, and no presumption or burden of proof shall arise favoring or disfavoring any Party by virtue of the authorship of any provision of this Agreement.

11.7 **Expenses of Transaction: Reliance on Advisors.** Each Party hereto shall pay its and its representatives fees, expenses and disbursements incurred in connection with this Agreement. Each Party represents and warrants to the other Party that it has relied on its own advisors for all legal, accounting, financial, tax or other advice whatsoever in connection with this Agreement and the transactions contemplated hereby.

11.8 **Governing Law and Jurisdiction.** This Agreement shall be construed in accordance with, and pursuant to, the laws of the State of Alabama. Any action to enforce the provisions of this Agreement shall be in the Circuit Court of Lee County, Alabama.

11.9 **Counterparts.** This Agreement may be executed in two (2) or more original or facsimile counterparts, each of which shall be deemed an original and all of which together shall constitute but one and the same instrument.

THE REMAINDER OF THIS PAGE IS BLANK

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first above written.

Avenue D Events, Inc

Laura Turner

By: Laura Turner

its owner

Greenawalt Hospitality, LLC

Bobby T. Greenawalt

by: Bobby T. Greenawalt

its President

(A)

47' - 10 3/4"

1' - 8 1/4"

10' - 6"

2' - 8"

6' - 8 1/2"

2' - 0"

ε

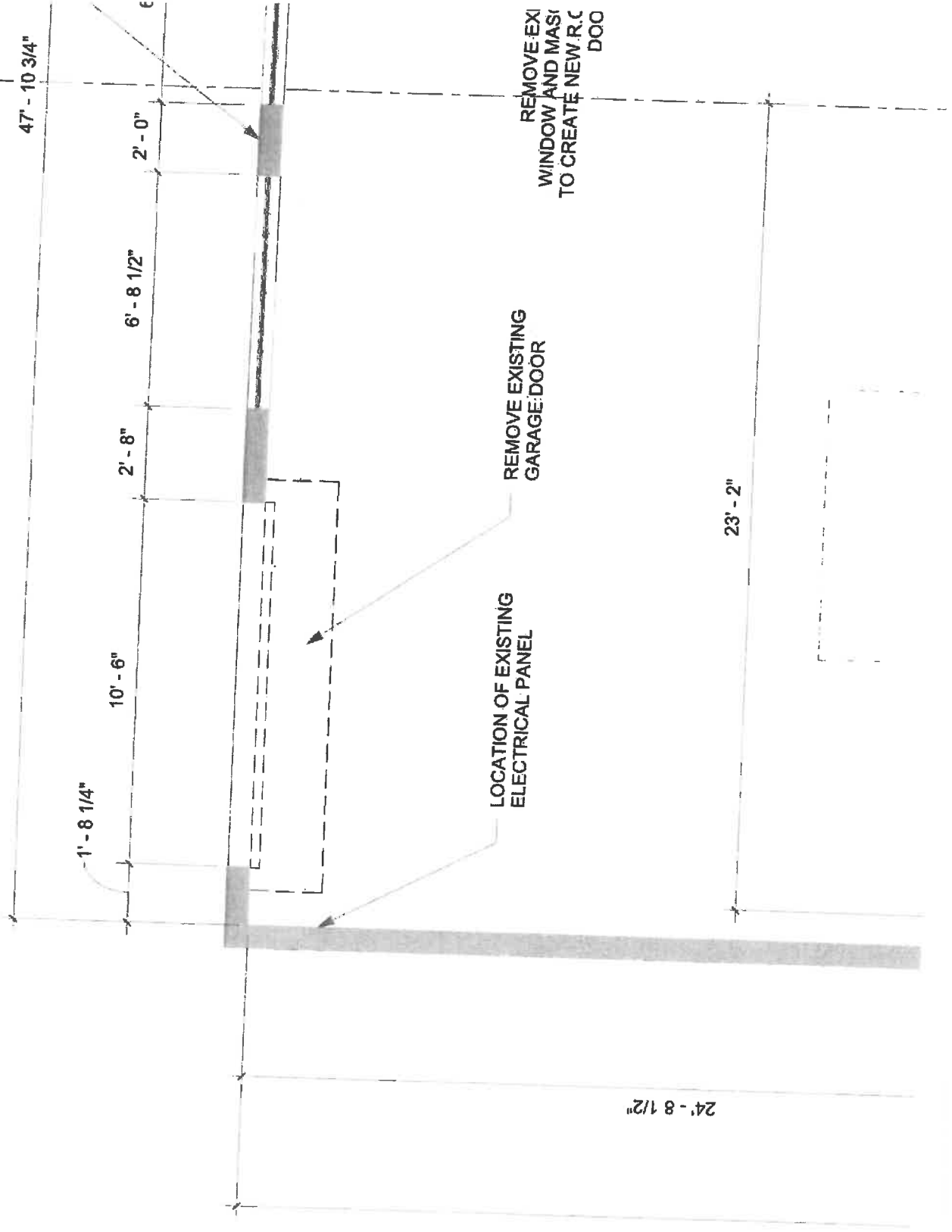
24' - 8 1/2"

23' - 2"

LOCATION OF EXISTING ELECTRICAL PANEL

REMOVE EXISTING GARAGE DOOR

REMOVE EXISTING WINDOW AND MASS TO CREATE NEW R.C. DOOR



PARCEL ID: 012300312004005000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Wednesday, May 18, 2022 11:06:06 AM

OWNER: E HUGHES ENTERPRISES LLC

ADDRESS: 4508 6TH AVE SOUTH

CITY/STATE: BIRMINGHAM AL

ZIP+4: Control Script failed for control TextBox16 , Source=ZIPF

SITE ADDR: 3008 4TH AVE S

CITY/STATE: BHAM, AL

ZIP: 35233



LAND: \$154,000.00

BLDG: \$80,100.00

OTHER: \$0.00

AREA: 7,148.15

ACRES: 0.16

SUBDIVISION INFORMATION:

NAME BIRMINGHAM BLOCKS

BLOCK: 447

LOT: 14

Section: 31-17-2W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Lakeview

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Southside (1703)

Communities: Southside (17)

Council Districts: District - 5 (Councilor: Darrell O`Quinn)

Zoning Outline: M1

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

Neighborhood Voting Form: Liquor Applications

Date: 4/22/22

Application Type:

Subject: Applicant's Entity Name Bar La Fete, LLC
Business Name Bar La Fete
Business Address 2212 Morris Ave Ste 201

Type of License/Permit Applying For:

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Central City Neighborhood Association met on May 17 and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

✓ Attendance ___ Oppose 17 Support ___ No Recommendation

Reason for Opposition None/Any

Applicant: YES attended NA meeting ^{Power of Attorney Attached} ___ did not attend NA meeting

Jhelita Purifay
President/Officer

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor)

Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Restaurant Retail Liquor – Type 020

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Bar La Fete, LLC
Mailing Address: 2018 Morris Ave Unit 1A
Birmingham, AL 35203

Trade Name: Bar La Fete

Location Address: 2212 Morris Ave, Ste 201

Contact Number: (615)476-8094 Contact Person: Victor King

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input checked="" type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 8TBS/18CHS

Date Applied: 4/22/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RESTAURANT RETAIL LIQOUR-TYPE 020

(Enter Type of License Applied For)

By: GS

(Revenue Official)

1. Name of Applicant (s) Bar La Fete, LLC

(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)

2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Victor Buchanan King	Member	[REDACTED] Franklin, TN	2412 2 nd Ave N Spt 28 Birmingham, AL 35203	5 years
ALDL# [REDACTED] Kristen Farmer Hall	Member	[REDACTED] Dalton GA	508 Devon DR Homewood, AL 35209	1 year

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 875-669 Page: 1 of 3 Date: 7/29/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Bar La Fete

4(a) Location 2212 Morris Ave Ste 201
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35203 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **2018 Morris Ave Unit 1A Birmingham, AL 35203**

(d) Business Phone _____ Fax: _____ Other Contact: **(615)476-8094**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired 2208-2214 Morris Avenue LLC
1830 3rd Ave N Unit 301 Birmingham, AL 35203
Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **8TBS/18CHS**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<i>NO - Applicants</i>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 28th day of April, 2022

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only!
Restaurant Retail Liquor

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:
(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Bar La Fete, LLC
Attention: _____
Address: 2018 Morris Ave, Unit 1A
City: Birmingham State: AL Zip Code: 35203
Area Code and Phone Number: (615)476-8094
Area Code and Fax Number: _____
Name of Contact Person: Victor King
E-Mail: _____ Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Bar La Fete
Attention: _____
Address: 2212 Morris Ave Ste 201
City: Birmingham State: AL Zip: 35203
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business.
If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 5 - TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)
1. Foreign Corporation (Incorporated in another state)

Section 6 - TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
2. Contractor (Please Specify)
3. Wholesaler
4. Retailer
5. Other (Please Specify)
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office (Please Specify the type of occupation or office)
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
10. Transient Vendors/Special Events: Date(s) of the Event, Event Location

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Product:

Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number Number of Employees in Birmingham (Required)

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month Day Year
Enter Date City of Birmingham Taxpayer ID Applied For: Month Day Year

Section 10 - Tax Liabilities Check the taxes for which you are liable.

- Sales Tax
Sellers Use Tax
Consumers Use Tax
Lease Tax
Occupational Tax- Employers
Lodgings Tax
Business License Tax
TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
State of Alabama Sales Tax Number
State of Alabama Sellers Use Tax Number
State of Alabama Consumers Use Tax Number
State of Alabama Lease Tax Number
State of Alabama Lodgings Tax Number
State of Alabama Unemployment Tax Number

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, usc, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)
SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS	_____
BLIC	_____
TERRITORY	_____
ANNEX	_____
HEALTH DEPT PERMIT	_____
OTHER REQUIRED PERMIT	_____
ARTICLES OF INCORPORATION	_____
CERTIFICATE OF AUTHORITY	_____
TAX FORMS ORDERED <input type="checkbox"/>	NBL ORDERED <input type="checkbox"/>

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS	_____
BLIC	_____
TERRITORY	_____
ANNEX	_____
HEALTH DEPT PERMIT	_____
OTHER REQUIRED PERMIT	_____
ARTICLES OF INCORPORATION	_____
CERTIFICATE OF AUTHORITY	_____
TAX FORMS ORDERED <input type="checkbox"/>	NBL ORDERED <input type="checkbox"/>

Bar La Fete

Owners - Victor King and Kristen Hall

Victor King

Born [REDACTED] Franklin TN

SSN [REDACTED]

Lives at 2412 2nd Ave. North Apt 28 Birmingham AL 35203 for 5 years

Kristen Hall

Born [REDACTED] Dalton GA

SSN [REDACTED]

Lives at 508 Devon Drive, Homewood AL 35209 for 1 year

DRIVER LICENSE



ALABAMA



NO. 9386610

CLASS D

D.O.B. 04-17-1990

EXP. 04-21-2023

VICTOR BUCHANAN
KING

2412 2ND AVE N APT 28
BIRMINGHAM AL 35203-3865

ENDORSEMENTS

REST

ISS. 05-01-2019

SEX M

HT 6-00

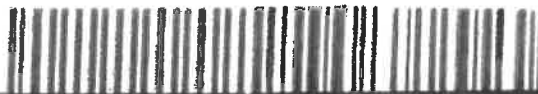
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HAIR BRO

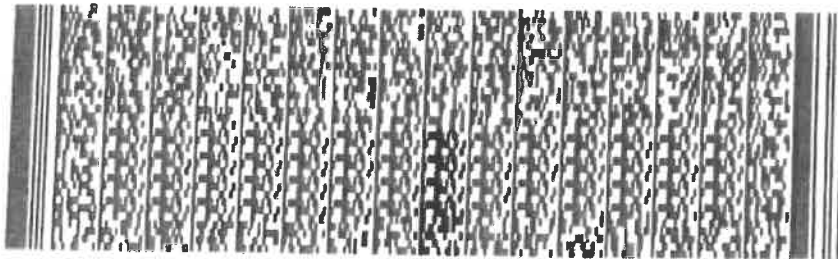
Secretary Hal Taylor
Secretary of Law Enforcement

[Redacted]



VICTOR BUCHANAN KING
CLASS: D-Regular Operators License

ENDORSEMENTS:
RESTRICTIONS:



Rev 11-01-2014

[Redacted]

DRIVER LICENSE

ALABAMA



NO. 713997

CLASS D

D.O.B. 06-24-1977

EXP 12-29-2023

KRISTEN FARMER HALL

3114 WHITEHALL RD
HOMWOOD AL 35209-4017

ENDORSEMENTS

REST A

ISS 2-06-2019

SEX F

HT 5-02

EYES BRO

WT 120

HAIR BRO

Kristen Farmer Hall

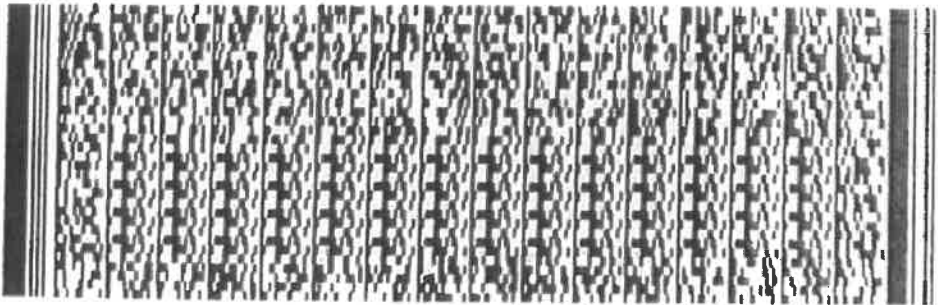
Secretary Hal Taylor
Secretary of Law Enforcement

[REDACTED]



KRISTEN FARMER HALL
CLASS: D-Regular Operators License

ENDORSEMENTS:
RESTRICTIONS: A-Corrective Lenses



Rev [REDACTED]
[REDACTED]

LEASE AGREEMENT

THIS LEASE AGREEMENT (this "Lease") is made and entered into this 24th day of September, 2021, by and between Landlord and Tenant.

WITNESSETH:

I. **Certain Definitions** . For purposes of this Lease, the following terms shall have the meanings hereinafter ascribed thereto:

- (a) Landlord: 2208-2214 Morris Avenue, LLC
- (b) Landlord's Address: 1820 3rd Avenue North, Unit 301
Birmingham, Alabama 35203
Attention: Property Manager
- (c) Tenant: Bar La Fete, LLC
- (d) Tenant's Address: 2212 Morris Avenue
Ste. 201
Birmingham, AL 35203
- (e) Guarantor(s): *Kristen*
Kristin Hall and Victor King
- (f) Guarantor Address(es): 2018 Morris Ave 35203
- (g) Building Address: 2212 Morris Avenue
Birmingham, Alabama
- (h) Premises Number: Suite 201
- (i) Rentable Floor Area of Demised Premises: 2,927 rentable square feet.
- (j) Rentable Floor Area of Building: 2,655 rentable square feet.
- (k) Commencement Date: Lease Commencement shall begin upon completion of Landlord's Work.
- (l) Lease Term: The period commencing on the Commencement Date and expiring on the final day of the month in which the 120th month anniversary of the date prior to the Commencement Date occurs.

(m) **Initial Estimate of Operating Expenses:** Landlord and Tenant hereby agree that Tenant's proportionate share of Operating Expenses is initially estimated to be \$6.00 per square foot of the Demised Premises per annum, which is calculated by dividing the square feet of the Demised Premises by the square feet of the Project and multiplying the resulting quotient by the amount of the Operating Expenses for the applicable year. The parties acknowledge that such amount is an estimate only, and the actual amounts shall be determined as further described in this Lease.



STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

1. THE NAME OF THE LIMITED LIABILITY COMPANY

Bar La Fete, LLC

2. THIS FORM WAS PREPARED BY:

Second Row Law, LLC

3. THE NAME AND STREET (NO PO BOXES) ADDRESS OF THE REGISTERED AGENT LOCATED AT THE REGISTERED OFFICE (MUST BE LOCATED IN ALABAMA):

**Victor King
2018 Morris Avenue, Unit 1A
Birmingham, AL 35203
JEFFERSON**

MAILING ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFERENT FROM STREET ADDRESS):

4. THE UNDERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEMBER OF THE LIMITED LIABILITY COMPANY.

5. CHECK ONLY IF THE TYPE APPLIES TO THE LIMITED LIABILITY COMPANY BEING FORMED:

- NON-PROFIT LLC
- NON-PROFIT SERIES LLC
- PROFESSIONAL SERIES LLC
- PROFESSIONAL LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 8
- SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11

(FOR SOS OFFICE USE ONLY)

Alabama
Sec. Of State
875-669 DLL
Date 07/29/2021
Time 15:38:00
File \$100.00
County \$100.00
Exp \$0.00

Total \$200.00

6. THE UNDERSIGNED SPECIFY 07/29/2021 15:38:24 AS THE EFFECTIVE DATE AND THE TIME OF FILING

ATTACHED ARE ANY OTHER MATTERS THE MEMBERS DETERMINE TO INCLUDE HEREIN

7. ORGANIZER(S) - OPTIONAL

Not Applicable

07/29/2021
DATE

Michael Clarke Organizer
ELECTRONIC SIGNATURE & TITLE

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Bar La Fete, LLC

This name reservation is for the exclusive use of Second Row Law, LLC, 2324 Second Avenue North, Birmingham, AL 35203 for a period of one year beginning July 29, 2021 and expiring July 29, 2022



RES967237

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

July 29, 2021

Date

John H. Merrill

Secretary of State



PARCEL ID: 012200361031006000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, April 22, 2022 11:27:08 AM

OWNER: 2208 2214 MORRIS AVENUE LLC

ADDRESS: 1820 3RD AVENUE NORTH UNIT 301

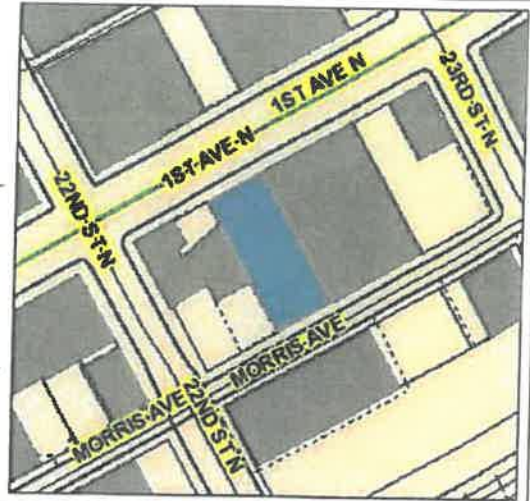
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35203

SITE ADDR: 2213 1ST AVE N

CITY/STATE: BHAM, AL

ZIP: 35203



LAND: \$492,800.00

BLDG: \$1,394,800.00

OTHER: \$0.00

AREA: 13,831.76

ACRES: 0.32

SUBDIVISION INFORMATION:

NAME LOT 9A RESUR LOTS 9 10 11

BLOCK: 107B

LOT: 9A

:

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Morris Avenue / 1st Ave N

Commercial Revitalization District: Morris Avenue

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Central City (1201)

Communities: Northside (12)

Council Districts: District - 5 (Councilor: Darrell O'Quinn)

Zoning Outline: B4

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

Neighborhood Voting Form: Liquor Applications

Date: 4/19/22

Application Type: New Application/Event Center

Subject: Applicant's Entity Name: Gifts of Love Banquet Hall LLC
Business Name: Gifts of Love Banquet Hall
Business Address: 1343 Bessemer RD

Type of License/Permit Applying For:

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input checked="" type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Central Park Neighborhood Association met on 5-12-22 and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

Attendance Oppose Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting did not attend NA meeting
Vah M...
President/Officer

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor)
Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Special Retail Liq Type 160/More than 30 Days

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Gifts of Love Banquet Hall LLC
Mailing Address: 1401 9th ST
Pleasant Grove, AL 35127
Trade Name: Gifts of Love Banquet Hall
Location Address: 1343 Bessemer RD
Contact Number: (205)413-1671
Contact Person: Pamela Tubbs

New Application Transfer

Type of License

- | | |
|--|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input checked="" type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 14TBS/112CHS

Date Applied: 4/19/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL LIQ TYPE 160/MORE 30 DAYS

(Enter Type of License Applied For)

By: **GS**

(Revenue Official)

1. Name of Applicant (s) Gifts of Love Banquet Hall LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL # [REDACTED] Pamela J Tubbs	Member	[REDACTED] Birmingham AL	1401 9th St Pleasant Grove, AL 35127	6 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 001-013 Page: 1 of 2 Date: 4/11/2022 County: Jefferson
696

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Gifts of Love Banquet Hall

4(a) Location 1343 Bessemer RD
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35208 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: 1401 9th St Pleasant Grove, AL 35127

(d) Business Phone _____ Fax: _____ Other Contact: (205)413-1671

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Caliber Birmingham LLC
PO Box 19154 Atlanta, GA 31126

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 147BS / 142CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Catered Food
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>ND-Applicants</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 19th day of April, 2022

Samuel
 Signature of Affiant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
Special Retail Lic Type 160/More 30 Days

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Gifts of Love Banquet Hall LLC
Attention: _____
Address: 1401 9th St
City: Pleasant Grove State: AL Zip Code: 35127
Area Code and Phone Number: (205)413-1671
Area Code and Fax Number: _____
Name of Contact Person: Pamela Tubbs
E-Mail: giftoflove@yahoo.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Gift of Love Banquet Hall
Attention: _____
Address: 1343 Bessemer RD
City: Birmingham State: AL Zip: 35208
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying “General Information for Preparing an Application for Tax Certificate Form” instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify)
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify) **Event Center**
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
- 10. Transient Vendors/Special Events:
Date(s) of the Event _____
Event Location _____

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Event Center Product: Alcohol/Catered Food/Special Events

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number 88-1768450 Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU:** (Write "None" if no number assigned)
- State of Alabama Sales Tax Number _____
 - State of Alabama Sellers Use Tax Number _____
 - State of Alabama Consumers Use Tax Number _____
 - State of Alabama Lease Tax Number _____
 - State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Tubbs, Pamela	Member	[REDACTED]

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State _____ Zip Code _____
 Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed: [Signature] Date 4/19/22
 Signature of Person Completing This Application

Pamela Tubbs (205) 413-1671
 Print the Name of the Person Completing This Application Phone Number of Person Completing Application

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
 C2 - [Handwritten notes] 2021-01069
 APPROVAL by [Signature] 4/19/2022
 COUNCIL FIRST

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
 BLIC _____
 TERRITORY _____
 ANNEX _____
 HEALTH DEPT PERMIT _____
 OTHER REQUIRED PERMIT _____
 ARTICLES OF INCORPORATION _____
 CERTIFICATE OF AUTHORITY _____
 TAX FORMS ORDERED NBL ORDERED

DRIVER LICENSE
ALABAMA

NO. [REDACTED] EXP. [REDACTED]

D.O.B. [REDACTED]
PAMELA J
TUBBS

1401 6TH ST
PLEASANT GROVE AL 36127-2357

SEX [REDACTED] HT [REDACTED] WT [REDACTED] HAIR [REDACTED] EYES [REDACTED]

HT 5-00 WT 120 HAIR BRN EYES BLU

Secretary of State
Department of Transportation

Pamela J. Tubbs

**ARTICLE 1
BASIC LEASE PROVISIONS AND EXHIBITS**

Section 1.01 - Summary of the Basic Lease Provisions

- (A) **DATE OF LEASE:** September __, 2021.
- (B) **NAME OF LANDLORD:** Caliber Birmingham, LLC.

ADDRESS FOR NOTICES: SEND COPY OF NOTICE TO: ADDRESS FOR PAYMENT OF RENT:

Caliber Birmingham LLC
P.O. Box 19154
Atlanta, GA 31126

Nelson Mullins Riley &
Scarborough, LLP
201 17th Street NW, Suite 1700
Atlanta, GA 30363
Attn: Eric R. Wilensky

RENT TO BE PAID ACH OR WIRE

- (C) **NAME AND ADDRESS OF TENANT:**
Pamala Tubbs
1401 9th St.
Pleasant Grove, AL 35127

(E) **PERMITTED USE:** Event Center OR any other legal use and allowed in Family Dollar lease Other than the foregoing, the Premises shall be used for no other purpose.

(F) **TENANT'S TRADE NAME:** G.O.L Banquet Hall (Gift of Love Banquet Hall) __, or such other trade name approved by Landlord, in Landlord's sole discretion.

(G) **PROJECT:** 1343-1355 Bessemer Rd. Birmingham, AL (the "Project") is located on the land more particularly described in Exhibit "A", said Exhibit incorporated by reference into the Lease. The Project will generally be developed by Landlord as shown on the Site Plan. The Project is comprised of the land, improvements, parking facilities, driveways, walkways, landscaping and other Common Areas, as hereinafter defined.

(H) **THE PREMISES:** That portion of the Project as indicated on the "Site Plan" attached hereto as Exhibit "B" and made a part hereof; said Premises containing approximately 4,000 square feet.

(I) **COMMENCEMENT DATE:** The Lease Term (as defined below) shall begin ninety (90) days after the Actual Delivery Date (the "Commencement Date"). Tenant shall otherwise comply with the terms hereof from and after the date hereof.

(J) **LEASE YEAR:** Each twelve (12) month anniversary of the term commencing on the Commencement Date. However, if the Commencement Date does not occur on the first day of a calendar month, the first Lease Year hereunder shall include the remainder of the month during which the Commencement Date occurs, plus the twelve (12) month period immediately succeeding the month during which the Commencement Date occurred and each Lease Year thereafter shall be the consecutive

STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC)
CERTIFICATE OF FORMATION

PURPOSE: In order to form a Limited Liability Company (LLC) under Section 10A-5A-2.01 of the *Code of Alabama 1975*, this Certificate of Formation and the appropriate filing fees must be filed with the Office of the Secretary of State. The information required in this form is required by Title 10A.

1. The name of the limited liability company (must contain the words "Limited Liability Company" or the abbreviation "L.L.C." or "LLC," and comply with *Code of Alabama*, Section 10A-1-5.06. You may use Professional or Series before Limited Liability Company or LLC (or PLLC or SLLC) if they apply:

Gifts Of Love Banquet Hall LLC

2. A copy of the Name Reservation Certificate from the Office of the Secretary of State must be attached.

3. The name of the registered agent (only one agent): Pamela J Tubbs

Street (no PO Boxes) address of registered office (must be located in Alabama):

1343 Bessemer Rd Bessemer, AL 35208

*COUNTY of above address: JEFFERSON

Mailing address in Alabama of registered office (if different from street address):

1401 9th St Pleasant Grove, AL 35127 JEFFERSON

4. The undersigned certify that there is at least one member of the limited liability company.

(For SOS Office Use Only)

Alabama	
Sec. Of State	
001-013-696	DLL
Date	04/11/2022
Time	08:55:00
File	\$100.00
County	\$100.00

Total	\$200.00

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

5. Check only if the type applies to the Limited Liability Company being formed:

Series LLC complying with Title 10A, Chapter 5A, Article 11

Professional LLC complying with Title 10A, Chapter 5A, Article 8

Non-Profit LLC complying with Section 10A-5A-1.04(c)

6. The filing of the limited liability company is effective immediately on the date received by the office of the Secretary of State, Business Services Division or at the delayed filing date (cannot be prior to the filing date) specified in this filing complying with Section 10A-1-4.12

The undersigned specify 4 / 11 / 2022 as the effective date (must be on or after the date filed in the office of the Secretary of State, but no later than the 90th day after the date this instrument was signed) and the time of filing to be 8 : 55 AM or PM. (cannot be noon or midnight -- 12:00)

Attached are any other matters the members determine to include herein (if this item is checked there must be attachments with the filing).

4 / 11 / 2022
Date (MM/DD/YYYY)

Pamela Tubbs

Signature as required by 10A-5A-2.04

Owner

Typed title (organizer or attorney-in-fact)

*County of Registered Agent is requested in order to determine distribution of County filing fees.

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Gifts Of Love Banquet Hall LLC

This name reservation is for the exclusive use of Pamela Tubbs, 1401 9th St, Pleasant Grove, AL 35127 for a period of one year beginning April 07, 2022 and expiring April 07, 2023



RES015357

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

April 07, 2022

Date

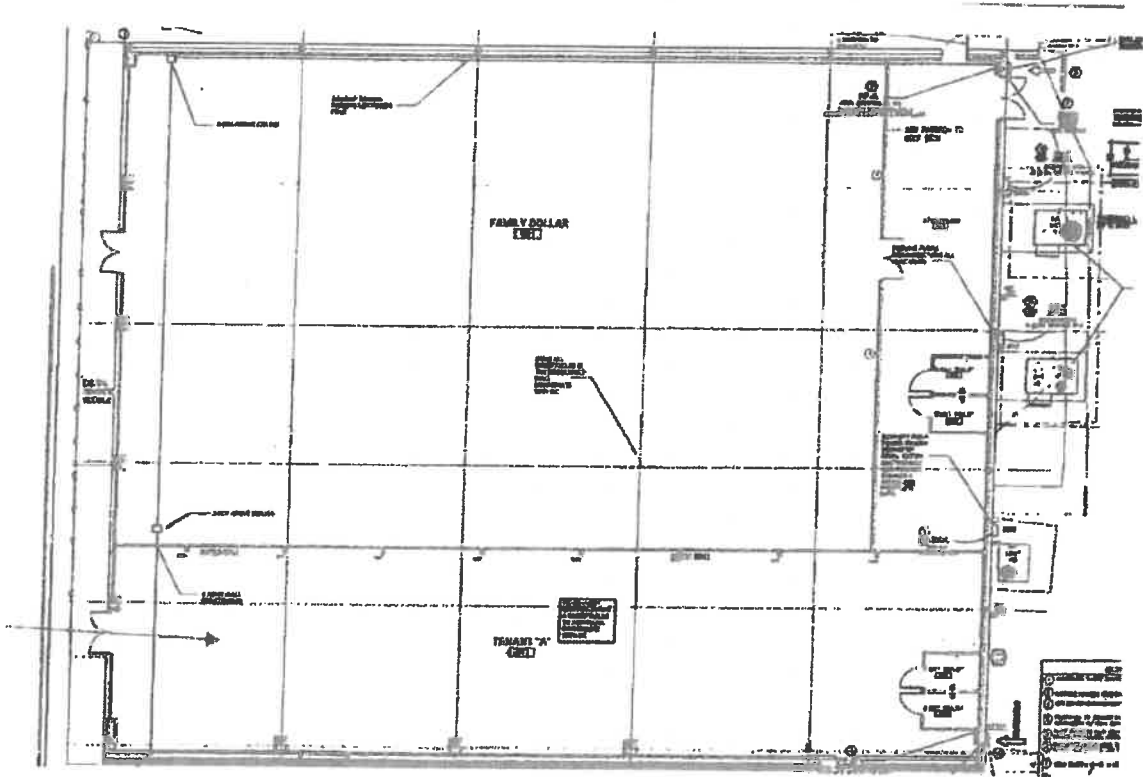
John H. Merrill

Secretary of State

Gift of Love Safety Plan

1. Exit Lights UP when Power fail + Exit Lighting
2. Lighted Parking Area
3. Security Guards
4. Cameras inside and Outside
5. Posted Exit Signs

EXHIBIT A—SITE PLAN



FAMILY DOLL

9,000 SF

**Available
4,000 SF**

Scrum
Desk

Exit
Front Door

Wash room

Door

Bar

Hall

Door

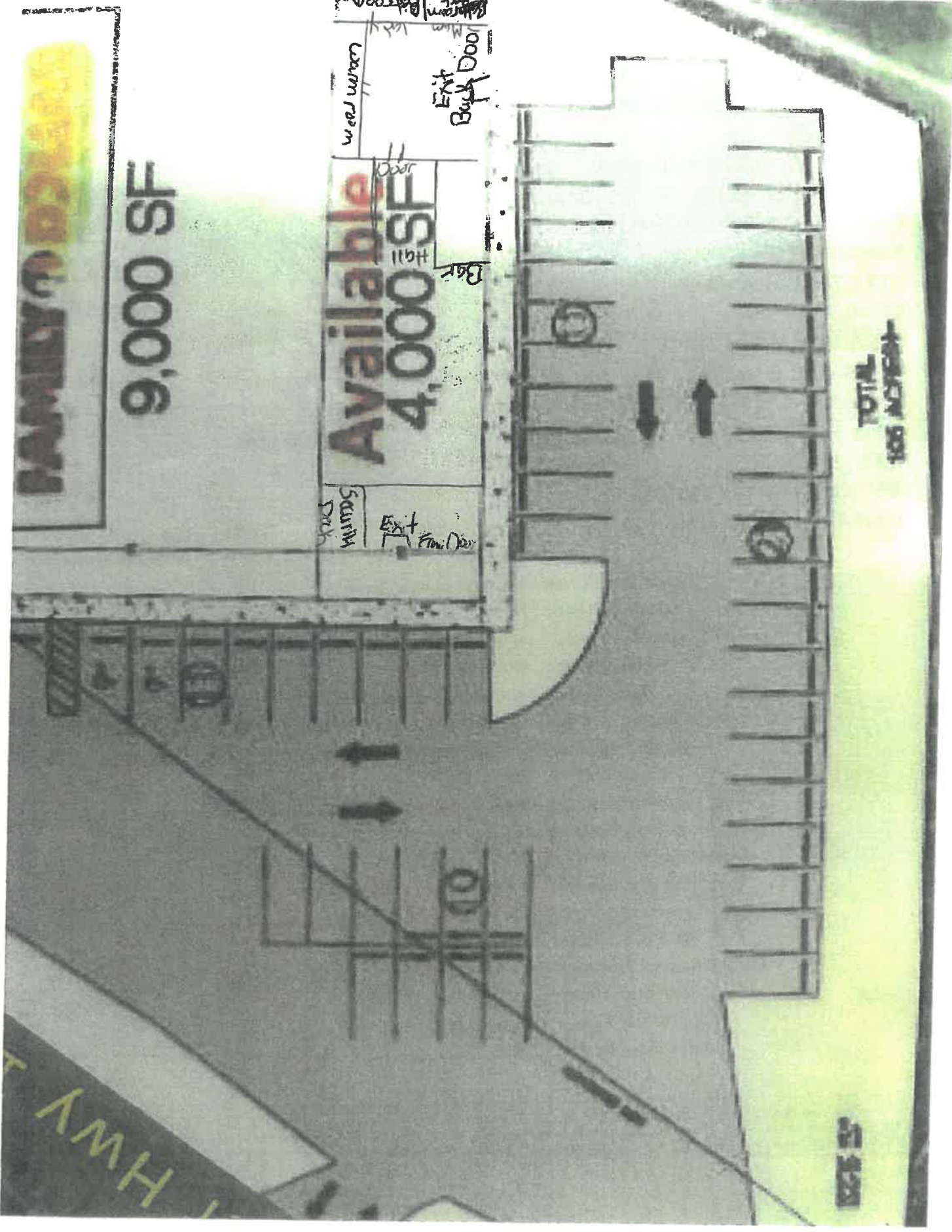
Exit
Back Door

Bottom
Patron

**TOTAL
100 ACRES**

5 125

HWY



PARCEL ID: 012900073048005000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Tuesday, April 19, 2022 10:34:04 AM

OWNER: CALIBER BIRMINGHAM LLC

ADDRESS: P.O. BOX 19154

CITY/STATE: ATLANTA GA

ZIP+4: 31126

SITE ADDR: 1343 BESSEMER RD

CITY/STATE: BHAM, AL

ZIP: 35208



LAND: \$73,000.00

BLDG: \$0.00

OTHER: \$0.00

AREA: 23,732.87

ACRES: 0.54

SUBDIVISION INFORMATION:

NAME TAYLORS 2ND AD-CEN 29-7-3

BLOCK: 1

LOT: 3&4

Section: 7-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Central Prk (203)

Communities: Five Points West (2)

Council Districts: District - 8 (Councilor: Carol Clarke)

Zoning Outline: C2

Demolition Quadrants: DEM Quadrant - 2

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

Transfer Application: Beer-Type 050/ Wine – Type 070 (Off Premise)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Maiadah Abdulrahma Abdullah
Mailing Address: 541 Graymont Ave W Ste A
Birmingham AL 35204
Trade Name: Graymont Food
Location Address: 541 Graymont Ave W
Contact Number: (205)563-2075 Contact Person:
Lynette Peters

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input checked="" type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs NA

Date Applied: 11/9/2020

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

BEER-TYPE 050/WINE-TYPE 070 (OFF PREMISE ONLY)

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Maiadah Abdulrahma Abdullah
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
834-25-8218 ALDL#9580416 Maiadah A. Abdullah	Owner	06/20/93 Yeman	2860 Regal Cir Apt F Vestavia Hills AL 35216	3 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book _____ Page: _____ Date: _____ County: _____
Foreign Corporation: certificate of Authority Date: _____ (get copy of original papers)

3. Trade Name Graymont Food
- 4(a) Location 541 Graymont Ave W Ste A
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35204 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **541 Graymont Ave W Ste A**
- (d) Business Phone _____ Fax: _____ Other Contact: **(205)563-2075**
5. Name, trade name and License number of last or previous licensee: **Sharifa M Saleh**
Trade name Graymont Fodd & Grocer Year 2018 Type 150K 150N Taxpayer ID 484854

- 6 (a) Owner of real estate for which license is desired Jowher Ali Almansoob
595 South Forest Dr Birmingham AL 35209
Address
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? _____

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____
- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?
- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Grocery Items
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>None - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 9th day of November, 2020

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
Beer/Wine (Off Premise)

Transfer: NO SPU Required

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 – WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 – LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Maiadah Abdulrahma Abdullah
Attention: _____
Address: 541 Graymont Ave W Ste A
City: Birmingham State: AL Zip Code: 35204
Area Code and Phone Number: (205)563-2075
Area Code and Fax Number: _____
Name of Contact Person: Lynette Peters
E-Mail: _____ Website Address: _____

Section 3 – TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Graymont Food
Attention: _____
Address: 541 Graymont Ave W Ste A
City: Birmingham State: AL Zip: 35204
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 – CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: Sharifa Saleh
Trade Name (d/b/a) Graymont Food & Grocery
Mailing Address of Former Owner 541 Graymont Ave W Ste A
Address (es) of Former Location(s) 541 Graymont Ave W Ste A
Area Code and Phone Number of Former Owner: _____

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)
8. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
2. Contractor (Please Specify)
3. Wholesaler
4. Retailer
5. Other (Please Specify)
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
9. State Certified, State Regulated, or State Licensed Occupations
10. Transient Vendors/Special Events

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Convenience Store Product: Alcohol/Grocery/Merchandise/Tobacco

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number Number of Employees in Birmingham (Required) 2

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month Day Year
Enter Date City of Birmingham Taxpayer ID Applied For: Month Day Year

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- Sales Tax
Sellers Use Tax
Consumers Use Tax
Lease Tax
Occupational Tax- Employers
Lodgings Tax
Business License Tax
TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
State of Alabama Sales Tax Number
State of Alabama Sellers Use Tax Number
State of Alabama Consumers Use Tax Number
State of Alabama Lease Tax Number
State of Alabama Lodgings Tax Number
State of Alabama Unemployment Tax Number

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 – OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Abdullah, Maiadah	Owner	834-25-8218

Section 12 – CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13– STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS –Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

Signature of Person Completing This Application

11/9/2020

Date

Print the Name of the Person Completing This Application

Phone Number of Person Completing Application

CITY OFFICE USE ONLY – Location

ZONING APPROVAL AND COMMENTS:
e-BA-OK-ADS-11-9-2020
Must be approved by City Council 131

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)
SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED

LIMITED TERM



FN DRIVER LICENSE

ALABAMA

NO. 9580416

CLASS D

D.O.B. 06-20-1993

EXP. 05-04-2023

MAIADAH ABDULRAHMA

ABDULLAH

2860 REGAL GIR APT F

VESTAVIA HILLS AL 35216-4660

ISS 06-20-2019

SEX F

HT 5'05"

WT 125

HAIR BLK

EYES BRO

HAIR BLK

Secretary, Paul Taylor
Alabama Department of Transportation
Alabama Department of Law Enforcement

M. M. Taylor

SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR
834-26-8218
MAIADAH ABDUL RAHMAN
ABDULLAH

Maiadah
SIGNATURE

05/26/2015

U.S. SOCIAL SECURITY ADMINISTRATION

POWER OF ATTORNEY

BE IT KNOWN, that Sharifa M. Saleh, has made and appointed Lynette Peters, to be true and lawful attorney for her name, place and stead, giving and granting to said power of attorney general, for State of Alabama, Jefferson County, and City Taxes. Full and unlimited power and authority to do and perform all and every act and thing whatsoever requisite necessary for my **LICENSES AND TAXES** to be done in and about, to all intents and purposes, as could be done if personally present, with full power of substitution and revocation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal
this 4th day of November, 2020.

Sharifa
Sharifa M Saleh

Signed, sealed and delivered in the presence of:

State of Alabama)

County of Jefferson)

The foregoing instrument was acknowledged by me this 4th day of
November, 2020 by: Sharifa M. Saleh, who is/are personally
known by me or who has/have produced: Alabama State Identification as
identification and who did not take an oath.

(SEAL)

Cen Purif
Notary Public

State of Alabama

My Commission Expires: 06/24/2024

**TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)**

I, Sharifa M Saleh (current taxpayer), holding City of Birmingham License ID# 484854 (six-digit City ID), located at 541 Graymont Ave W Ste A (business address) Birmingham, AL 35204, hereby agree that said License be

transferred to Maidah A. Abdullah (applicant) provided Maidah A. Abdullah (applicant) obtains approval from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of this licensed establishment and for all taxes due until Maidah A. Abdullah (applicant) obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not approved by the local governing body or the ABC Board, I must take over complete control, operation, and responsibility of these licensed premises. If I do not continue operating this licensed establishment, then, I will turn in my ABC Board License to the local ABC Board Field Office and all my City of Birmingham licenses to the Revenue Division of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred until all taxes and licenses are paid and current.

LICENSEE Sharifa M Saleh

DATE 11-9-20

APPLICANT Maidah A. Abdullah

DATE 11-9-20

Witness
NOTARY Greg Stanley

DATE 11-9-2020

COMMERCIAL LEASE

This Lease is made this 1st day of October, 2020, by and between Jowher Almansoob (hereinafter "Landlord") and Maiadah Abdulrahman Abdullah (hereinafter "Tenant"). In consideration for the mutual promises and covenants contained herein, and for other good and valuable consideration, the parties hereby agree as follows:

1. The Landlord leases to the Tenant, and the Tenant rents from the Landlord the following described premises: 541 Graymont Ave, Ste. A. , Birmingham, AL 35204.
2. The term of the Lease shall be for 3 years commencing October 1, 2020 and ending October 1, 2023, with an option to renew this Lease for an additional term of 2 years from October 1, 2023, with all terms and conditions of this Lease remaining the same except that the rent shall be \$1,000.00. If the Tenant remains as tenant after the expiration of this Lease with the consent of the Landlord but without signing a new lease, a month-to-month tenancy will be created with the same terms and conditions as this Lease, except that such new tenancy may be terminated by ninety (90) days written notice from either the Tenant or the Landlord.
3. The Tenant shall pay to Landlord as rent per year in equal monthly installments of \$ 3,000.00 payable in advance by the 5th of the month (Time Period). Security Deposit of \$2,000.00. Tenant agrees that a service and bookkeeping charge of \$50.00 shall become due and payable each month and every month that the rent has not been received in the office of Landlord by the 30th of the month.
4. Tenant shall use and occupy the premises only as a grocery store (Tenant Rental Status) subject at all times to the approval of the Landlord.
5. The Tenant shall purchase at his own expense public liability insurance in the amount of as well as fire and hazard insurance in the amount of \$ 500,000.00 for the premises and shall provide satisfactory evidence thereof to the Landlord and shall continue same in force and effect throughout the Lease term hereof.
6. The Tenant shall not permit or commit waste to the premises.
7. The Tenant shall comply with all rules, regulations, ordinances codes and laws of all governmental authorities having jurisdiction over the premises.
8. The Tenant shall not permit or engage in any activity that will effect an increase in the rate of insurance for the Building in which the premises is contained nor shall the Tenant permit or commit any nuisance thereon.
9. The Tenant shall not sublet or assign the premises nor allow any other person or business to use or occupy the premises without the prior written consent of the Landlord, which consent may not be unreasonably withheld.
10. At the end of the term of this Lease, the Tenant shall surrender and deliver up the premises in the same condition (subject to any additions, alterations or improvements, if any) as presently exists, reasonable wear and tear excluded.
11. Upon default in any term or condition of this Lease, the Landlord shall have the right to undertake any or all other remedies permitted by Law.
12. This Lease shall be binding upon, and inure to the benefit of, the parties, their heirs, successors, and assigns.

Signed this 1st day of October (Month) 2020 (Year).

Jowher Almansoob
Landlord

Maiadah Abdulrahman Abdullah
Tenant

PARCEL ID: 012200343022001000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Monday, November 9, 2020 11:44:35 AM

OWNER: ALMANSOOB JOWHER ALI -238231

ADDRESS: 595 SOUTH FOREST DRIVE

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35209

SITE ADDR: 541 GRAYMONT AVE W

CITY/STATE: BHAM, AL

ZIP: 35204

LAND: \$25,400.00

BLDG: \$167,100.00

OTHER: \$0.00

AREA: 14,497.81

ACRES: 0.33

SUBDIVISION INFORMATION:

NAME EARLE PLACE 1ST ADD

BLOCK: 15

LOT: 8&9

:

Section: 34-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Graymont (1604)

Communities: Smithfield (16)

Council Districts: District - 6 (Councilor: Crystal Smitherman)

Zoning Outline: CB2

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

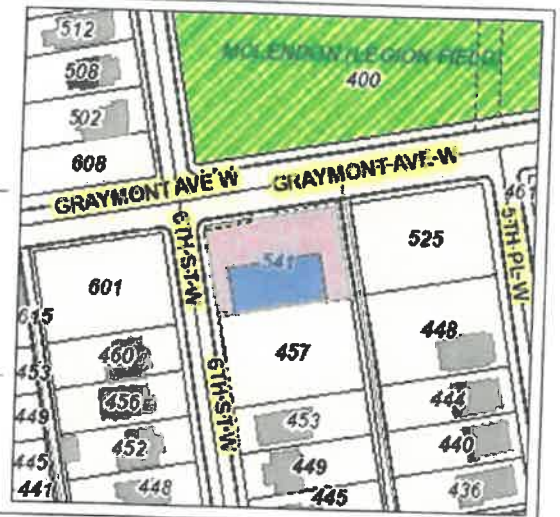
RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON



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Neighborhood Voting Form: Liquor Applications

Date: 6/7/22

Application Type: Transfer Application – Special Retail Liquor/

Subject: Applicant's Entity South Concession, LLC
 Name
 Business Name Iron City Bham
 Business Address 513 22nd St S

Type of License/Permit Applying For:

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input checked="" type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Southside Neighborhood Association met on _____ and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

_____ Attendance _____ Oppose _____ Support _____ No Recommendation

Reason for Opposition No NA Officers

Applicant: _____ attended NA meeting _____ did not attend NA meeting

 President/Officer

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor)
Failure to attend the neighborhood meeting may result in a delay in the liquor process.

Transfer Application: Special Retail Liq Type 160/More than 30 Days

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: South Concession, LLC

Mailing Address: 513 22nd St S
Birmingham, AL 35233

Trade Name: Iron City Bham

Location Address: 513 22nd St S

Contact Number: (205)761-5101

Contact Person:
Brooke Garrison

New Application

Transfer

Type of License

- | | |
|--|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input checked="" type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs **Multiple**

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL LIQ TYPE 160/MORE 30 DAYS

By: **GS**

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) South Concession, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
[REDACTED] KYDL# [REDACTED] Susan M Schulte	Member	[REDACTED] Springfield, OH	11200 Beech RD Louisville, KY 40243	3 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 0520000 Page: 1 of 2 Date: 5/20/2022 County: Montgomery
39162

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Iron City Bham
- 4(a) Location 513 22nd St S
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35233 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **513 22nd St S Birmingham, AL 35233**
- (d) Business Phone _____ Fax: _____ Other Contact: **(205)761-5101**
5. Name, trade name and License number of last or previous licensee: **Iron City Live Inc**
Trade name Iron City Bham Year 2013 Type 150O 150M Taxpayer ID 466842
216

- 6 (a) Owner of real estate for which license is desired Birmingham Blues LLC
513 22nd St S Birmingham, AL 35233
Address
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Event Center
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple for Events**
7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____
- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
 (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Bar Food
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 7th day of JUNE, 2022

Brooke Harrison
Signature of Affiant

Greg Staley
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
Special Retail Lic / More than 30 Days

Transfer

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: South Concession, LLC
 Attention: _____
 Address: 513 22nd St S
 City: Birmingham State: AL Zip Code: 35233
 Area Code and Phone Number: (205)761-5101
 Area Code and Fax Number: _____
 Name of Contact Person: Brooke Garrison
 E-Mail: brooke@ironcitybham.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Iron City Bham
 Attention: _____
 Address: 513 22nd St S
 City: Birmingham State: AL Zip: 35233
 Area Code and Phone Number of Business Location: _____
 Area Code and Fax Number of Business Location: _____
 Name of Contact Person at Business Location: _____
 E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: Iron City Live Inc
 Trade Name (d/b/a) Iron City Bham
 Mailing Address of Former Owner 513 22nd ST S
 Address (es) of Former Location(s) 513 22nd ST S
 Area Code and Phone Number of Former Owner: (205)202-5483

Section 5 - TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 - TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify)
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify) **Event Center**
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
- 10. Transient Vendors/Special Events:
Date(s) of the Event _____
Event Location _____

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Event Center Product: Alcohol/Concerts/Events/Food

Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
 Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 - Tax Liabilities Check the taxes for which you are liable.

- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)**
- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- State of Alabama Sales Tax Number _____
 State of Alabama Sellers Use Tax Number _____
 State of Alabama Consumers Use Tax Number _____
 State of Alabama Lease Tax Number _____
 State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Schulte, Susan	Member	61-9846

Section 12 CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State _____ Zip Code _____
 Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS —Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

Brooke Garrison
 Signature of Person Completing This Application

6-7-22
 Date

Brooke Garrison
 Print the Name of the Person Completing This Application

(205) 761-5101
 Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS	_____
BLIC	_____
TERRITORY	_____
ANNEX	_____
HEALTH DEPT PERMIT	_____
OTHER REQUIRED PERMIT	_____
ARTICLES OF INCORPORATION	_____
CERTIFICATE OF AUTHORITY	_____
TAX FORMS ORDERED	<input type="checkbox"/>
NBL ORDERED	<input type="checkbox"/>

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: [] Commercial Establishment [] Private Residence [] No Physical Birmingham Location

Trade Name (d/b/a):
Attention:
Address:
City: State: Zip:
Area Code and Phone Number of Business Location:
Area Code and Fax Number of Business Location:
Name of Contact Person at Business Location:
E-Mail: Website Address:

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED [] YES [] NO [] NOT APPLICABLE
SIC OR NAICS
BLIC
TERRITORY
ANNEX
HEALTH DEPT PERMIT
OTHER REQUIRED PERMIT
ARTICLES OF INCORPORATION
CERTIFICATE OF AUTHORITY
TAX FORMS ORDERED [] NBL ORDERED []

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: [] Commercial Establishment [] Private Residence [] No Physical Birmingham Location

Trade Name (d/b/a):
Attention:
Address:
City: State: Zip:
Area Code and Phone Number of Business Location:
Area Code and Fax Number of Business Location:
Name of Contact Person at Business Location:
E-Mail: Website Address:

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
OK M1 06/17/22 E.R.
Must be Approved by City Council
HOME OCCUPATION CERTIFICATE EXECUTED [] YES [] NO [] NOT APPLICABLE
SIC OR NAICS
BLIC
TERRITORY
ANNEX
HEALTH DEPT PERMIT
OTHER REQUIRED PERMIT
ARTICLES OF INCORPORATION
CERTIFICATE OF AUTHORITY
TAX FORMS ORDERED [] NBL ORDERED []

KENTUCKY ^{USA}

DRIVER'S LICENSE

4d DLN

[REDACTED]



1 SCHULTE
2 SUSAN M
3 11200 BEECH ROAD
ANCHORAGE, KY 40223



3 DOB

[REDACTED]

4b EXP

01/05/2030

9 CLASS D

9a END NONE

12 RES 1



Susan Schulte

15 SEX F

16 HGT 5'-04"

18 EYES BLU

4a ISS

5 DD

[REDACTED]

REN

[REDACTED]

NAME & TITLE	ADDRESS	LENGTH OF TIME AT CURRENT ADDRESS	SOCIAL SECURITY NUMBER	DATE AND PLACE OF BIRTH
Susan Schulte LLC Manager/Member	11200 Beech Road Louisville, KY 40243	11/2019-Present	[REDACTED]	12/5/1965 Springfield, OH

**TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)**

I, Iron City Live Inc holding City of Birmingham
License ID# [REDACTED] located at 513 22nd St S
(current license holder) (six-digit City ID) (business address)
Birmingham, AL 35233

hereby agree that said License be
transferred to South Concession, LLC
provided South Concession, LLC obtains approval
(applicant) (applicant)
from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of
this licensed establishment and for all taxes due until South Concession, LLC
obtains his/her license from the ABC Board. (applicant)

I also understand that if for any reason this transfer is not
approved by the local governing body or the ABC Board, I must take
over complete control, operation, and responsibility of these licensed
premises. If I do not continue operating this licensed establishment,
then, I will turn in my ABC Board License to the local ABC Board Field
Office and all my City of Birmingham licenses to the Revenue Division
of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred
until all taxes and licenses are paid and current.

LICENSEE T. Steve DeMedici

DATE 6-07-2022

APPLICANT Brooke Harrison

DATE 6-7-22

Witness [Signature]

NOTARY [Signature]

DATE 6-7-22

STATE OF Kentucky)
) ss.:
COUNTY OF Oldham)

POWER OF ATTORNEY AGREEMENT

I, **Susan Schulte**, LLC Manager/Member of 513 South Concession, LLC, hereby appoint **Brooke Garrison**, Manager for 513 South Concession, LLC at the Iron City Bham, to act on my behalf in executing and processing the application paperwork for the City of Birmingham and Alabama Alcoholic Beverages Control Board. This power shall be in full force and effect on the date below written and shall remain in full force and effect until specifically extended or rescinded earlier by either party.

Dated : 5/20/2022.

Susan Schulte
Susan Schulte

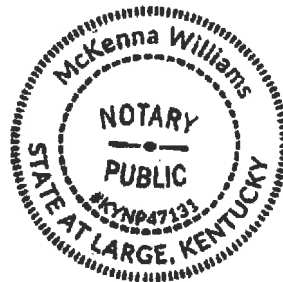
BEFORE ME, the undersigned authority, on this 20th day of May 2022, personally appeared **Susan Schulte** to me well known to be the person described in and who signed the foregoing and acknowledged to me that he executed the same freely and voluntarily for the uses and purposes therein expressed.

WITNESS my hand and official seal the date aforesaid.

McKenna Williams

NOTARY PUBLIC

My Commission Expires: 3/16/26



John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that 513 South Concession, LLC a Kentucky entity, qualified in the State of Alabama on January 25, 2022. The Alabama Entity Identification number for this entity is 000-963562. I further certify that the records do not disclose that said qualification has been revoked, cancelled or terminated.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/20/2022

Date

20220520000039162

John H. Merrill

Secretary of State

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

LAOO
1179826.06
Michael G. Adams
Secretary of State
Received and Filed
12/2/2021 4:14:58 PM
Fee receipt: \$40.00

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

**Articles of Organization
Limited Liability Company**

KLC

For the purposes of forming a limited liability company in Kentucky pursuant to KRS Chapter 275, the undersigned organizer hereby submits the following Articles of Organization to the Office of the Secretary of State for filing:

Article I: The name of the company is

513 South Concession, LLC

Article II: The street address of the company's initial registered office in Kentucky is

2000 High Wickham Pl Ste 300, Louisville, KY 40245

and the name of the initial registered agent at that address is **Here to Serve, LLC**

Article III: The mailing address of the company's initial principal office is

2000 High Wickham Pl Ste 300, Louisville, KY 40245

Article IV: The limited liability company is to be managed by **Managers**

Executed by the Organizer on Thursday, December 2, 2021

Name of Organizer: **Here to Serve, LLC**

Signature of individual signing on behalf of Organizer:
Wally Brown

I, **Here to Serve, LLC**, consent to serve as the Registered Agent on behalf of the limited liability company.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Wally Brown

CONCESSION AGREEMENT
Iron City Bham

THIS CONCESSION AGREEMENT (this "*Agreement*") is executed as of [May 17, 2022] by and between MVBAL Owner, LLC, a Delaware limited liability company ("*Owner*"), and 513 South Concession, LLC, a Kentucky limited liability company ("*Operator*").

RECITALS

A. Owner is the owner of a venue and related improvements located at 513 22nd Street South, Birmingham, AL 35233, currently known as "Iron City Bham" (the "*Venue*"), including all food and beverage facilities associated with the Venue and licensed by the Alabama Alcoholic Beverage Control Board (the "*Licensing Authority*") (the "*F&B Facilities*").

B. Owner desires to engage Operator to manage and operate the F&B Facilities in accordance with the terms and conditions set forth herein.

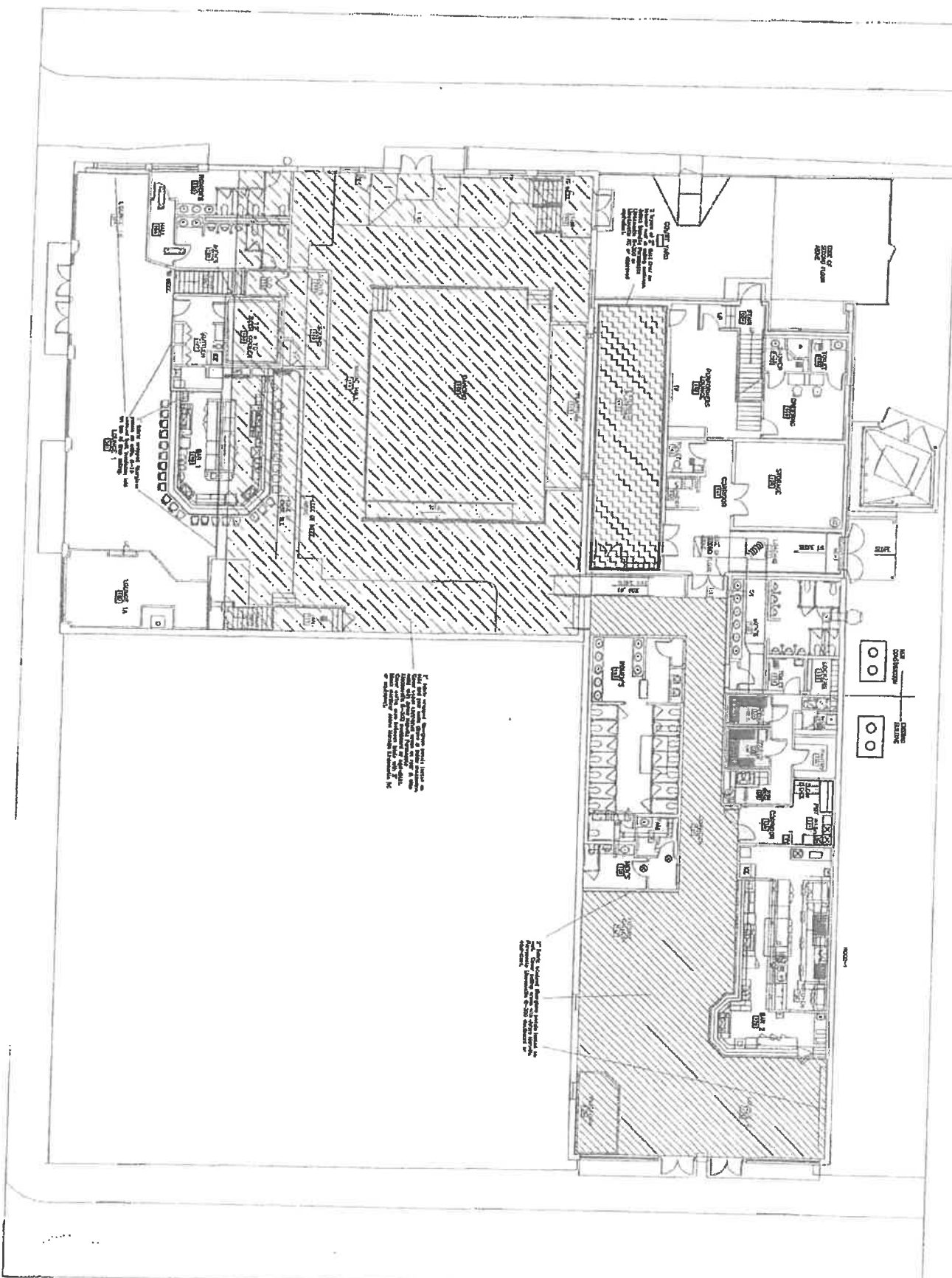
NOW, THEREFORE, for and in consideration of the mutual promises contained herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Owner and Operator agree as follows:

AGREEMENT

1. Engagement of Operator. Owner hereby engages Operator to manage and operate the F&B Facilities and the business to be conducted therein in accordance with the terms set forth herein and the standards set forth by Owner, and Operator hereby accepts such engagement.

2. Operation of the Facilities. The F&B Facilities shall be used for the purpose of serving food and beverages to guests of the F&B Facilities and activities incident thereto in compliance with all applicable laws, ordinances and regulations (the "*F&B Services*"), and for no other purposes without the prior written consent of Owner. Operator shall not allow the F&B Facilities to be used in a manner which would increase insurance premiums (or would be reasonably likely to result in such increase) or for any improper or illegal purpose. Provided that sufficient funds are available to Operator from the net profits from the sale and service of alcoholic beverages at the F&B Facilities, Operator hereby acknowledges and agrees that it shall be responsible for obtaining (as applicable), maintaining and complying with all applicable licenses required to manage the F&B Facilities, including, without limitation, all alcoholic beverage licenses (the "*Liquor Licenses*") required by the Licensing Authority.

3. Conduct of the Business. Provided that sufficient funds are available to Operator from the net profits from the sale and service of alcoholic beverages at the F&B Facilities, Operator shall provide food and beverage services at the F&B Facilities in accordance with all applicable laws, ordinances and regulations, and in a manner that meets the requirements set forth by the Licensing Authority for the operation of the F&B Facilities or otherwise issued by the Licensing

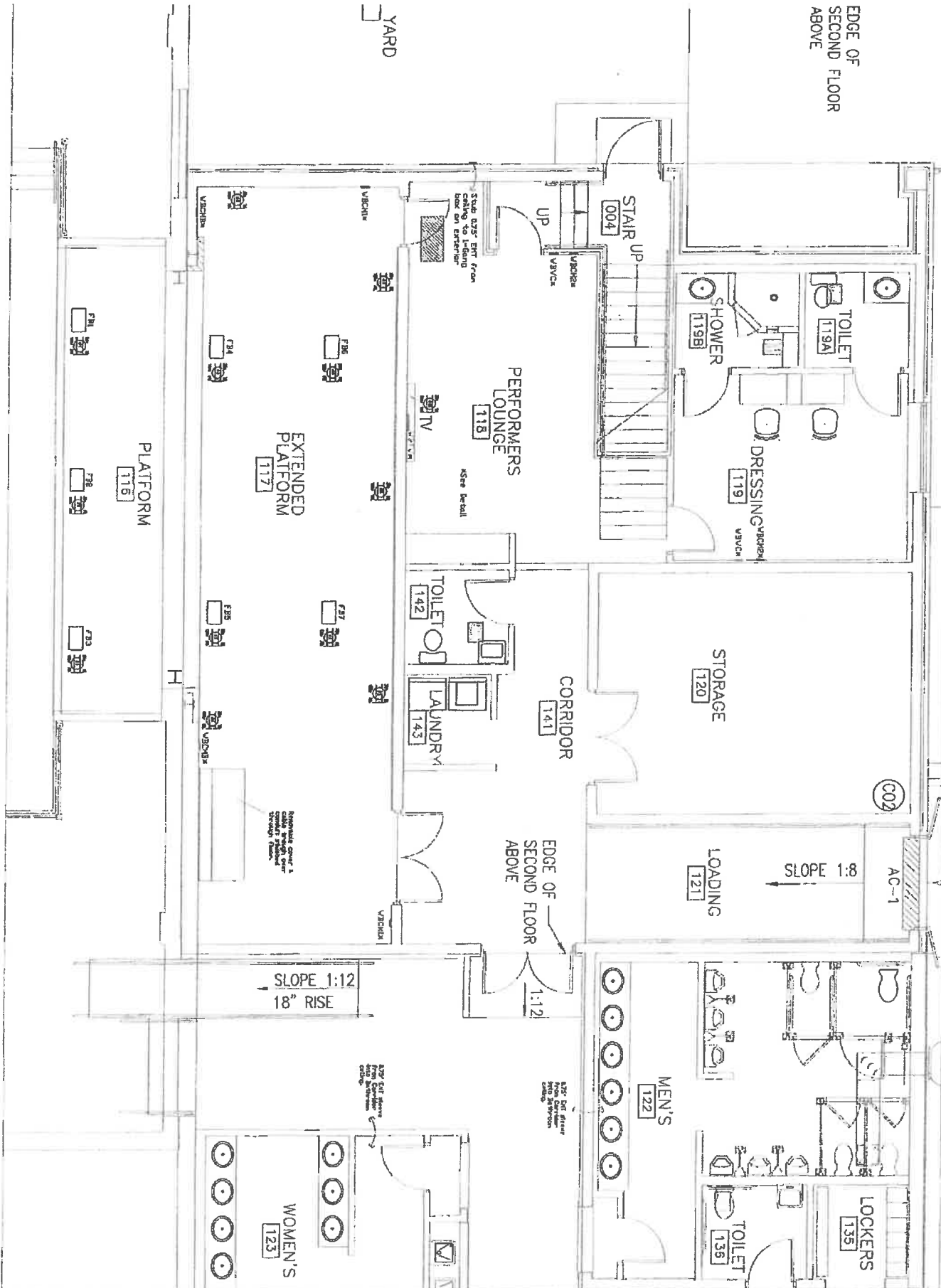


Project Name	Construction	Date	6/12/12	Drawn By	J.S.
Client	City of Birmingham	Project No.		Scale	1:100
Architect	Architectural Resources	Contract No.		Revision	
AV/101					

AV Systems
Iron City Music Hall
Birmingham Alabama



EDGE OF SECOND FLOOR ABOVE



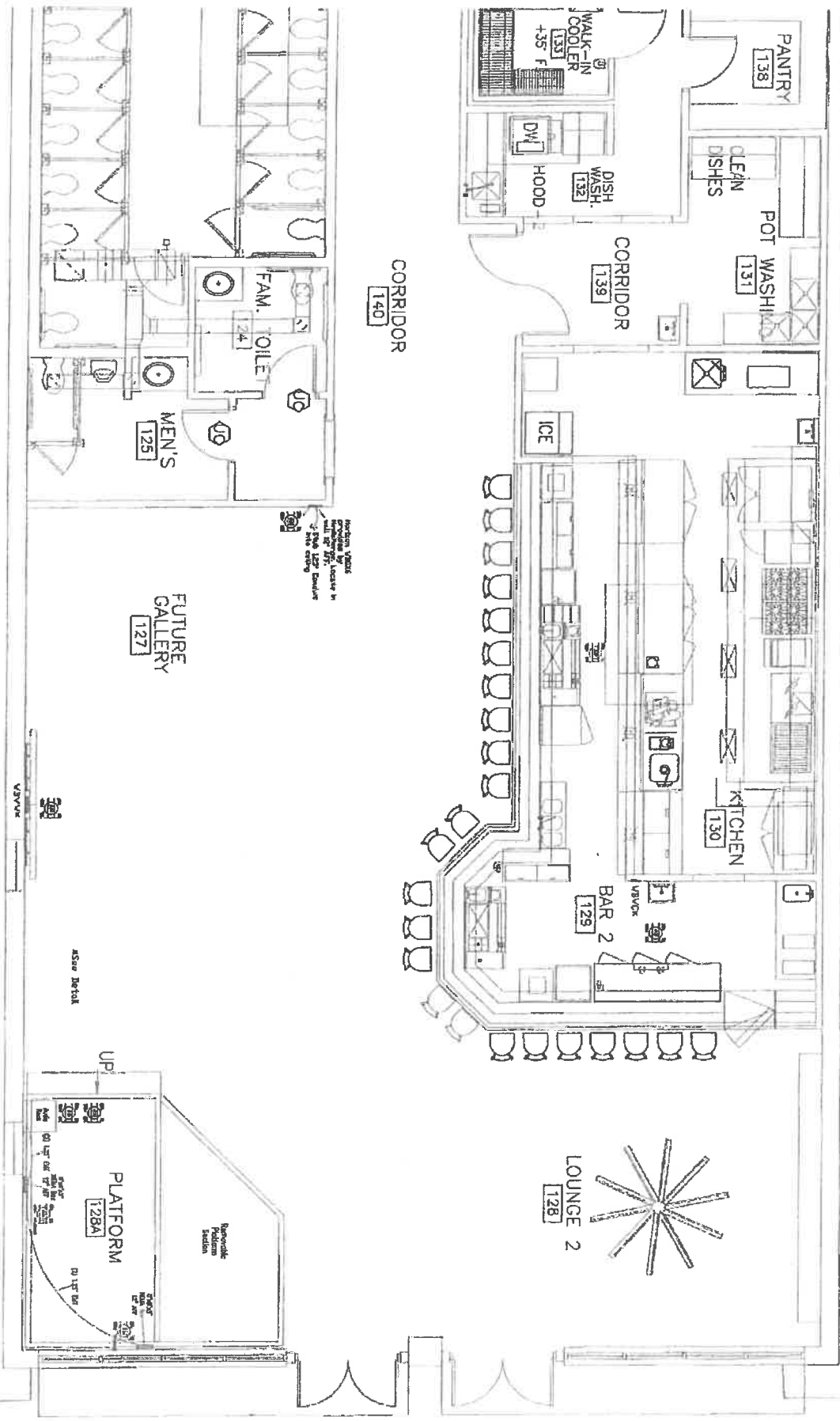
No.	Comments	Date	Drawn

AV Systems
Iron City Music Hall
Birmingham Alabama



AV102

HOOD-1



CORRIDOR [140]

No.	Comments	Disc#	Disc#	Disc#	Disc#	Disc#	Disc#	Disc#	Disc#

AV Systems
Iron City Music Hall
Birmingham Alabama



12286 Old Hwy 280 Bldg 105 Chassee, AL 35963 (205) 778-0580 www.mediawge.com

AV104

JEFFERSON COUNTY, ALABAMA



DEPARTMENT OF REVENUE LIQUOR PERMIT

Date Issued 3/27/2013 Permit Number 2973

PERMIT

To sell alcoholic, spirituous, vinous or fermented liquor at retail in Jefferson County, Alabama, as provided under Act 388, Regular Session 1965, Jefferson County Alcoholic Beverage Tax Act, as amended, is hereby granted to:

Legal Name IRON CITY LIVE INC
Trade Name IRON CITY
Address 513 22ND STREET SOUTH
BIRMINGHAM, ALABAMA

Note: This permit is non-transferable and may be used only by the person or business to whom it is issued.

Travis Hulseley, Director

By Charleston Quinn
Dep't of Revenue Representative



STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
 MONTGOMERY, ALABAMA



2021-2022

LICENSE EXPIRES SEPTEMBER 30, 2022
 RENEW LICENSE(S) BEFORE AUGUST 1, 2022

Confirmation Number: 20210602000012930

Renewal Period: June 1, 2022 Through July 31, 2022

License Number: 010155937

County: JEFFERSON Tobacco Business Type: 44 Vending Machines: 0

Effective Date: 10/01/2021 Printed Date: 06/02/2021

Trade Name: IRON CITY

Licensee: IRON CITY LIVE INC

Location: 513 22ND STREET SOUTH BIRMINGHAM AL 35233

Mailing Address: 513 22ND STREET SOUTH BIRMINGHAM AL 35233

Alabama Sales Tax ID: R008071881

160 SPECIAL RETAIL - MORE THAN 30 DAYS Restrictions on File. 610 RESPONSIBLE VENDOR PROGRAM ONE

These privileges have been issued under the provisions of Title 28, Code of Alabama (1975) effective on the date as shown above and continuing until expiration date set forth above unless sooner surrendered, suspended or revoked by the Board.

These privileges are not assignable and are valid for use only by the licensee named hereon at the location hereon designated. Witness the hand and seal of the ABC Board.

For questions or assistance go to our website www.alabcboard.gov click license and find the division contact number that services the county for this license.

101036



Zm Gi
 ADMINISTRATOR

PARCEL ID: 012200364010004000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Tuesday, June 7, 2022 9:31:41 AM

OWNER: BIRMINGHAM BLUES LLC

ADDRESS: 513 22ND STREET S

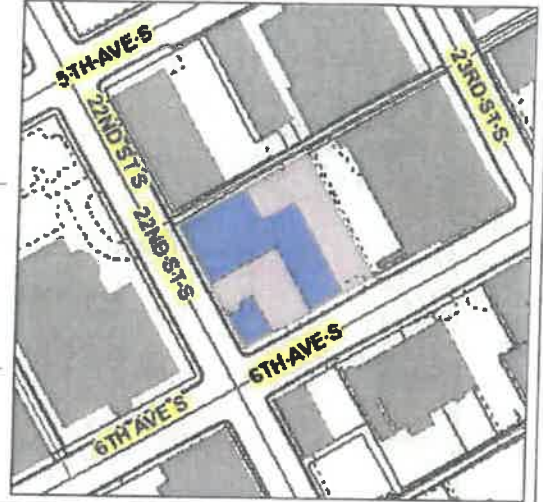
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35233

SITE ADDR: 513 22ND ST S

CITY/STATE: BHAM, AL

ZIP: 35233



LAND: \$1,216,000.00

BLDG: \$1,975,600.00

OTHER: \$0.00

AREA: 37,821.71

ACRES: 0.87

SUBDIVISION INFORMATION:

NAME IRON CITY MUSIC HALL RES

BLOCK: 171

LOT: 13-C

:

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Southside

Historic Building Area: In Historic Building Area

Commercial Revitalization District: Midtown

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Southside (1703)

Communities: Southside (17)

Council Districts: District - 5 (Councilor: Darrell O'Quinn)

Zoning Outline: M1

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

SCANNED AND EMAILED JUNE 9, 2022 TO:
brandon.mccray@birminghamal.gov
latonya.tate@birminghamal.gov
Ablankenship@burr.com
gregory.stanley@birminghamal.gov
john@orchestra-partners.com
danny@ourjoneshome.com

Neighborhood Voting Form: Liquor Applications

Date: 5/9/22

Application Type: Transfer Application for Retail Beer/ Wine (On/Off Premise)

Subject: Applicant's Entity Name MH Birmingham Operator LLC
Business Name Residence Inn By Marriott
Business Address 821 20th St S

Type of License/Permit Applying For:

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input checked="" type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input checked="" type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The FIVE POINTS SOUTH Neighborhood Association met on APRIL 19, 2022 and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

Attendance Oppose Support No Recommendation

THE NEIGHBORHOOD SUPPORTS THIS REQUEST ON A 14-0 VOTE IN FAVOR.

Reason for Opposition _____

Applicant: attended NA meeting
REPRESENTATIVE

did not attend NA meeting

Sheila Chaffin
President/Officer
SHEILA CHAFFIN

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor)

Failure to attend the neighborhood meeting may result in a delay in the liquor process.

Transfer Application – Retail Beer-Type 040/ Wine – Type 060 (On/Off Premise)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: MH Birmingham Operator LLC

Mailing Address: 101 Merritt 7 c/o Melanie Collier
Norwalk, CT 06851

Trade Name: Residence Inn By Marriott

Location Address: 821 20th ST S

Contact Number: (205)458-5250

Contact Person:
Melinda Sellers

New Application

Transfer

Type of License

- Lounge Retail Liquor Class I
- Club Liquor Class I (Fraternal)
- Beer Off Premise
- Wine Off Premise
- Restaurant Retail Liquor
- Special Retail Liquor (over 30 days)

- Lounge Retail Liquor Class II (Package Store)
- Club Liquor Class II (Private)
- Beer On & Off Premise
- Wine On & Off Premise
- Special Retail Liquor (7 days or less)
- Special Retail Liquor (under 30 days)

Division I Dance Permit (customer)

Division II Dance Permit (entertainers)

Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs 30TBS/50CHS

Date Applied: 4/21/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RETAIL BEER-TYPE 040/WINE-TYPE 060/ON OFF PRE By: **GS**

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) MH Birmingham Operator LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
CTDL# [REDACTED] Clarke Wayne Hanrattie	Member	[REDACTED] Pennsylvania	36 Chichester Rd New Canaan, CT 06840	12 years
CTDL# [REDACTED] Gary M Mendell	Member	[REDACTED] Connecticut	58 Laurel DR Easton, CT 06612	4 years
CTDL# [REDACTED] Anthony Rejean Rutledge	Member	[REDACTED] New York	530 Main ST N Southbury, CT 06488	13 years
CTDL# [REDACTED] Theodore William Darnall	Member	[REDACTED] Arizona	637 Valley RD New Canaan, CT 06840	6 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 6678656 Page: 1 of 2 Date: 3/16/2022 County: _____
Foreign Corporation: certificate of Authority Date: 3/16/2022 (get copy of original papers)

3. Trade Name Residence Inn By Marriott
- 4(a) Location 821 20th ST S
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35205 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **101 Merritt 7, Norwalk CT 06851 c/o Melanie Collier**
- (d) Business Phone _____ Fax: _____ Other Contact: **(205)458-5250**
5. Name, trade name and License number of last or previous licensee: **Crescent Hotels & Resorts LLC**
Trade name Residence Inn By Marrio Year 2014 Type 150L 150M Taxpayer ID 465680
- 6 (a) Owner of real estate for which license is desired GPIF RINN Birmingham Owner LLC
Address _____
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Multi-Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **30TBS/50CHS**
7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____
- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

- (c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?
- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Breakfast Items & Snack
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No

- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicants</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 21st day of April, 2022

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Officer

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
Retail Beer - Type 04/Wine-Type 060 (On/Off)
Transfer

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:
(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: MH Birmingham Operator LLC
Attention: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Area Code and Phone Number: (205)458-5250
Area Code and Fax Number: _____
Name of Contact Person: Abby Blankenship
E-Mail: ablankenship@burr.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Residence Inn By Marriott
Attention: _____
Address: 821 20th ST S
City: Birmingham State: AL Zip: 35205
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business.
If applicable, this section MUST be completed.

Former Owner: Crescent Hotels & Resorts LLC
Trade Name (d/b/a) Residence Inn By Marriott
Mailing Address of Former Owner 821 20th St S
Address (es) of Former Location(s) 821 20th St S
Area Code and Phone Number of Former Owner: (205)731-9595

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 5 - TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)
8. Foreign Corporation (Incorporated in another state)

Section 6 - TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
2. Contractor (Please Specify)
3. Wholesaler
4. Retailer
5. Other (Please Specify) Hotel
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
10. Transient Vendors/Special Events: Date(s) of the Event, Event Location

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Hotel Product: Rooms/Alcohol/Food

Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number Number of Employees in Birmingham (Required)

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month Day Year
Enter Date City of Birmingham Taxpayer ID Applied For: Month Day Year


Section 10 - Tax Liabilities Check the taxes for which you are liable.

- Sales Tax
Sellers Use Tax
Consumers Use Tax
Lease Tax
Occupational Tax- Employers
Lodgings Tax
Business License Tax
TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
State of Alabama Sales Tax Number
State of Alabama Sellers Use Tax Number
State of Alabama Consumers Use Tax Number
State of Alabama Lease Tax Number
State of Alabama Lodgings Tax Number
State of Alabama Unemployment Tax Number

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Hanrattie, Clarke	Member	
Mendell, Gary	Member	
Rutledge, Anthony	Member	
Darnell, Theodore	Member	

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State: _____ Zip Code: _____
 Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

Signature of Person Completing This Application _____ Date _____

Print the Name of the Person Completing This Application _____ Phone Number of Person Completing Application _____

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
 OK B3 05/19/22 ER

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
 BLIC _____
 TERRITORY _____
 ANNEX _____
 HEALTH DEPT PERMIT _____
 OTHER REQUIRED PERMIT _____
 ARTICLES OF INCORPORATION _____
 CERTIFICATE OF AUTHORITY _____
 TAX FORMS ORDERED NBL ORDERED

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM ALABAMA)

Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Harrattle, Clarke	Member	
Mendell, Gary	Member	
Rutledge, Anthony	Member	
Darnall, Theodore	Member	

Section 12 CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State: _____ Zip Code: _____
 Area Code and Phone Number of Residence: _____

Section 13 STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

4/25/22

Signature of Person Completing This Application

Date

Anthony Rutledge

203 849 2227

Print the Name of the Person Completing This Application

Phone Number of Person Completing Application

CITY OFFICE USE ONLY

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXCLUDED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
 BLIC _____
 TERRITORY _____
 ANNEX _____
 HEALTH DEPT PERMIT _____
 OTHER REQUIRED PERMIT _____
 ARTICLES OF INCORPORATION _____
 CERTIFICATE OF AUTHORITY _____
 TAX FORMS ORDERED NBI ORDERED

Can you give me the mailing address for MH Birmingham Operator LLC? 101 Merritt 7, Norwalk CT 06851 c/o Melanie Collier

Also is there a kitchen on premise yes

Does the hotel serve food yes

How many tables and chairs approx.. 30 tables and 50 chairs

Are there any type of vending machines on premise not that I am aware of. I will confoirm.

Connecticut

DRIVER LICENSE

DL



40 LIC # [REDACTED] CLASS D
 3 DOB 2/12/1971 12 RESY B
 40 EXP [REDACTED]
 46 SS [REDACTED] SEX M
 10 HGT 5-00 L EYES HAZ



5 DO [REDACTED]
 1 HANRATTIE
 2 CLARK WAYNE
 3 36 CHESTER RD
 4 NEW CANAAN, CT 06840-3911

Wells

*Of the United States,
in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves and
our Posterity, do ordain and establish this
Constitution for the United States of America.*



[Handwritten Signature]
SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT
PASAPORTE



UNITED STATES OF AMERICA

Type / Type / Tipo Code / Code / Código Passport No. / No. du Passeport / No. de Pasaport

P USA [REDACTED]

Surname / Nom / Apellidos

HANRATTIE

Given Names / Prénoms / Nombres

CLARK WAYNE

Nationality / Nationalité / Nacionalidad

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

12 Feb 1970

Place of birth / Lieu de naissance / Lugar de nacimiento

PENNSYLVANIA, U.S.A.

Sex / Sexe / Sexo

M

Date of issue / Date de délivrance / Fecha de expedición

Authority / Autorité / Autoridad

**United States
Department of State**

[REDACTED]
Date of expiration / Date d'expiration / Fecha de caducidad

[REDACTED]
Endorsements / Mentions Spéciales / Anotaciones

SEE PAGE 27



PHNCAHNDATTTELECFIARKWAYNECCCCCCCC

Helen Powell



Class D

D1

Gary Mendel

USA

DRIVER LICENSE

NOT FOR FEDERAL IDENTIFICATION

9 Class: **D** 12 Restr: **B**

9a Endors: **NONE**

4d Lic #: [REDACTED]

15 Sex: **M**

3 DOB: [REDACTED]

16 Ht: **72 in**

4b Expires: [REDACTED]

18 Eyes: **BRO**

1 **MENDEL**

Helen Powell

2 **GARY M**

858 LAUREL DR
EASTON CT 06612

4a Issued: [REDACTED]



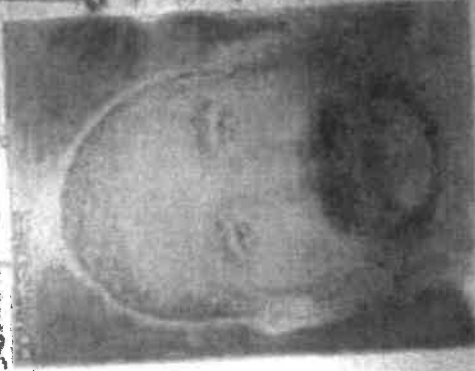
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Connecticut

John P. Maguire

CDL

USA
COMMERCIAL DRIVER LICENSE



9 CI SS A
10 END M
11 REST B

4 LIC #

3 DOB

2 EXP

4b ISS

16 HGT

5 DO

15 SEX M

16 EYES BRO

1 RUTLEDGE
2 ANTHONY REJEAN
3 530 MAIN ST N
6 SOUTHBURY, CT 06488-3629

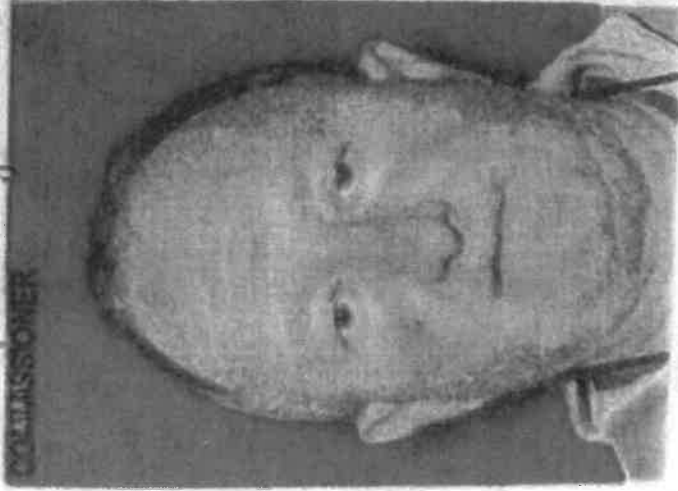
CR



Connecticut

de bonis magister

COMMISSIONER



WJ

USA

DRIVER LICENSE



1 LIC #

3 DOB

4 EXP

4 ISS

16 HGT

5 DD

~~17028870~~

~~11/07/1957~~

~~11/07/2025~~

~~09/23/2019~~

15 SEX

18 EYES

~~NO RECORD~~

9 CLASS

9# END

12 REST

CLASS **D**

END **NONE**

REST **NONE**



1 **DARNALL**
2 **THEODORE WILLIAM**
8 **637 VALLEY RD**
NEW CANAAN, CT 06840-3333

Residence Inn

Clark Hanrahe: [REDACTED]

Gary Mendell. [REDACTED]

Anthony Rutledge: [REDACTED]

Theodore Darnall - [REDACTED]

LIMITED POWER OF ATTORNEY

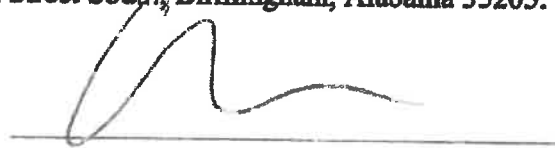
THIS LIMITED POWER OF ATTORNEY is dated this 4th day of April, 2022, by Anthony Rutledge, ("Officer") currently the Vice President of MH BIRMINGHAM OPERATOR LLC ("MH Birmingham") to be effective as of 12:00 p.m. on the date hereof.

WITNESSETH:

WHEREAS, Officer is an authorized representative of MH Birmingham; and

WHEREAS, Officer desires Melinda Sellers, as attorney for MH Birmingham, to file the license applications related to alcohol permitting for the hotel located at 821 20th Street South, Birmingham, Alabama 35205 and appear on behalf of MH Birmingham at all required hearings and meetings related to the consideration of issuing a license to sell beer and wine including, but not limited to, meeting with all of the City of Birmingham departments and governmental agencies, the applicable Neighborhood Meeting, Public Safety Meeting, City Council Meeting, and any meeting required by the Alabama Beverage Control Board;

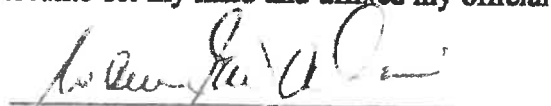
NOW, THEREFORE, Officer hereby appoints and authorizes Melinda Sellers, as attorney-in-fact for MH Birmingham solely for the purpose of representing MH Birmingham at meeting with all of the City of Birmingham departments, any applicable Neighborhood Meeting, Public Safety Meeting, City Council Meeting, and any meeting required by the Alabama Beverage Control Board and to discuss, answer and review any information relating to the permit applications related to alcohol licensing at 821 20th Street South, Birmingham, Alabama 35205.



STATE OF Connecticut
COUNTY OF Fairfield

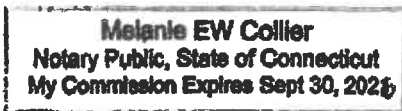
On this 4th day of April, 2022 before me personally appeared Anthony Rutledge, the Officer of MH BIRMINGHAM OPERATOR LLC, who executed the foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said entity for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year first above written.



Notary Public

My Commission Expires: 9/30/2026
Notary Seal:



STATE OF VIRGINIA

COUNTY OF FAIRFAX

SPECIAL LIMITED POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS:

That I, **Caroline George, General Counsel of Crescent Hotels and Resorts LLC**, a Delaware limited liability company ("Licensee"), do hereby appoint **KELLY THRASHER FOX**, of Shelby County, Alabama, as the true and lawful attorney-in-fact, to act on behalf of Licensee to do the following limited actions as Attorney in Fact:

To attend hearings and execute and deliver any and all such documents on behalf of Licensee that may be required or appropriate in connection with the State of Alabama Alcoholic Beverage Control Board ("ABC") and/or the City of Birmingham, Alabama, regarding the ABC License related to the property located at 821 20th Street South, Birmingham, Alabama 35203.

I hereby ratify and confirm and promise at all times to ratify and confirm all and whatsoever my said Attorney-in-Fact shall do or cause to be done in and about the premises by virtue of these presents, including anything which shall be done between the date of revocation of these presents and the expiration date as stated herein, and notice of such revocation reaching my said Attorney-in-Fact; and I hereby declare that as against me and all persons claiming under me everything which my said Attorney-in-Fact shall do or cause to be done in pursuance hereof after such revocation as aforesaid shall be valid and effectual in favor of any person claiming the benefit thereof who, before the doing thereof, shall not have had notice of such revocation.

This Limited Power of Attorney is a limited power of attorney for the period from the date shown below until June 30, 2022, and the authority conferred hereby shall be and remain exercisable during said term from the date hereof notwithstanding any disability, incompetency or incapacity of the undersigned.

[Signature appears on the following page]

WITNESS, my hand and seal, this the 14th day of April, 2022.

CRESCENT HOTELS AND RESORTS LLC

By: *Caroline George*
Caroline George, General Counsel

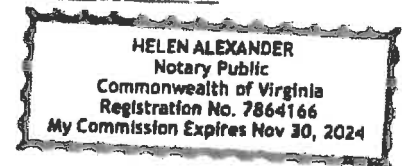
STATE OF VIRGINIA

COUNTY OF FAIRFAX

I, the undersigned, a Notary Public in and for said County, in said State, do hereby certify that **Caroline George**, whose name as **General Counsel** of Crescent Hotels and Resorts LLC, a Delaware limited liability company, is signed to the foregoing Special Limited Power of Attorney and who is known to me, acknowledged before me on this day, that, after being informed of the contents of said instrument, s/he, as such officer and with full authority, executed the same voluntarily for and as the act of said limited liability company on the day the same bears date.

Given under my hand and official seal on this 14th day of April, 2022.

Helen Alexander
NOTARY PUBLIC
My Commission Expires: _____





DRIVER LICENSE



ALABAMA



NO. ~~123456789~~ CLASS D
 KELLY THASHER
 1500 HIGHWAY 44 S
 SHELBY AL 35143-5575
 ENDORSEMENTS NONE
 SEX F HT 5-07 WT 120 HA BRN EYES BRN
 MARRIED

Alabama Department of Transportation
 1000 North University Blvd., Montgomery, AL 36102
 (404) 455-4545
 www.alabama.gov

STATE OF VIRGINIA

COUNTY OF FAIRFAX

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[Signature appears on the following page]

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CRESCENT HOTELS AND RESORTS LLC

By: *Caroline George*
Caroline George, General Counsel

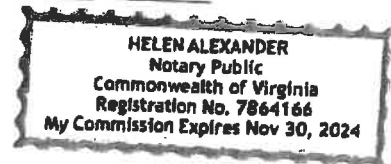
STATE OF VIRGINIA

COUNTY OF FAIRFAX

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Given under my hand and official seal on this 14th day of April, 2022.

Helen Alexander
NOTARY PUBLIC
My Commission Expires: _____



Date of this notice: 03-18-2022

Employer Identification Number:
88-1291930

Form: SS-4

Number of this notice: CP 575 G

MH BIRMINGHAM OPERATOR LLC
RESIDENCE INN BIRMINGHAM
% ANTHONY RUTLEDGE SOLE MBR
101 MERRITT 7
NORWALK, CT 06851

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 88-1291930. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is MHBI. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Keep this part for your records.

CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

9999999999

Your Telephone Number Best Time to Call
() -

DATE OF THIS NOTICE: 03-18-2022
EMPLOYER IDENTIFICATION NUMBER: 88-1291930
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023
[Barcode]

MH BIRMINGHAM OPERATOR LLC
RESIDENCE INN BIRMINGHAM
% ANTHONY RUTLEDGE SOLE MBR
101 MERRITT 7
NORWALK, CT 06851

TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)

I, Crescent Hotels & Resorts LLC, holding City of Birmingham

License ID# [REDACTED], located at 821 20th St S

Birmingham, AL 35205, hereby agree that said License be

transferred to MH Birmingham Operator LLC

provided MH Birmingham Operator LLC obtains approval

from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of

this licensed establishment and for all taxes due until MH Birmingham Operator LLC

obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not approved by the local governing body or the ABC Board, I must take over complete control, operation, and responsibility of these licensed premises. If I do not continue operating this licensed establishment, then, I will turn in my ABC Board License to the local ABC Board Field Office and all my City of Birmingham licenses to the Revenue Division of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred until all taxes and licenses are paid and current.

LICENSEE Kelly Fox Under Power of Attorney for Crescent Hotels & Resorts LLC

DATE 4/18/2022

APPLICANT Melinda E. Sellers (via POA)

DATE 4/18/2022

Witness [Signature]

DATE 4/18/2022

NOTARY [Signature]

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "MH BIRMINGHAM OPERATOR LLC", FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF MARCH, A.D. 2022, AT 1:34 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

6678656 8100
SR# 20221027440

Authentication: 202944487
Date: 03-17-22

**STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY**

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is MH Birmingham Operator LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 251 Little Falls Drive (street), in the City of Wilmington, Zip Code 19808. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is Corporation Service Company

By: 

Authorized Person

Name: Anthony Rutledge

Print or Type

OPERATING AGREEMENT

THIS OPERATING AGREEMENT (this "Agreement") is made as of March 17, 2022 by MERRITT HOSPITALITY LLC (the "Member").

RECITALS

WHEREAS, MH BIRMINGHAM OPERATOR LLC (the "LLC") has been formed as a limited liability company under the Delaware Limited Liability Company Act (6 *Del. C.* §18-101, *et seq.*), as amended (the "Act"), by the filing on March 16, 2022 of a Certificate of Formation in the office of the Secretary of State of the State of Delaware; and

WHEREAS, the Member wishes to set out fully its rights, obligations and duties regarding the LLC and its assets and liabilities.

NOW, THEREFORE, in consideration of the covenants expressed herein, the Member hereby agrees as follows:

Section 1 Purpose; Powers.

The principal business activity and purpose of the LLC shall be to engage in any lawful act or activity for which limited liability companies may be formed under the Act. The LLC shall possess and may exercise all the powers and privileges granted by the Act, any other law or this Agreement, together with any powers incidental thereto, and may take any other action not prohibited under the Act or other applicable law, so far as such powers and actions are necessary or convenient to the conduct, promotion or attainment of the business, purposes or activities of the LLC.

Section 2 Capital Contributions.

The Member shall contribute to the capital of the LLC in such amounts and at such times as the Member may deem appropriate in its sole discretion.

Section 3 Distributions.

Distributions (including distributions in liquidation) shall be made to the Member. Except as otherwise required by the Internal Revenue Code of 1986, as amended (the "Code"), all items of income, gain, loss, deduction and credit as determined for book and federal income tax purposes shall be allocated to the Member.

Section 4 Management.

(a) The business, policies, property and affairs of the LLC shall be managed exclusively by the Manager. The initial Manager shall be Merritt Hospitality, LLC. The Manager shall have full, complete and exclusive authority and discretion to control the business, policies, property and affairs of the LLC, to make all decisions regarding those matters and to perform any and all other acts or activities customary or incident to the management of the LLC's business, property and affairs, including the naming of officers of the LLC pursuant to Section 4(b) below, the delegation of responsibility for the preceding to such officers and the

MANAGEMENT AGREEMENT

This Management Agreement (the “Agreement”) is made and entered into as of this 6th day of April, 2022 (the “Effective Date”) by and between GPIF RINN BIRMINGHAM OWNER LLC, a Delaware limited liability company (“Owner”), and MH BIRMINGHAM OPERATOR, LLC, a Delaware limited liability company (“Operator”).

RECITALS:

A. Owner is the fee owner of the Premises, having a street address of 821 20th Street S., Birmingham AL 35205, which, together with associated improvements, parking areas and personal property, is presently known as The Residence Inn by Marriott – Birmingham Downtown at UAB and is defined herein as the “Hotel”.

B. Operator is engaged in the business of managing and operating hotels.

C. Owner and Operator desire to enter into this Agreement for the management and operation of the Hotel in accordance with the terms and conditions and subject to the limitations contained in this Agreement.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained in this Agreement and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Owner and Operator covenant and agree as follows:

ARTICLE 1. DEFINITIONS

1.1. **Definitions.** In this Agreement and any Exhibits, the following terms shall have the following meanings:

“Accounting Period” shall mean each calendar month (or portion thereof) during each Fiscal Year.

“Adjusted GOP” shall mean, for any Fiscal Year, Gross Operating Profit less the sum of: (i) Management Fees (excluding the Incentive Fee), (ii) Taxes, (iii) Insurance Costs, (iv) Reserve contributions, and (v) Owner’s Priority Return.

“ADR Provider” shall have the meaning set forth in Section 27.2(b).

“Affiliate” shall mean any person or entity that directly or indirectly, through one or more intermediaries, controls, is controlled by or is under common control with another person or entity. The term “control” (and correlative terms) shall mean the power, whether by contract, equity ownership or otherwise, to direct the policies or management of a person or entity. A natural person is related to another natural person if he or she is a spouse, parent, or lineal descendant of the other person.



STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
 MONTGOMERY, ALABAMA



2021-2022

LICENSE EXPIRES SEPTEMBER 30, 2022
 RENEW LICENSE(S) BEFORE AUGUST 1, 2022

Confirmation Number: 20210611000009134

Renewal Period: June 1, 2022 Through July 31, 2022

License Number: 001771937

County: JEFFERSON Tobacco Business Type: 52 Vending Machines: 0

Effective Date: 10/01/2021 Printed Date: 06/11/2021

Trade Name: CRESCENT HOTELS AND RESORTS

Licensee: CRESCENT HOTELS AND RESORTS LLC

Location: 821 20TH ST S
 BIRMINGHAM AL 35205

Mailing Address: 10306 EATON PLACE SUITE 430
 FAIRFAX VA 22030

Alabama Sales Tax ID: R007906056

040 RETAIL BEER (ON OR OFF PREMISES)

060 RETAIL TABLE WINE (ON OR OFF PREMISES)

990 TOBACCO AND ALTERNATIVE NICOTINE PRODUCTS
 Product type: 3

These privileges have been issued under the provisions of Title 28, Code of Alabama (1975) effective on the date as shown above and continuing until expiration date set forth above unless sooner surrendered, suspended or revoked by the Board.

These privileges are not assignable and are valid for use only by the licensee named hereon at the location hereon designated. Witness the hand and seal of the ABC Board.

For questions or assistance go to our website www.alabcboard.gov click license and find the division contact number that services the county for this license.

21008



Zm Shi
 ADMINISTRATOR

PARCEL ID: 012900011006009000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Monday, April 18, 2022 9:50:36 AM

OWNER: CM1 BIRMINGHAM LLC

ADDRESS: PO BOX 56607

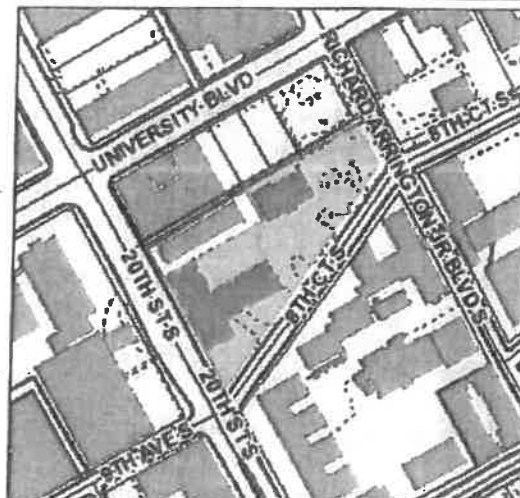
CITY/STATE: ATLANTA GA

ZIP+4: 30343

SITE ADDR: 2012 8TH CT S

CITY/STATE: BHAM, AL

ZIP: 35205



LAND: \$2,400,200.00

BLDG: \$12,676,600.00

OTHER: \$0.00

AREA: 65,196.84

ACRES: 1.50

SUBDIVISION INFORMATION:

NAME BHAM HOSPITALITY RES 29-1

BLOCK: 761

LOT: 1-A

:

Section: 1-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Midtown

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Five Pts So (1701)

Communities: Southside (17)

Council Districts: District - 6 (Councilor: Crystal Smitherman)

Zoning Outline: B3

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

Neighborhood Voting Form: Liquor Applications

Date: 4/27/22

Application Type: New Application for Restaurant Liquor License

Subject: Applicant's Entity Name The Spun Cow, LLC

Business Name The Spun Cow

Business Address 1821 2nd Ave N, Ste 134

Type of License/Permit Applying For:

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Fountain Heights Neighborhood Association met on 05/23/22 and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

7 Attendance 0 Oppose 7 Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting call meeting did not attend NA meeting

Bondera Lynn
President/Officer

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor)

Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Restaurant Retail Liquor – Type 020

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: The Spun Cow, LLC
Mailing Address: 2900 7th Ave S, Apt 420
Birmingham, AL 35233
Trade Name: The Spun Cow
Location Address: 1821 2nd Ave N, Ste 134
Contact Number: (901)486-6515 Contact Person: Javier Grijava

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 20TBS/80CHS

Date Applied: 4/27/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RESTAURANT RETAIL LIQUOR-TYPE 020

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) The Spun Cow, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
MSDL # [REDACTED] Javier Grijava JR	Member	[REDACTED] Seminole, TX	2900 7 th Ave S, Apt 420 Birmingham, AL 35233	4 months

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 001-000 Page: 1 of 3 Date: 02/03/2022 County: Jefferson
956

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name The Spun Cow
- 4(a) Location 1821 2nd Ave N, Ste 134
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35203 County Jefferson Shelby
- (b) Length of time at this location
- (c) Mailing Address: 2900 7th Ave S, Apt 420 Birmingham, AL 35233
- (d) Business Phone _____ Fax: _____ Other Contact: (901)486-6515
5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____
- 6 (a) Owner of real estate for which license is desired Pizitz Realty CO
2222 Arlington Ave S Birmingham, AL 35205
Address
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Multi-Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 20TBS/80CHS
7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____
- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?
- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<i>No - Applicant</i>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 27th day of April, 2022

 Signature of Affiant

 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

For Zoning Purposes Only:
Restaurant Retail Liquor

TAXPAYER IDENTIFICATION NUMBER
[REDACTED]

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 -- WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 -- LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:
(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: The Spun Cow, LLC
Attention: _____
Address: 2900 7th Ave S, Apt 420
City: Birmingham State: AL Zip Code: 35233
Area Code and Phone Number: (901)486-6515
Area Code and Fax Number: _____
Name of Contact Person: Javier Grijava
E-Mail: info@thespuncow.com Website Address: _____

Section 3 -- TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): The Spun Cow
Attention: _____
Address: 1821 2nd Ave N, Ste 134
City: Birmingham State: AL Zip: 35203
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 -- CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 5 -- TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)
8. Foreign Corporation (Incorporated in another state)

Section 6 -- TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
2. Contractor (Please Specify)
3. Wholesaler
4. Retailer
5. Other (Please Specify)
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
10. Transient Vendors/Special Events: Date(s) of the Event, Event Location

Section 7 -- PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Ice Cream Shop Product: Alcohol/Ice Cream

Section 8 -- FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number 88-0530600 Number of Employees in Birmingham (Required) 4

Section 9 -- COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month Day Year
Enter Date City of Birmingham Taxpayer ID Applied For: Month Day Year

Section 10 -- Tax Liabilities Check the taxes for which you are liable.

- Sales Tax
Sellers Use Tax
Consumers Use Tax
Lease Tax
Occupational Tax- Employers
Lodgings Tax
Business License Tax
TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
State of Alabama Sales Tax Number
State of Alabama Sellers Use Tax Number
State of Alabama Consumers Use Tax Number
State of Alabama Lease Tax Number
State of Alabama Lodgings Tax Number
State of Alabama Unemployment Tax Number

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Grijava, Javier	Member	[REDACTED]

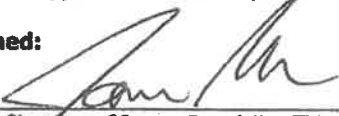
Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State _____ Zip Code _____
 Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:



Signature of Person Completing This Application

4/27/22

Date

Javier Grijava

Print the Name of the Person Completing This Application

901-486-6515

Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS: OK BY 04/27/22 E.R.
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED <input type="checkbox"/> NBL ORDERED <input type="checkbox"/>

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED
YES NO NOT APPLICABLE

SIC OR NAICS
BLIC
TERRITORY
ANNEX
HEALTH DEPT PERMIT
OTHER REQUIRED PERMIT
ARTICLES OF INCORPORATION
CERTIFICATE OF AUTHORITY
TAX FORMS ORDERED NBL ORDERED

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. (Important Note: All business locations are subject to zoning approval.)

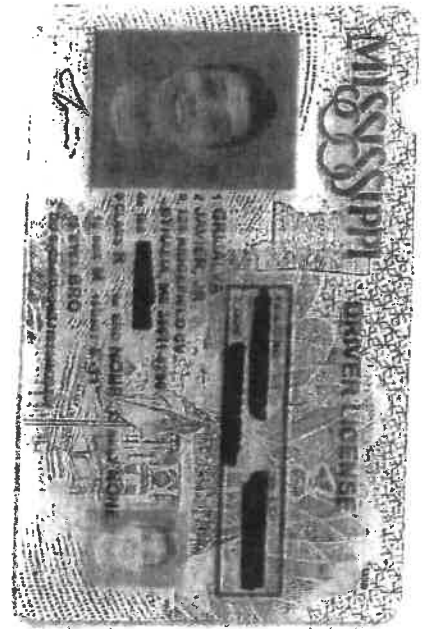
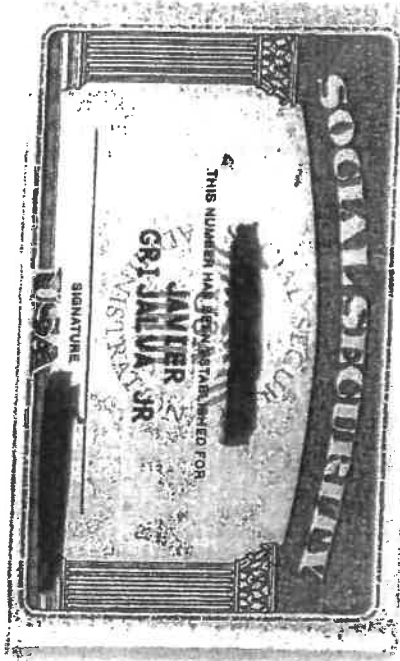
Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED
YES NO NOT APPLICABLE

SIC OR NAICS
BLIC
TERRITORY
ANNEX
HEALTH DEPT PERMIT
OTHER REQUIRED PERMIT
ARTICLES OF INCORPORATION
CERTIFICATE OF AUTHORITY
TAX FORMS ORDERED NBL ORDERED



STATE OF ALABAMA

**DOMESTIC LIMITED LIABILITY COMPANY (LLC)
CERTIFICATE OF FORMATION**

PURPOSE: In order to form a Limited Liability Company (LLC) under Section 10A-5A-2.01 of the Code of Alabama 1975, this Certificate of Formation and the appropriate filing fees must be filed with the Office of the Secretary of State. The information required in this form is required by Title 10A.

1. The name of the limited liability company (must contain the words "Limited Liability Company" or the abbreviation "L.L.C." or "LLC," and comply with Code of Alabama, Section 10A-1-5.06. You may use Professional or Series before Limited Liability Company or LLC (or PLLC or SLLC) if they apply:

The Spun Cow, LLC.

2. A copy of the Name Reservation Certificate from the Office of the Secretary of State must be attached.

3. The name of the registered agent (only one agent): Javier Grijalva

Street (no PO Boxes) address of registered office (must be located in Alabama): _____

2900 7th Ave. S. Apt 420 Birmingham, AL 35233

*COUNTY of above address: JEFFERSON

Mailing address in Alabama of registered office (if different from street address): _____

4. The undersigned certify that there is at least one member of the limited liability company.

(For SOS Office Use Only)

Alabama	
Sec. Of State	
001-000-956	DLL
Date	02/03/2022
Time	14:43:00
File	\$100.00
County	\$100.00

Total	\$200.00

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

5. Check **only** if the type applies to the Limited Liability Company being formed:

Series LLC complying with Title 10A, Chapter 5A, Article 11

Professional LLC complying with Title 10A, Chapter 5A, Article 8

Non-Profit LLC complying with Section 10A-5A-1.04(c)

6. The filing of the limited liability company is effective immediately on the date received by the office of the Secretary of State, Business Services Division or at the delayed filing date (cannot be prior to the filing date) specified in this filing complying with Section 10A-1-4.12

The undersigned specify 2 / 3 / 2022 as the effective date (must be on or after the date filed in the office of the Secretary of State, but no later than the 90th day after the date this instrument was signed) and the time of filing to be 2 : 43 AM or PM. (cannot be noon or midnight – 12:00)

Attached are any other matters the members determine to include herein (if this item is checked there must be attachments with the filing).

2 / 3 / 2022
Date (MM/DD/YYYY)

Javier Grijalva

Signature as required by 10A-5A-2.04

Owner

Typed title (organizer or attorney-in-fact)

*County of Registered Agent is requested in order to determine distribution of County filing fees.

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

The Spun Cow, LLC.

This name reservation is for the exclusive use of Javier Grijalva, 425 Moncrief Ave, Goodlettsville, TN 37072 for a period of one year beginning February 03, 2022 and expiring February 03, 2023

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.



RES001021

February 03, 2022

Date

J. H. Merrill

John H. Merrill

Secretary of State



JOHN BROOKS
DIRECT DIAL: (205) 795-5531
E-MAIL: JBROOKS@BAYERPROPERTIES.COM

3/1/22

VIA FEDERAL EXPRESS

The Spun Cow
425 Moncrief Ave
Goodlettsville, TN 37072

RE: Lease Agreement by and between Pizitz Commercial Tenant, LLC ("Landlord") and The Spun Cow, LLC ("Tenant") dated 2/28/22 (the "Lease") – The Summit – Birmingham, AL, possession of space 18 (the "Premises")

Dear Tenant,

With respect to the above-referenced Lease, please allow this letter to serve as notification that the turnover date of the Premises for purposes of commencing Tenant's construction period under the Lease is 3/1/22

The physical address of the leased property is:

1821 2nd Avenue North
Suite 134
Birmingham, AL 35203

Please note that Tenant will not be provided with keys to the Premises and may not commence construction of Tenant's improvements in the Premises until each of the following requirements is met:

- Plans and specifications for Tenant's proposed improvements must be approved in writing. Please submit Tenant's plans to Landlord no later than 3/15/22.
- Tenant delivers to Landlord Tenant's general contractor's certificate of insurance, evidencing the types and limits of coverage required by the Lease.
- Tenant's general contractor delivers to Landlord a construction security deposit of \$2,000.00, and Tenant has deposited with Landlord the lease security deposit as defined in the Lease, if applicable. Return of the construction security deposit must be requested by Tenant's contractor within 90 days after Tenant's opening or Tenant's contractor will forfeit the construction security deposit.
- Tenant delivers to Landlord a copy of Tenant's building permit.
- Tenant provides Landlord with all Pre-Construction documentation reasonably requested by Landlord.
- Tenant and/or Tenant's general contractor attends a pre-construction meeting with Landlord's representative.
- Tenant must apply for all applicable utility services to its space and become responsible for all utility charges.

Tenant and Tenant's representative(s) agree that all rules and regulations will be followed as described in the tenant manual as well as the rules and regulations for the center.

Please recall that the Commencement Date, as defined in the Lease, is the earlier to occur of 60 days after the turnover date or when the Tenant completes its work and opens for business.

Please make sure to keep a copy of this notice for your files. Please sign, scan and e-mail a copy to my e-mail address, jbrooks@bayerproperties.com. Thank you in advance for your attention concerning this matter. If you have any questions or need additional information, please feel free to call me at (205) 795-5531 or (205) 601-6636. Once again, we would like to welcome you into the Pizitz family.

Sincerely,

BAYER PROPERTIES, LLC

John Brooks

John Brooks
Senior Tenant Coordinator
Development Services Group

Tenant signature:  Date: 7/29/22

cc: Tenant Lease File
Matthew Hammont
Karen Purdy
Kara Harton Glover
Lease Administration
Prince DeBardleben



Randell L. Woodfin
Mayor

CITY OF BIRMINGHAM

DEPARTMENT OF FINANCE

PUTTING PEOPLE FIRST

Kevin W. Moore
Chief Financial Officer

Aaron L. Saxton
Deputy Chief Financial
Officer

Sorji P. Campbell, CPA
Deputy Director

Diana L. Bolden
Manager of Budget
Management

April 17, 2022

This affidavit is concerning issuing business license to The Spun Cow, LLC,
doing business as The Spun Cow. Having a pending alcohol
application prohibits this business from sales of alcohol or having alcohol present on the premises. Until
alcohol application has been approved by City Council of Birmingham and all alcohol related business
licenses have been paid for by said business.

Failure to not comply with this affidavit and the ordinances of the City of Birmingham, will cause the
alcohol application to be voided and reapplication would be required and business license subject to
revocation by the City Council of Birmingham.

Javier Grijalva

Officer/Member

4/27/2022

Date

Meg Stanley

Revenue Agent

4/27/2022

Date

Stanley, Gregory L.

From: The Spun Cow <info@thespuncow.com>
Sent: Wednesday, April 27, 2022 10:49 AM
To: Stanley, Gregory L.
Subject: Fwd: FW: JCDH 2022 Food Permit Invoice

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

----- Forwarded message -----

From: May, Latonya <Latonya.May@jcdh.org>
Date: Wed, Mar 23, 2022 at 10:32 AM
Subject: FW: JCDH 2022 Food Permit Invoice
To: chase@thespuncow.com <chase@thespuncow.com>

From: May, Latonya
Sent: Wednesday, March 23, 2022 10:31 AM
To: 'chose@thespuncow.com' <chose@thespuncow.com>
Subject: JCDH 2022 Food Permit Invoice

JEFFERSON COUNTY DEPARTMENT OF HEALTH
BUREAU OF ENVIRONMENTAL HEALTH

1400 SIXTH AVENUE SOUTH
BIRMINGHAM, AL 35233

I N V O I C E

Invoice Number: 102622203934
Owner Number: 10262

Invoice Date: 03/23/2022
Passcode: dae83ccd

Business License Receipt

Printed 04/27/2022



License Year **2022**
 Confirmation # **637866482783029727**
 Postmark **04/27/2022**

Avenu Account # **[REDACTED]**
 Company Name **THE SPUN COW LLC**
 Trade Name **THE SPUN COW**
 Location Name **THE SPUN COW**
 Mailing Address **2900 7TH AVE S 420**
 Physical Address **1821 2ND AVE N STE 134**

BIRMINGHAM, AL 352332947
BIRMINGHAM, AL 352033158

Schedule No	Schedule Code	Schedule	Gross Receipts	Units	Issue Fee	License Fee	Penalty	Interest	Total
722216	00	RESTAURANTS, CAFES, ETC	\$1.00	0	\$0.00	\$60.00	\$0.00	\$0.00	\$61.80
Payment Type: Credit Card									\$60.00
Convenience Fee									\$1.80
Total Remitted									\$61.80

ADDITIONAL INFORMATION

NEW BUSINESSES: Municipal approval is required before an official license can be issued and before business should commence. Once approved, an official license will be issued.

RENEWAL BUSINESSES: Questions regarding the issuance of your official business license should be directed to Avenu Insights & Analytics. If additional documentation (i.e. certification from a regulatory board or agency) is required but not submitted, your license will be placed in a hold status.

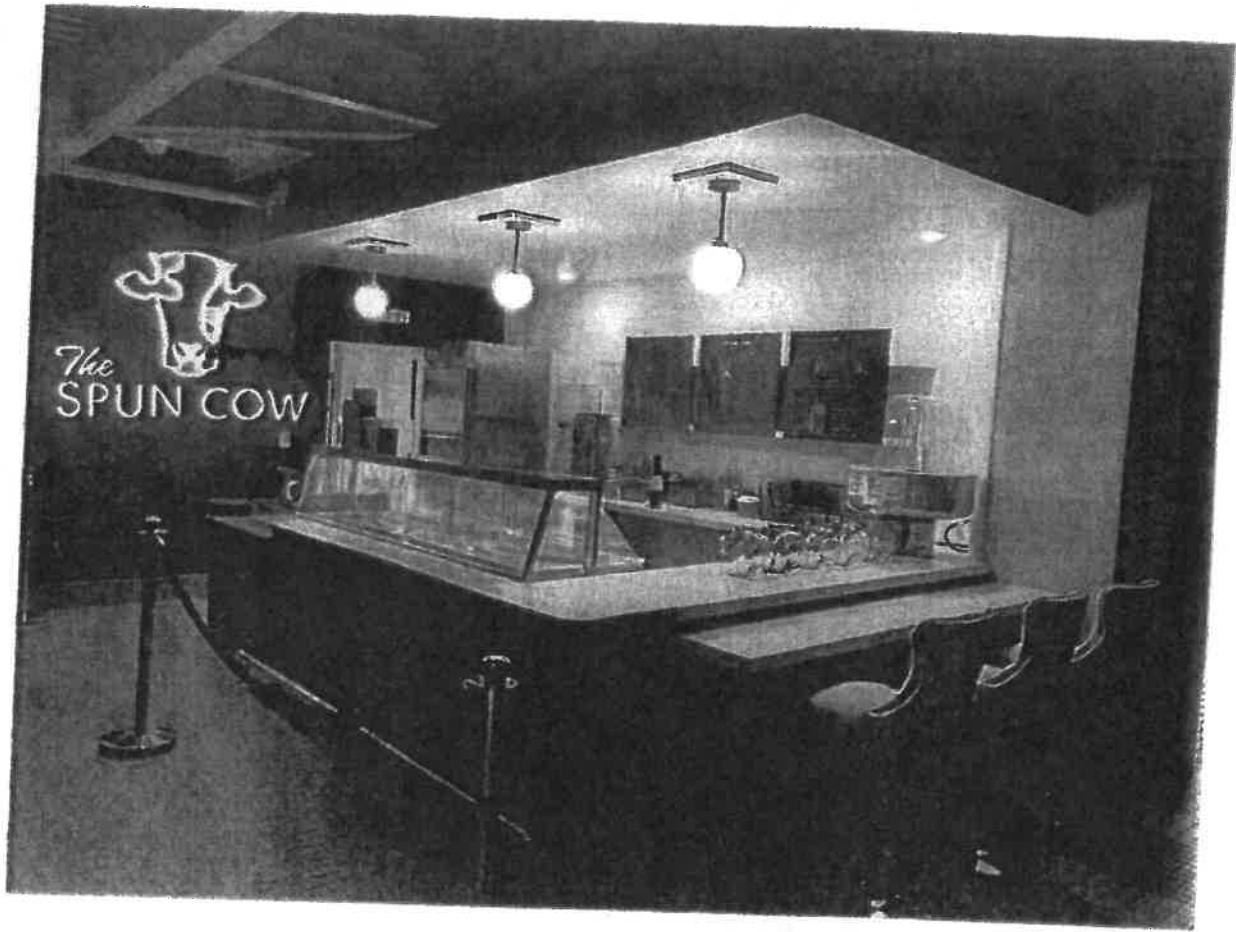
ADDITIONAL DOCUMENTATION AND/OR REQUIREMENTS: Certain license types require additional documentation such as certification from a regulatory board or agency or approval by this municipality. During the payment process, you may have been notified of these requirements; however, a list of license prerequisites and required documentation are available at www.avenuinsights.com. Additional required documentation should be remitted to Avenu via email, fax or mail.

CONFIRMATION #: The confirmation number provided on this receipt confirms only that you have submitted a filing and/or payment. If your payment does not process successfully, you will be contacted by Avenu Insights & Analytics.

TEMPORARY BUSINESS LICENSE: Unless otherwise instructed, this receipt serves as a temporary business license valid for no longer than 30 days from the date on this receipt or until an official business license has been issued if sooner than 30 days.

QUESTIONS? Please reference your Avenu Account # on all correspondence. This # is needed to ensure that the information supplied is applied appropriately to your account. Failure to submit required documentation or meet license requirements will delay the issuance of an official license.

Avenu Insights & Analytics
 Attn: Business License Department
 PO Box 830900
 Birmingham, AL 35263-0900
 Email: businesslicensesupport@avenuinsights.com
 Toll Free Phone: (800) 556-7274
 Fax: (800) 528-6528
 Website: www.avenuinsights.com



PARCEL ID: 012200362030001000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Wednesday, April 27, 2022 9:54:45 AM

OWNER: PIZITZ REALTY CO

ADDRESS: 2222 ARLINGTON AVE S

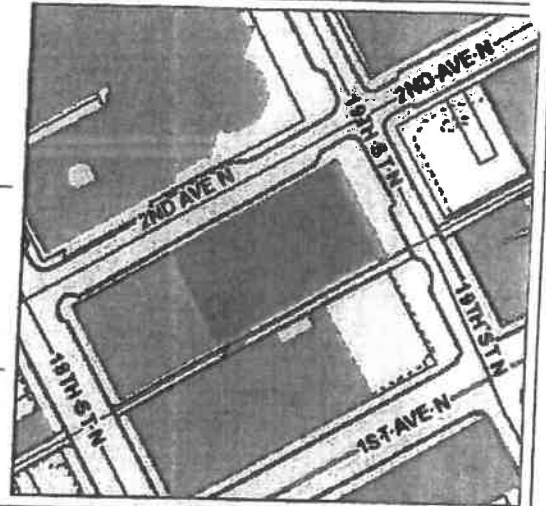
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35205--4004

SITE ADDR: 1821 2ND AVE N

CITY/STATE: BHAM, AL

ZIP: 35203



LAND: \$945,000.00

BLDG: \$24,047,400.00

OTHER: \$0.00

AREA: 35,119.36

ACRES: 0.81

SUBDIVISION INFORMATION:

NAME BIRMINGHAM BLOCKS

BLOCK: 98

LOT: 1-6

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Downtown Birmingham Retail & Theatre; Birmingham Civil Rights

Commercial Revitalization District: 19th Street North

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Fountain Hghts (1204)

Communities: Northside (12)

Council Districts: District - 5 (Councilor: Darrell O'Quinn)

Zoning Outline: B4

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol,
dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – Avondale Park

Location Address: 4101 5th Ave S – Avondale Park

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input checked="" type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
304-98-0592 ALDL: 304690 Bobby Thelin Greenawalt	Member	04/17/85 Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -Avondale Park
- 4(a) Location 4101 5th Ave S - Avondale Park
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35222 County Jefferson Shelby
- (b) Length of time at this location
- (c) Mailing Address: 209 Alabama St Auburn, AL 36832
- (d) Business Phone _____ Fax: _____ Other Contact: (334)734-2468

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254
Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
 - (b) Is kitchen apart from but convenient to the dining room? Yes No
 - (c) Is place of business habitually and principally used for providing food to the public? Yes No
 - (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
 - (e) Are these premises equipped for on premises consumption of liquor? Yes No
 - (f) Will this business be operating primarily as a package store? Yes No
 - (g) Seating Capacity: _____
 - (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date 7/7/2022 Ending Date 7/17/2022
 - (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
 - (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
 - (k) Event Sponsor _____ Phone Number _____
 - (1) Sponsor Letter of Designation? Yes No
 - (2) Multi-Vendor Sponsorship? Yes No
 - (3) Street Closing Required? Yes No
 - (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO-Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 8th day of June 2022

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail - Type 150/30 Pays or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334) 734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - Avondale Park
Attention: _____
Address: 4101 5th Ave S - Avondale Park
City: Birmingham State: AL Zip: 35203
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify) _____
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify) _____
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office) _____
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify) _____
- 10. Transient Vendors/Special Events: Avondale Park World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: Avondale Park

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- State of Alabama Sales Tax Number _____
State of Alabama Sellers Use Tax Number _____
State of Alabama Consumers Use Tax Number _____
State of Alabama Lease Tax Number _____
State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	301-93-0892

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS --Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

06/07/22

Signature of Person Completing This Application

Date

Bobby Greenawalt

205-337-9808

Print the Name of the Person Completing This Application

Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED



DRIVER LICENSE

ALABAMA



NO. 1304690 CLASS DV
D.O.B. 04-17-1986 EXP 04-17-2025

BOBBY THELIN
GREENAWALT

4157 CREEKVIEW CT
AUBURN, AL 36832-7839

ENDORSEMENTS:
SEX M HT 6-03 EYES GRN
WT 280 HAIR BLN

ISS 04-27-20

Secretary of Transportation
Secretary of Law Enforcement



VETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

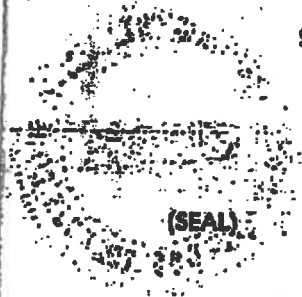
Was born in Goshen, Elkhart County, Indiana April 17 1986
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Birth Record was filed April 22, 1986 Recorded locally 886-791
(or Local No.)

Signed [Signature]
Health Officer



Date Issued May 20, 1986

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: 604-98-0892

City of Birmingham

**710 20th Street North
Birmingham, AL 35203**

This contract is notice that Greenawalt Hospitality, LLC will be occupying Avondale Park (4101 5th Avenue South, Birmingham, Alabama 35222) from Thursday, July 7th, 2022 to Sunday, July 17th, 2022 to render alcohol services for the World Games Special Event.



**Authorized Signature
City of Birmingham**

5-17-2022
Date



**Bobby Greenawalt
Greenawalt Hospitality, LLC**

5/17/22
Date

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.



20210525000022266

05/25/2021


Date

J. H. Merrill

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594850 1/2
Bk: LR200905 Pg: 16907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

- VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.
- VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.
- IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

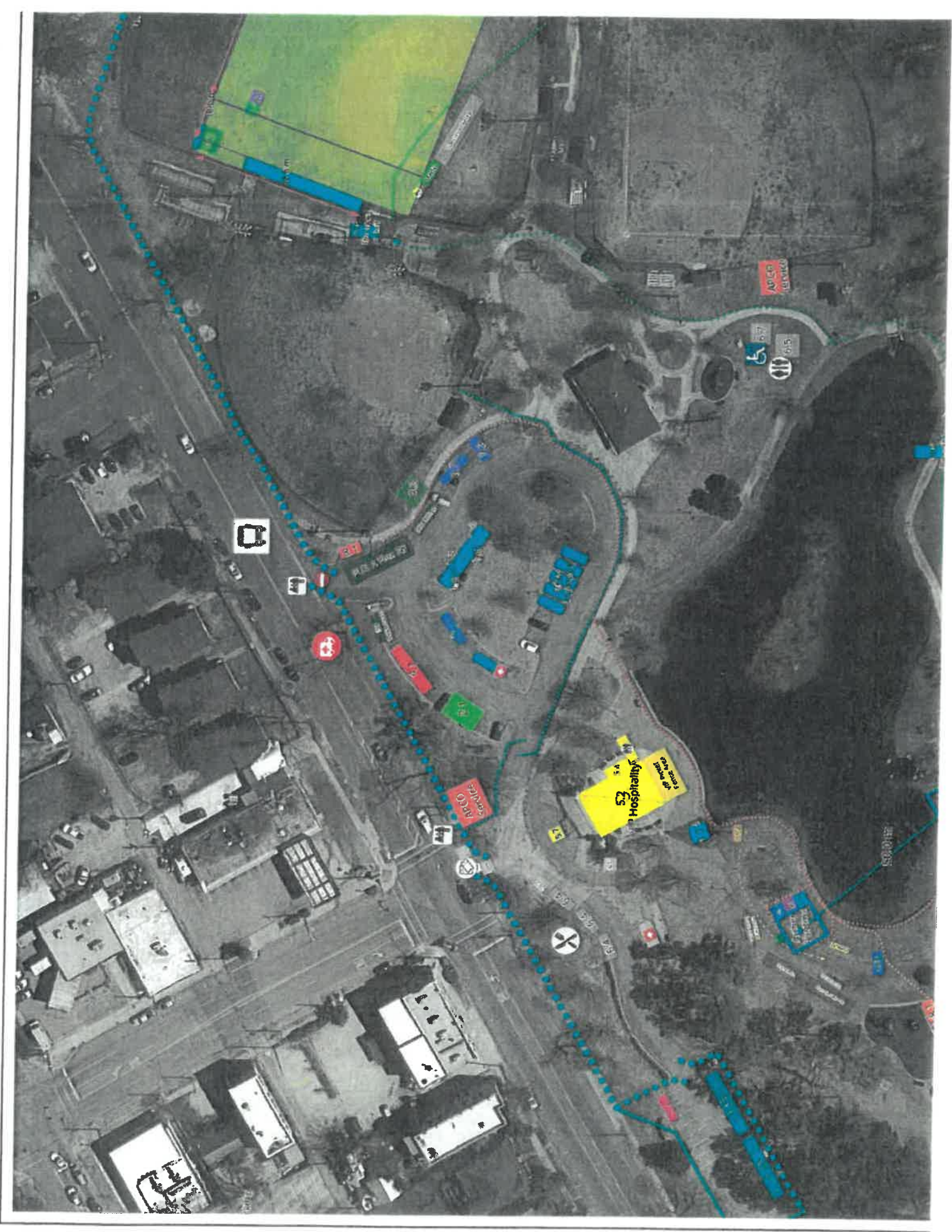
- (1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:
- (a) he conducted himself in good faith;
 - (b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and
 - (c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.
- (2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg:18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00


BOBBY T. GREENAWALT

Total of Fees and Taxes-\$51.00
HATCHERK



PARCEL ID: 012300294016001000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 11:15:47 AM

OWNER: BIRMINGHAM CITY OF

ADDRESS: 710 20TH ST N

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35203--2216

SITE ADDR: 4101 5TH AVE S

CITY/STATE: BHAM, AL

ZIP: 35222



LAND: \$452,100.00

BLDG: \$0.00

OTHER: \$0.00

AREA: 288,501.96

ACRES: 6.62

SUBDIVISION INFORMATION:

NAME

BLOCK: 0000

LOT: 0000

:

Section: 32-17-2W; 29-17-2W

Land Slide Zones: In Land Slide Zones

Historic Districts: Avondale Park

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Forest Prk (1401)

Communities: Red Mountain (14)

Council Districts: District - 3 (Councilor: Valerie A. Abbott)

Zoning Outline: R3

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – BSC Berylson Soccer Park

Location Address: 900 Arkadelphia Rd – Berylson Soccer Park

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input checked="" type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ ALDL# 304690 Bobby Thelin Greenawalt	Member	04/17/86 Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -BSC Berylson Soccer Park
- 4(a) Location 900 Arkadelphia RD - Berylson Soccer Park
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35254 County Jefferson Shelby
- (b) Length of time at this location
- (c) Mailing Address: 209 Alabama St Auburn, AL 36832
- (d) Business Phone _____ Fax: _____ Other Contact: (334)734-2468

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254
Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? Multiple

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date 7/7/2022 Ending Date 7/17/2022
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>No Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 3rd day of June, 2022


 Signature of Affiant


 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail-Type 150/30 Days or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

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- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334)734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - BSC Berylson Soccer Park
Attention: _____
Address: 900 Arkadelphia RD - Berylson Soccer Park
City: Birmingham State: AL Zip: 35264
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify)
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify)
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
- 10. Transient Vendors/Special Events: Birmingham
Southern College World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: Bertysen Soccer Park

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
 Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU:** (Write "None" if no number assigned)
- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- State of Alabama Sales Tax Number _____
 State of Alabama Sellers Use Tax Number _____
 State of Alabama Consumers Use Tax Number _____
 State of Alabama Lease Tax Number _____
 State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	██████████-██-████

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:  06/07/2022
Signature of Person Completing This Application Date

Bobby Greenawalt 205-337-9808
Print the Name of the Person Completing This Application Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS	_____
BLIC	_____
TERRITORY	_____
ANNEX	_____
HEALTH DEPT PERMIT	_____
OTHER REQUIRED PERMIT	_____
ARTICLES OF INCORPORATION	_____
CERTIFICATE OF AUTHORITY	_____
TAX FORMS ORDERED	<input type="checkbox"/>
NBL ORDERED	<input type="checkbox"/>



DRIVER LICENSE

ALABAMA



NO. 7304650 CLASS DV
D.O.B. 04-17-1986 EXP 04-17-2025

BOBBY THELIN
GREENAWALT

4157 CREEKVIEW CT
AUBURN AL 36832-7839

ENDORSEMENTS

ISS 04-27-2017

REST: SEX: M

HT 6-03 EYES GRN
WT 280 HAIR BLN

[Handwritten Signature]

Secretary Hal Taylor
Secretary of Law Enforcement

ETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

Was born in Goshen, Elkhart County, Indiana 4 11 17 1986
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed April 22 1986 Recorded locally 586-791
(or Local No.)

Signed [Signature]
Health Officer



Date Issued May 20 1986

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: **804-98-0892**

Birmingham Southern College

900 Arkadelphia Road

Birmingham, AL 35254

This contract is notice that Greenawalt Hospitality, LLC will be occupying Berlyson Soccer Park (900 Arkadelphia Road, Birmingham, Alabama 35254) from Thursday, July 7th, 2022 to Sunday, July 17th, 2022 to render alcohol services for the World Games Special Event.



Authorized Signature
Birmingham Southern College

5/18/22
Date



Bobby Greenawalt
Greenawalt Hospitality, LLC

5/18/22
Date

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

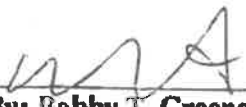
IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

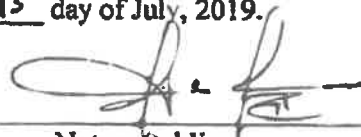
STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2021

Date

Handwritten signature of John H. Merrill in black ink.

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)

20090514000594850 1/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594050 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00


BOBBY T. GREENAWALT

Total of Fees and Taxes-\$51.00
WATCHERK

County Division Code: AL040
Inst. # 2019071214 Pages: 1 of 3
I certify this instrument filed on
7/16/2019 10:56 AM Doc: PAMEND
Alan L King, Judge of Probate
Jefferson County, AL. Rec: \$38.00
Clerk: WORTHYV

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021



Notary Public:

My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2021

Date

J. H. Merrill

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)

20090514000594850 1/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00

Total of Fees and Taxes-\$51.00
HATCHERK


BOBBY T. GREENAWALT

PARCEL ID: 012200331005008000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 10:24:44 AM

OWNER: BIRMINGHAM SOUTHERN COLLEGE

ADDRESS: PO BOX 549006

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35254--0001

SITE ADDR: 900 ARKADELPHIA RD

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$4,160,000.00

BLDG: \$34,523,400.00

OTHER: \$0.00

AREA: 3,485,413.14

ACRES: 80.01

SUBDIVISION INFORMATION:

NAME BHAM SOUTHERN COLL SUB

BLOCK:

LOT: 1

:

Section: 33-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Bush Hills (202)

Communities: Five Points West (2)

Council Districts: District - 8 (Councilor: Carol Clarke)

Zoning Outline: HID

Demolition Quadrants: DEM Quadrant - 2

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – Bill Battle Coliseum

Location Address: 801 Bruno Dr – Bill Battle Coliseum

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application Transfer

Type of License

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input checked="" type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
304-98-0892 ALDL# 304690 Bobby Thelin Greenawalt	Member	04/17/86 Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -Bill Battle Coliseum

4(a) Location 801 Bruno Dr - Bill Battle Coliseum
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35204 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **209 Alabama St Auburn, AL 36832**

(d) Business Phone _____ Fax: _____ Other Contact: **(334)734-2468**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254

Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date 7/7/2022 Ending Date 7/17/2022
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 3rd day of June 2022

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail - Type 150/30 Days or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
 Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
 Change Business Ownership of your current registration (Please complete all sections)
 Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
 Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
 Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9, 11-13, and 14)
 Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334) 734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - Bill Battle Coliseum
Attention: _____
Address: 801 Bruno Dr - Bill Battle Coliseum
City: Birmingham State: AL Zip: 35204
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

1. Alabama Corporation (Incorporated in Alabama) 1. Foreign Corporation (Incorporated in another state)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other _____
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

1. Manufacturer
2. Contractor (Please Specify) _____
3. Wholesaler
4. Retailer
5. Other (Please Specify) _____
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
(Please Specify the type of occupation or office) _____
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify) _____
10. Transient Vendors/Special Events: Bill Battle Coliseum
World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: Bill Battle Coliseum

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- Sales Tax TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sellers Use Tax State of Alabama Sales Tax Number _____
- Consumers Use Tax State of Alabama Sellers Use Tax Number _____
- Lease Tax State of Alabama Consumers Use Tax Number _____
- Occupational Tax- Employers State of Alabama Lease Tax Number _____
- Lodgings Tax State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	104-98-0892

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:  06/07/22
Signature of Person Completing This Application Date

Bobby Greenawalt 205-337-9808
Print the Name of the Person Completing This Application Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED



DRIVER LICENSE

ALABAMA



NO. 7304690 CLASS DV
D.O.B. 04-17-1986 EXP. 04-17-2025

BOBBY THELIN GREENAWALT

4157 GREEKVIEW CT
AUBURN, AL 36832-7839

ENDORSEMENTS

ISS. 04-17-2021

REST
SEX M

HT 6-03
WT 200

EYES GRN
HAIR BLN

[Handwritten Signature]

Secretary Hal Taylor
Secretary of Law Enforcement

VETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

was born in Goshen, Elkhart County, Indiana April 17 1986
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed April 22 1986 Recorded locally
(or Local No.)

Signed *Stanlyady* Health Officer



Date Issued

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: 304-98-0892

Birmingham Southern College

900 Arkadelphia Road
Birmingham, AL 35254

This contract is notice that Greenawalt Hospitality, LLC will be occupying Bill Battle Coliseum (801 Bruno Drive, Birmingham, Alabama 35204) from Thursday, July 7th, 2022 to Sunday, July 17th, 2022 to render alcohol services for the World Games Special Event.



Authorized Signature
Birmingham Southern College

5/4/22
Date



Bobby Greenawalt
Greenawalt Hospitality, LLC

5/4/22
Date

County Division Code: ALD40
Inst. # 2019071214 Pages: 1 of 3
I certify this instrument filed on
7/16/2019 10:56 AM Doc: PAMEND
Alan L. King, Judge of Probate
Jefferson County, AL. Rec: \$38.00
Clerk: WORTHYV

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager


STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15th day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2021


Date

J. H. Merrill

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594850 1/2
Bk: LR200905 Pg:16907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

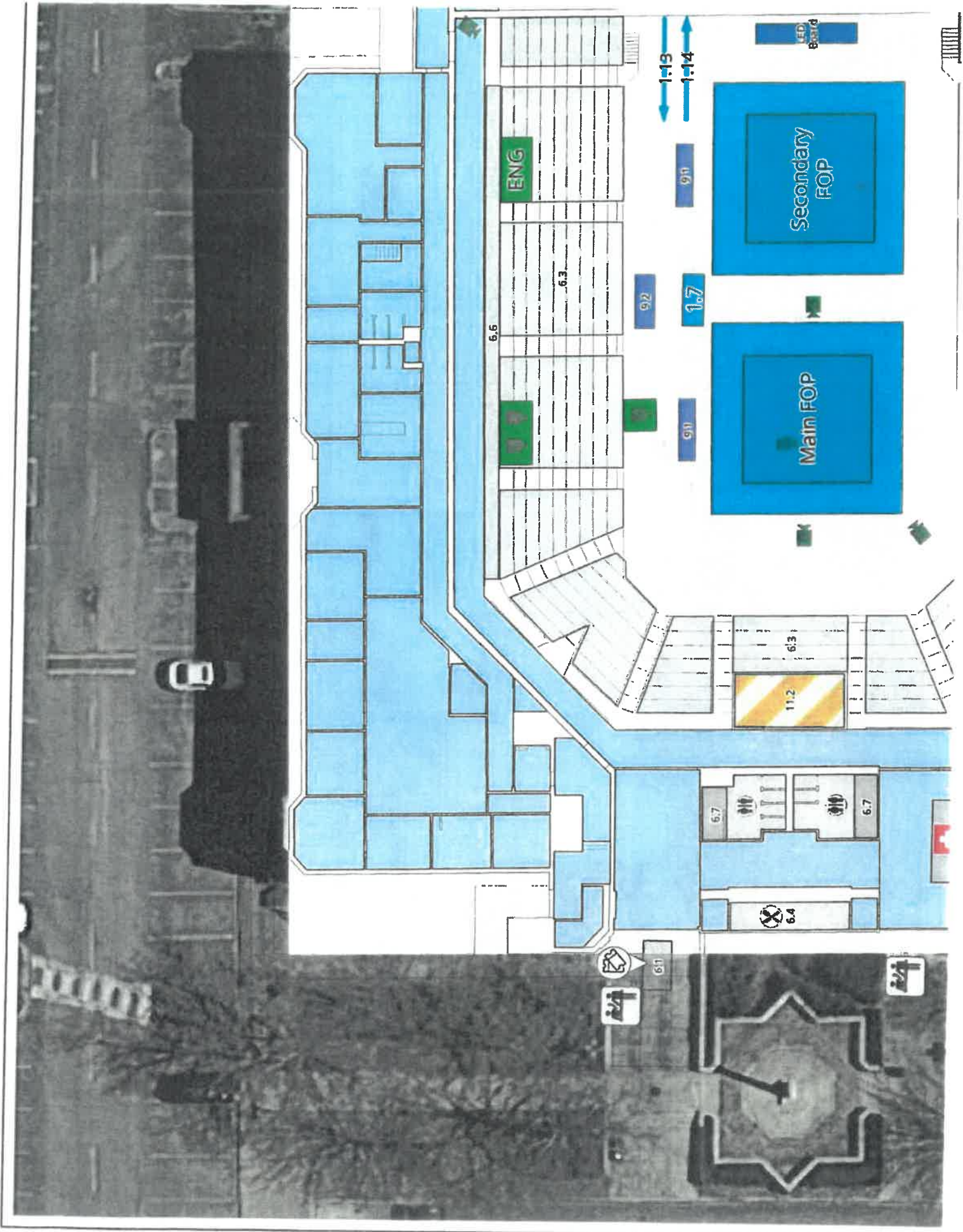
(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00

Total of Fees and Taxes-\$51.00
HATCHERK


BOBBY T. GREENAWALT



Secondary FOP

Main FOP

ENG

11.2

6.3

9.1

9.2

9.3

1.7

1:13

1:14

6.1

6.4

6.7

6.7

6.7

6.4

6.6

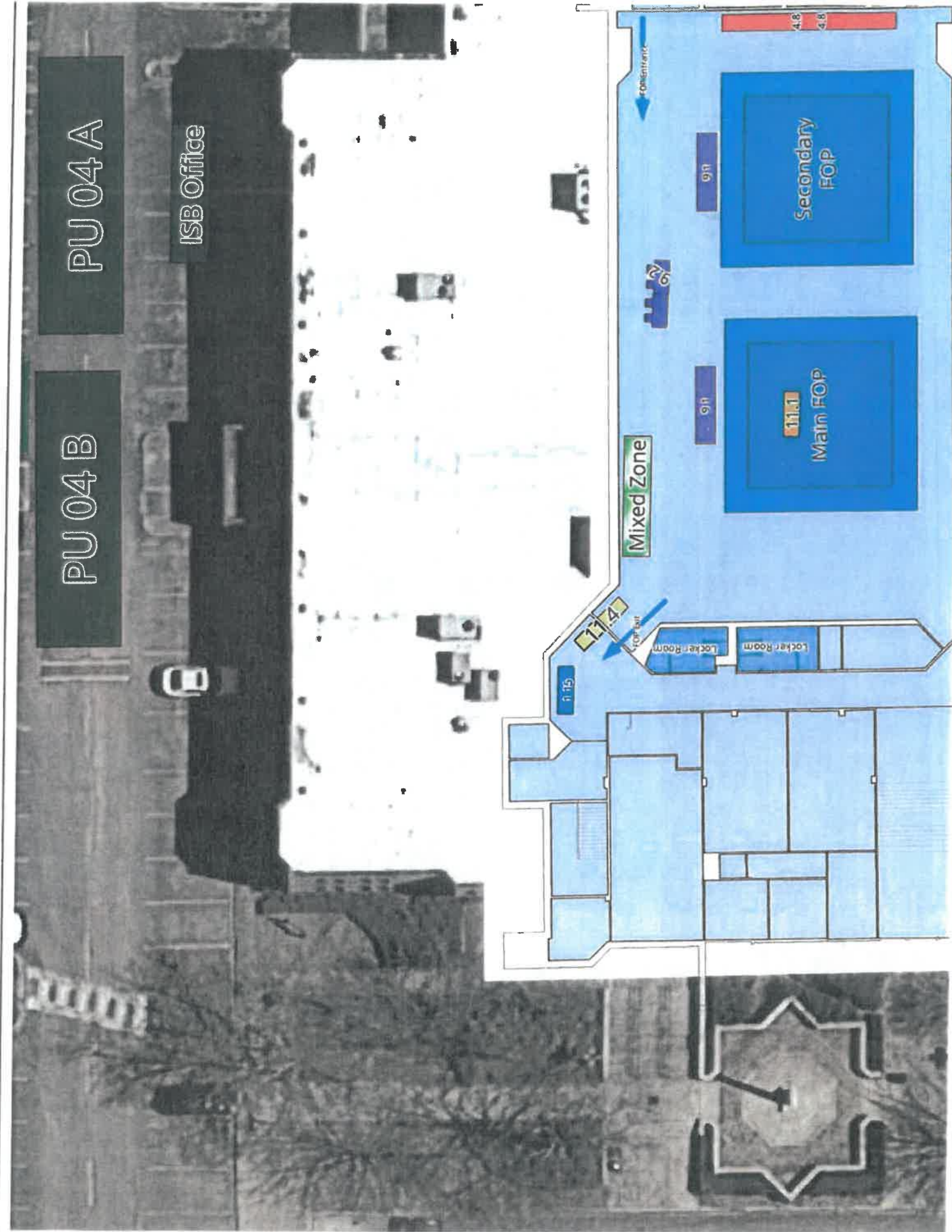
6.3

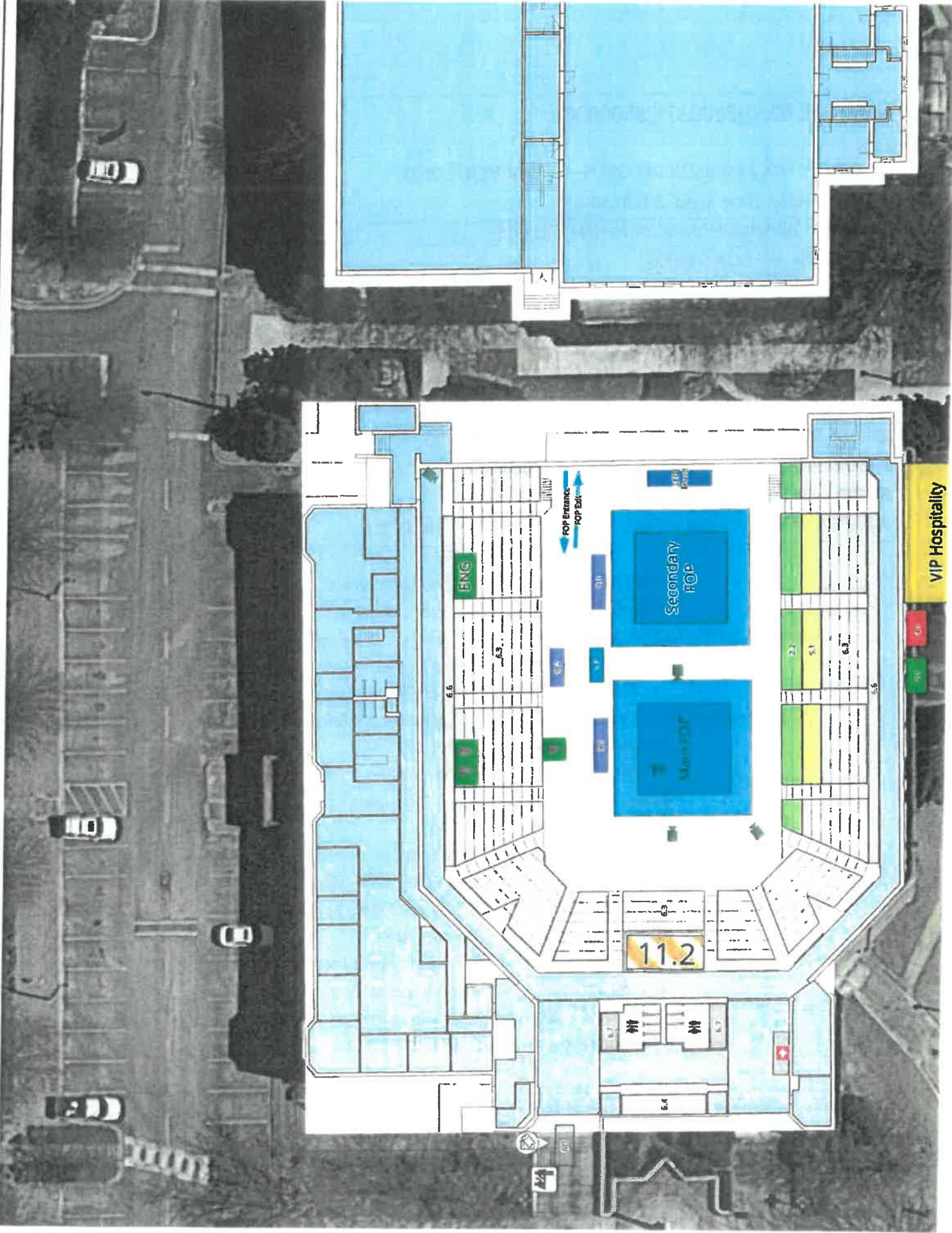
LED Board

PU 04 B

PU 04 A

ISB Office





PARCEL ID: 012200331005008000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 11:31:38 AM

OWNER: BIRMINGHAM SOUTHERN COLLEGE

ADDRESS: PO BOX 549006

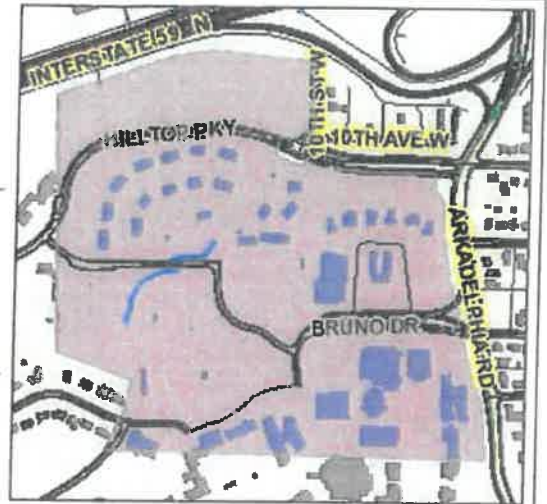
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35254--0001

SITE ADDR: 900 ARKADELPHIA RD

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$4,160,000.00

BLDG: \$34,523,400.00

OTHER: \$0.00

AREA: 3,485,413.14

ACRES: 80.01

SUBDIVISION INFORMATION:

NAME BHAM SOUTHERN COLL SUB

BLOCK:

LOT: 1

Section: 33-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Bush Hills (202)

Communities: Five Points West (2)

Council Districts: District - 8 (Councilor: Carol Clarke)

Zoning Outline: HID

Demolition Quadrants: DEM Quadrant - 2

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – John Carroll High School

Location Address: 300 Lakeshore Pkwy – High School Football Field

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input checked="" type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL <u>7304590</u> Bobby Thelin Greenawalt	Member	<u>04/17/85</u> Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -John Carroll High School
- 4(a) Location 300 Lakeshore Pkwy - High School Football Field
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35209 County Jefferson Shelby
- (b) Length of time at this location
- (c) Mailing Address: **209 Alabama St Auburn, AL 36832**
- (d) Business Phone _____ Fax: _____ Other Contact: **(334)734-2468**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254
Address _____

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date 7/7/2022 Ending Date 7/17/2022
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO-Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 3rd day of June 2022

[Signature]
 Signature of Affiant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail - Type 150/30 days or less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
 Attention: _____
 Address: 209 Alabama St
 City: Auburn State: AL Zip Code: 36832
 Area Code and Phone Number: (334)734-2468
 Area Code and Fax Number: _____
 Name of Contact Person: Jonathan Meador
 E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - John Carroll High School
 Attention: _____
 Address: 300 Lakeshore Pkwy - High School Football Field
 City: Birmingham State: AL Zip: 35209
 Area Code and Phone Number of Business Location: _____
 Area Code and Fax Number of Business Location: _____
 Name of Contact Person at Business Location: _____
 E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
 Trade Name (d/b/a) _____
 Mailing Address of Former Owner _____
 Address (es) of Former Location(s) _____
 Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

1. Alabama Corporation (Incorporated in Alabama) 1. Foreign Corporation (Incorporated in another state)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other _____
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

1. Manufacturer
2. Contractor (Please Specify)
3. Wholesaler
4. Retailer
5. Other (Please Specify)
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
10. Transient Vendors/Special Events: John Carroll High School World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: John Carroll High School Football Field

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- Sales Tax TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sellers Use Tax State of Alabama Sales Tax Number _____
- Consumers Use Tax State of Alabama Sellers Use Tax Number _____
- Lease Tax State of Alabama Consumers Use Tax Number _____
- Occupational Tax- Employers State of Alabama Lease Tax Number _____
- Lodgings Tax State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
 This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	00-98-1892

Section 12 CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
 Address of Residence: _____
 City: _____ State _____ Zip Code _____
 Area Code and Phone Number of Residence: _____

Section 13 STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS -Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:  06/07/22
 Signature of Person Completing This Application Date

Bobby Greenawalt 205-337-9808
 Print the Name of the Person Completing This Application Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
 BLIC _____
 TERRITORY _____
 ANNEX _____
 HEALTH DEPT PERMIT _____
 OTHER REQUIRED PERMIT _____
 ARTICLES OF INCORPORATION _____
 CERTIFICATE OF AUTHORITY _____
 TAX FORMS ORDERED NBL ORDERED

DRIVER LICENSE



ALABAMA



NO. 7304690

CLASS DV

D.O.B. 04-17-1986

EXP 04-17-2025

BOBBY THEELIN
GREENAWALT

4157 CREEKVIEW CT
AUBURN AL 36832-7839

ENDORSEMENTS
ISS 04-22-2021

REST
SEX M HT 6-03 EYES GRN
WT 280 HAIR BLN

Secretary of State
Department of Law Enforcement

[Signature]

[Signature]
ETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

Was born in Goshen, Elkhart County, Indiana April 17 1986
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed April 22, 1986 Recorded locally 886-791
(or Local No.)

Signed [Signature]
Health Officer



Date issued April 22, 1986

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: ██████████

John Carroll High School

300 Lakeshore Parkway
Birmingham, AL 35209

This contract is notice that Greenawalt Hospitality, LLC will be occupying John Carroll High School Football Field (300 Lakeshore Parkway, Birmingham, Alabama 35209) from Thursday, July 7th, 2022 to Sunday, July 17th, 2022 to render alcohol services for the World Games Special Event.



Authorized Signature
John Carroll High School

5-16-22

Date



Bobby Greenawalt
Greenawalt Hospitality, LLC

5/18/22

Date

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

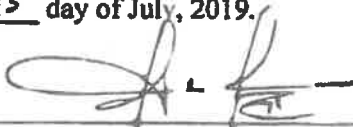
STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2021

Date

J. H. Merrill

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)

20090514000594850 1/2
Bk: LR200905 Pg: 16907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

B&B Bartending, LLC
(the "Company")

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

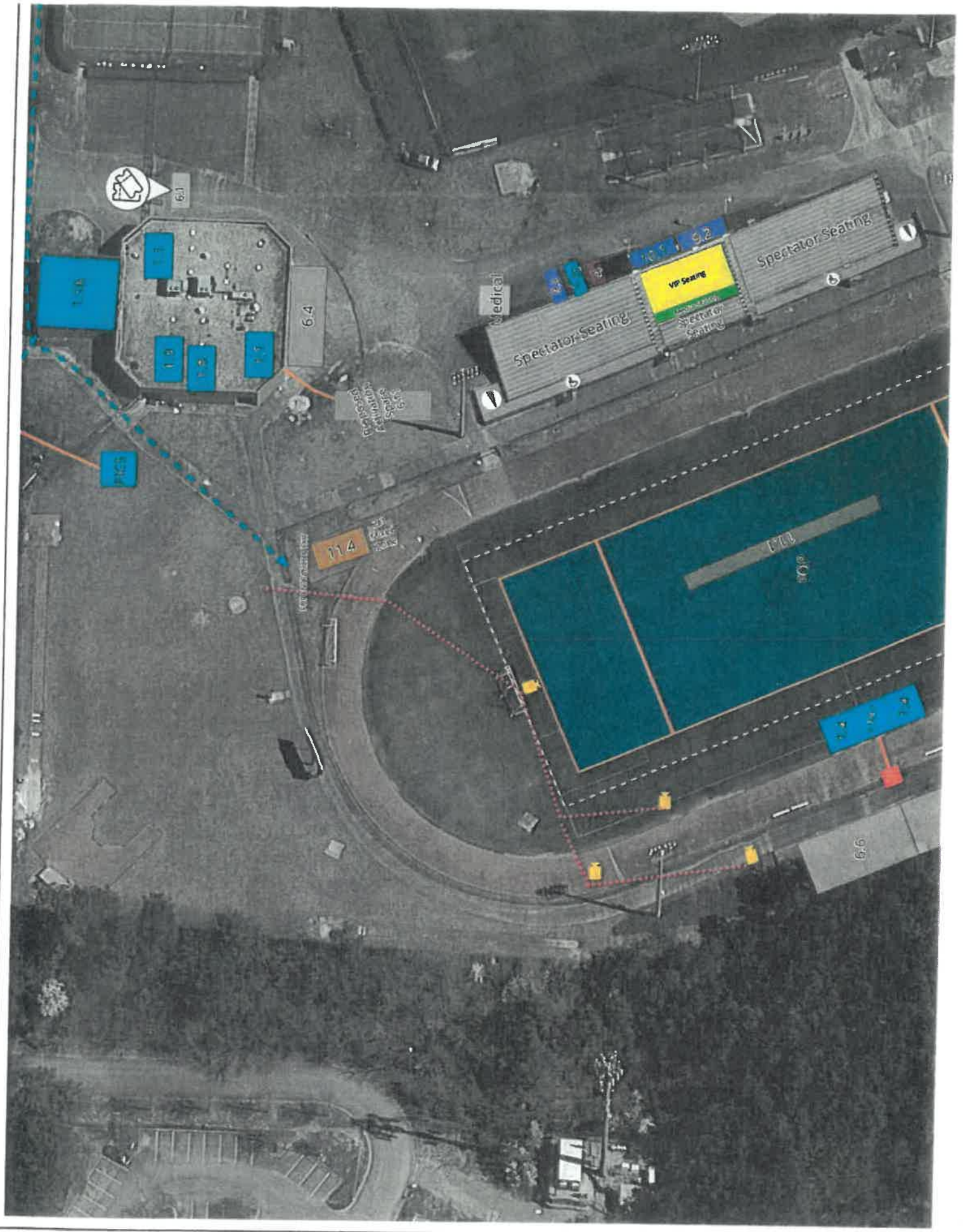
(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg: 16907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00


BOBBY T. GREENAWALT

Total of Fees and Taxes-\$51.00
HATCHERK



PARCEL ID: 012900271000006000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 10:43:16 AM

OWNER: ROMAN CATHOLIC BISHOP BHAM

ADDRESS: PO BOX 12047

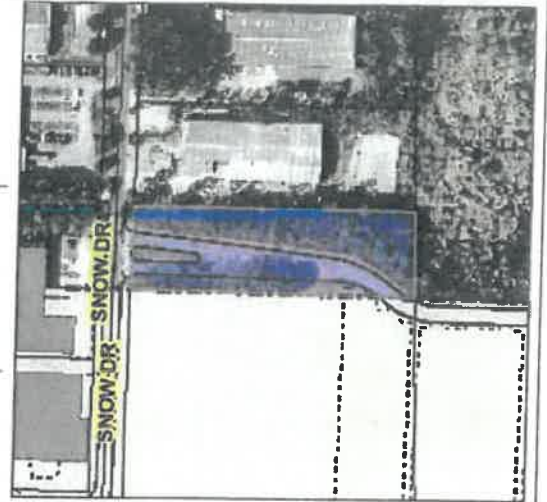
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35202--2047

SITE ADDR: 300 LAKESHORE PKWY

CITY/STATE: BHAM, AL

ZIP: 35209



LAND: \$209,300.00

BLDG: \$0.00

OTHER: \$0.00

AREA: 73,431.92

ACRES: 1.69

SUBDIVISION INFORMATION:

NAME

BLOCK:

LOT:

:

Section: 27-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Not in Neighborhoods

Communities: Not in Communities

Council Districts: District - 7 (Councilor: Wardine Alexander)

Zoning Outline: Not in Zoning Outline

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Impaired Watershed - Upper Shades Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – Powell Steam Plant

Location Address: 1800 Powell Ave S – Powell Steam Plant

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- Lounge Retail Liquor Class I
- Club Liquor Class I (Fraternal)
- Beer Off Premise
- Wine Off Premise
- Restaurant Retail Liquor
- Special Retail Liquor (over 30 days)

- Lounge Retail Liquor Class II (Package Store)
- Club Liquor Class II (Private)
- Beer On & Off Premise
- Wine On & Off Premise
- Special Retail Liquor (7 days or less)
- Special Retail Liquor (under 30 days)

Division I Dance Permit (customer)

Division II Dance Permit (entertainers)

Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
<u>[REDACTED]</u> ALDL# 7304690 Bobby Thelin Greenawalt	Member	<u>[REDACTED]</u> Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -Powell Steam Plant
- 4(a) Location 1800 Powell Ave S - Powell Steam Plant
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35203 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: 209 Alabama St Auburn, AL 36832
- (d) Business Phone _____ Fax: _____ Other Contact: (334)734-2468

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date 7/7/2022 Ending Date 7/17/2022
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 3rd day of June 2021

[Signature]
 Signature of Applicant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail - Type 150/30 Days or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

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- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334)734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - Powell Steam Plant
Attention: _____
Address: 1800 Powell Ave S - Powell Steam Plant
City: Birmingham State: AL Zip: 35203
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying “General Information for Preparing an Application for Tax Certificate Form” instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify)
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify)
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office)
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
- 10. Transient Vendors/Special Events: Alabama Power Company World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: Powell Steam Plant

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sales Tax
 - Sellers Use Tax
 - Consumers Use Tax
 - Lease Tax
 - Occupational Tax- Employers
 - Lodgings Tax
- State of Alabama Sales Tax Number _____
State of Alabama Sellers Use Tax Number _____
State of Alabama Consumers Use Tax Number _____
State of Alabama Lease Tax Number _____
State of Alabama Lodgings Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	304-93-0892

Section 12 CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS --Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:

06/07/2022

Signature of Person Completing This Application

Date

Bobby Greenawalt

205-337-9808

Print the Name of the Person Completing This Application

Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED



DRIVER LICENSE

ALABAMA



NO. 7304690 CLASS DV

D.O.B. 04-17-1986 EXP 04-17-2075

BOBBY THELIN GREENAWALT

4157 CREEKVIEW CT AUBURN AL 36832-7839

ENDORSEMENTS REST SEX M

HT 6-03 EYES GRN WT 280 HAIR BLN

ISS 03-22-2014

Secretary of Law Enforcement

ETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

Was born in Goshen, Elkhart County, Indiana April 17 1966
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed April 22, 1966 Recorded locally 286-791
(or Local No.)

Signed [Signature] Health Officer



Date Issued May 20, 1966

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: 304-98-0892

ACKNOWLEDGEMENT

Alabama Power Company ("APC") entered into a Venue Agreement with TWG 2021 Birmingham Foundation ("TWG") ("Venue Agreement") under which APC acknowledged and consented to, among other things, TWG contracting with food, beverage, and alcohol vendors and concessionaires to sell food, beverages, and alcohol during The Eleventh Edition of the World Games ("World Games") on certain portions of the Powell Steam Plant property ("Reserved Area") located a 1800 Powell Avenue South, Birmingham, Alabama 35203.

This document shall serve as APC's acknowledgement that Greenawalt Hospitality, LLC ("Greenawalt"), under contract with TWG, intends to render alcohol services at the Reserved Area in connection with the World Games from July 7 – 17, 2022. Greenawalt's activities shall be conducted in compliance with, and subject to, all applicable laws and regulations, its contract with TWG, and the applicable provisions of the Venue Agreement.

For the sake of clarity, nothing herein creates any agency agreement between APC and Greenawalt or gives Greenawalt any legal remedies against APC.

Dated this 24th day of May, 2022.

ALABAMA POWER COMPANY

By: Gordon G. Martin

Name: Gordon G. Martin

Title: Senior Vice President

Confirmed and Accepted:

GREENAWALT HOSPITALITY, LLC

By: Bobby Greenawalt

Name: Bobby Greenawalt

Title: President

County Division Code: AL040
Inst. # 2018071214 Pages: 1 of 3
I certify this instrument filed on
7/18/2019 10:58 AM Doc: PAMEND
Alan L. King, Judge of Probate
Jefferson County, AL. Rec: \$38.00

Clerk: WORTHYV

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager


STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.


05/25/2021

Date

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594850 1/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM 1NC
Fee - \$51.00

Total of Fees and Taxes-\$51.00
HATCHERK


BOBBY T. GREENAWALT

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

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FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

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SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

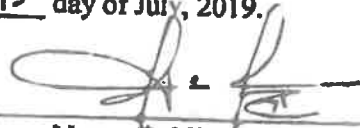
STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.



05/25/2021

Date

J. H. Merrill

20210525000022266

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)

20090514000594850 1/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM INC
Judge of Probate- Alan L. King

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OF
B&B Bartending, LLC**

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I. The name of the limited liability company shall be:

**B&B Bartending, LLC
(the "Company")**

II. The period of its duration shall be perpetual.

III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

VI. Additional contributions shall be made at such times and in such amounts as may be unaniously agreed by the Members as provided in the Operating Agreement of the Company.

VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.

IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

(1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:

(a) he conducted himself in good faith;

(b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and

(c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.

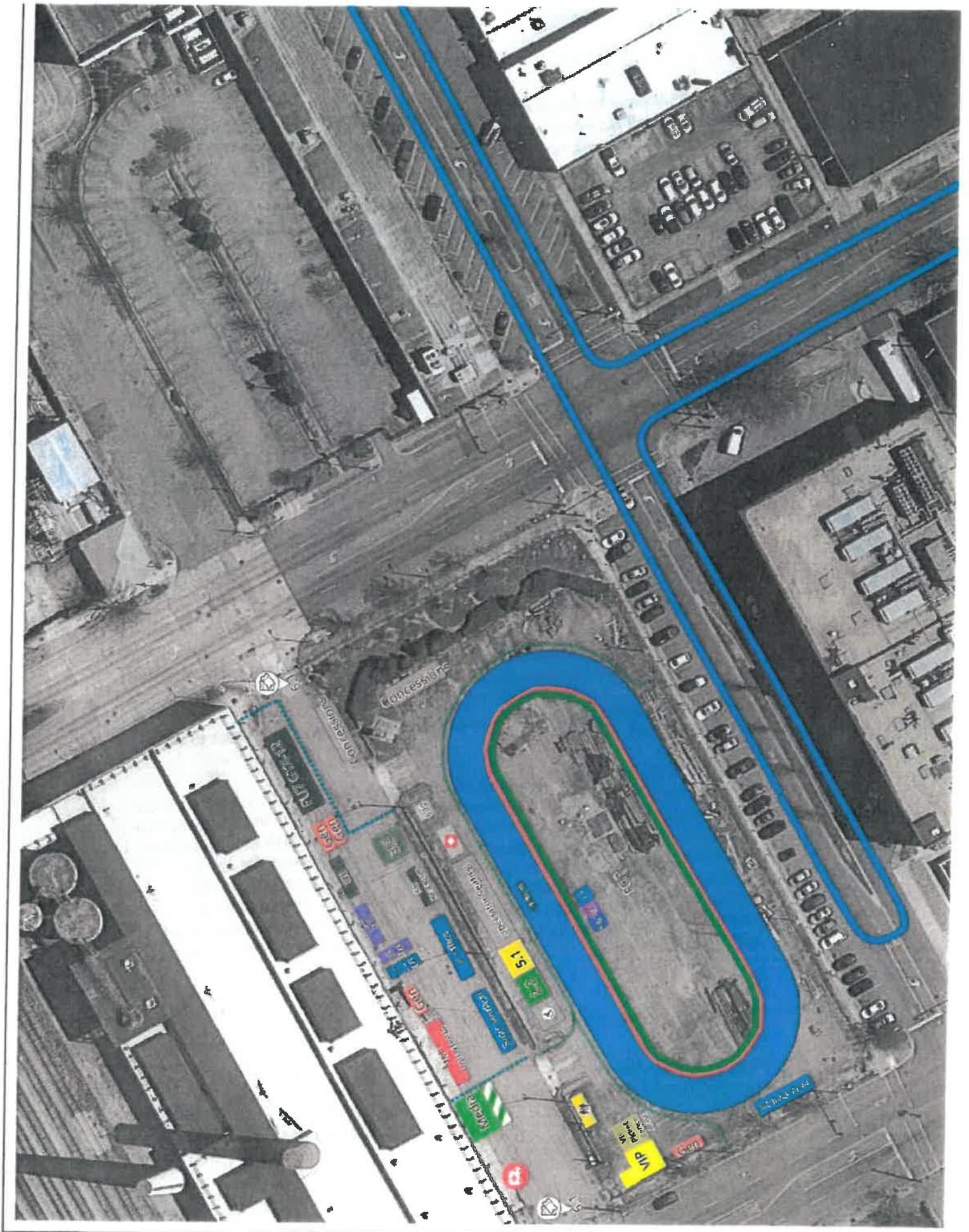
(2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

DATED: 5-14, 2009.

20090514000594850 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00

Total of Fees and Taxes-\$51.00
HATCHERK


BOBBY T. GREENAWALT



5

concessions

concessions

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PARCEL ID: 012200363008001000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 12:10:55 PM

OWNER: ALABAMA POWER CO

ADDRESS: PO BOX 2641

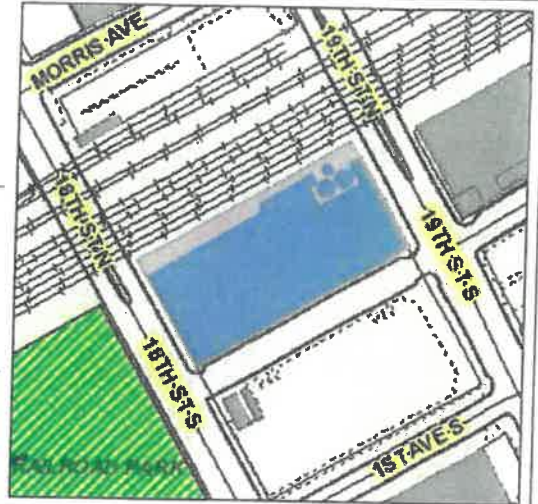
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35291--0001

SITE ADDR: 1830 POWELL AVE S

CITY/STATE: BHAM, AL

ZIP: 35233



LAND: \$2,538,400.00

BLDG: \$473,000.00

OTHER: \$0.00

AREA: 80,361.19

ACRES: 1.84

SUBDIVISION INFORMATION:

NAME ALABAMA POWER CO RESUR BL

BLOCK: 113B

LOT: 1

:

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Midtown

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Five Pts So (1701)

Communities: Southside (17)

Council Districts: District - 5 (Councilor: Darrell O'Quinn)

Zoning Outline: M1

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

**Special Retail – Type 150/30 Days or Less: 7/7-7/17/22 – 11 Days
(World Games Venues)**

The following applicant has applied to the City of Birmingham for an alcohol,
dance or pool table license:

Name of Applicant: Greenawalt Hospitality, LLC

Mailing Address: 209 Alabama St
Auburn, AL 36832

Trade Name: TWG – UAB PNC Field

Location Address: 800 11th St S – UAB PNC Field

Contact Number: (334)734-2468

Contact Person:
Jonathan Meador

New Application

Transfer

Type of License

- Lounge Retail Liquor Class I
- Club Liquor Class I (Fraternal)
- Beer Off Premise
- Wine Off Premise
- Restaurant Retail Liquor
- Special Retail Liquor (over 30 days)

- Lounge Retail Liquor Class II (Package Store)
- Club Liquor Class II (Private)
- Beer On & Off Premise
- Wine On & Off Premise
- Special Retail Liquor (7 days or less)
- Special Retail Liquor (under 30 days)

Division I Dance Permit (customer)

Division II Dance Permit (entertainers)

Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs Multiple

Date Applied: 6/7/22

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL-TYPE 150/30 DAYS OR LESS

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Greenawalt Hospitality, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ ALDL# ██████████ Bobby Thelin Greenawalt	Member	██/██/██ Indiana	4157 Creekview Ct Auburn, AL 36832	7 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2019071 Page: 1 of 3 Date: 7/16/2019 County: Jefferson
214

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name TWG -UAB PNC Field
- 4(a) Location 800 11th St S - UAB PNC Field
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35205 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **209 Alabama St Auburn, AL 36832**
- (d) Business Phone _____ Fax: _____ Other Contact: **(334)734-2468**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Birmingham Southern College
PO Box 549006 Birmingham, AL 35254

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Venue
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **Multiple**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days. Starting Date 7/7/2022 Ending Date 7/17/2022
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days. Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO - Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 3rd day of June 2022

[Signature]
 Signature of Affiant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Special Retail - Type 150/30 Days or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:

(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Greenawalt Hospitality, LLC
Attention: _____
Address: 209 Alabama St
City: Auburn State: AL Zip Code: 36832
Area Code and Phone Number: (334)734-2468
Area Code and Fax Number: _____
Name of Contact Person: Jonathan Meador
E-Mail: jonathan@beveragemgmt.com Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): TWG - UAB PNC Field
Attention: _____
Address: 800 11th St S - UAB PNC Field
City: Birmingham State: AL Zip: 35205
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business. If applicable, this section MUST be completed.

Former Owner: _____
Trade Name (d/b/a) _____
Mailing Address of Former Owner _____
Address (es) of Former Location(s) _____
Area Code and Phone Number of Former Owner: _____

Section 5 – TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying “General Information for Preparing an Application for Tax Certificate Form” instruction sheet for a listing of supplemental documentation to be included with this application.

- 1. Alabama Corporation (Incorporated in Alabama)
- 2. Partnership (two or more owners)
- 3. Sole Proprietor (one owner)
- 4. Unincorporated Association (i.e., PA)
- 5. Other _____
- 6. Limited Liability Partnership (LLP)
- 7. Limited Liability Company (LLC)
- 1. Foreign Corporation (Incorporated in another state)

Section 6 – TYPE OF BUSINESS

Please indicate the principal business activity category.

- 1. Manufacturer
- 2. Contractor (Please Specify) _____
- 3. Wholesaler
- 4. Retailer
- 5. Other (Please Specify) _____
- 6. Food/Eating Establishment
- 7. Day Care Center
- 8. Home Occupation/Home Office
(Please Specify the type of occupation or office) _____
- 9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify) _____
- 10. Transient Vendors/Special Events: UAB World Games Venue
Date(s) of the Event: 7/7-7/17/22
Event Location: UAB PNC Field

Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Special Event Product: Concessioner for Event/Alcohol

Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____
Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 – Tax Liabilities Check the taxes for which you are liable.

- | | |
|--|--|
| <input type="checkbox"/> Sales Tax | TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned) |
| <input type="checkbox"/> Sellers Use Tax | State of Alabama Sales Tax Number _____ |
| <input type="checkbox"/> Consumers Use Tax | State of Alabama Sellers Use Tax Number _____ |
| <input type="checkbox"/> Lease Tax | State of Alabama Consumers Use Tax Number _____ |
| <input type="checkbox"/> Occupational Tax- Employers | State of Alabama Lease Tax Number _____ |
| <input type="checkbox"/> Lodgings Tax | State of Alabama Lodgings Tax Number _____ |

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

Business License Tax

State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information REQUIRED. (Attach additional sheets if necessary.)

NAME	TITLE	SOCIAL SECURITY NUMBER
Greenawalt, Bobby	Member	104-58-0892

Section 12 CORPORATE RESIDENT AGENT OR LOCAL MANAGER

Name: _____
Address of Residence: _____
City: _____ State _____ Zip Code _____
Area Code and Phone Number of Residence: _____

Section 13 STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS —Please read carefully, then sign.

I declare, under the penalty of making a false declaration, that I am authorized to complete this form and to the best of my knowledge and belief all questions answered are true, correct, and complete statements, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said laws, ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application. I also understand that disclosure of any false or misleading information will result in automatic denial of any license issued pursuant to this application, or in the revocation of the license if such has already been issued. I understand that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who is not otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Code (Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to continue in any business, vocation, occupation, or profession after the expiration of a license previously issued without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham without approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division).

Signed:  06/07/2022
Signature of Person Completing This Application Date

Bobby Greenawalt 205-337-9808
Print the Name of the Person Completing This Application Phone Number of Person Completing Application

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:

HOME OCCUPATION CERTIFICATE EXECUTED
 YES NO NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED NBL ORDERED



DRIVER LICENSE

ALABAMA



NO. 7304690 CLASS DV
D.O.B. 04-17-1986 EXP 04-17-2025

BOBBY THELIN
GREENAWALT

4157 CREEKVIEW CT
AUBURN AL 36832-7839

ENDORSEMENTS REST
SEX M

ISS 04-22-2021 HT 6-03 EYES GRN
WT 200 HAIR BLN

[Handwritten Signature]

Secretary of Law Enforcement
Secretary of Law Enforcement

VETERAN

**ELKHART COUNTY HEALTH DEPARTMENT
CERTIFICATE OF BIRTH**

THIS IS TO CERTIFY, that our records show Bobby Thelin Greenawalt
Name

was born in Goshen, Elkhart County, Indiana April 22, 1986
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

Date Record was filed April 22, 1986 Recorded locally 586-731
(or Local No.)

Signed [Signature] Health Officer



Date Issued May 20, 1986

Officer Address, Length of time at Current Residence, and SSN

- **Bobby Greenawalt**
 - 4157 Creekview Ct., Auburn, AL 36832 – 7yrs
 - SSN: [REDACTED]

The University of Alabama at Birmingham

**600 18th Street North
Birmingham, AL 35203**

This contract is notice that Greenawalt Hospitality, LLC will be occupying UAB PNC Field (800 11th Street South, Birmingham, Alabama 35205) from Thursday, July 7th, 2022 to Sunday, July 17th, 2022 to render alcohol services for the World Games Special Event.



**Authorized Signature
The University of Alabama at Birmingham**

5/17/22
Date



**Bobby Greenawalt
Greenawalt Hospitality, LLC**

5/17/22
Date

**FIRST AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
B&B BARTENDING, LLC**

The undersigned, being the sole member of **B&B Bartending, LLC**, a limited liability company formed under the laws of the State of Alabama (herein the "Limited Liability Company"), does hereby adopt the following First Amendment to the Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **B&B Bartending, LLC**.

SECOND: The Articles of Organization of Limited Liability Company were originally filed on the 14th day of May, 2009 in the Office of the Judge of Probate of Jefferson County, Alabama, in Book LR200905 at Page 18907.

THIRD: The name of the Limited Liability Company has been changed to **Greenawalt Hospitality, LLC**, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the occurrence of the change of the name of the Limited Liability Company. Accordingly, section I of the Articles of Organization is hereby amended and restated as follows:

I. The name of the limited liability company shall be:

Greenawalt Hospitality, LLC (the "Company")

FOURTH: The purpose for which the Limited Liability Company is organized has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the purposes for which the Limited Liability Company is organized. Accordingly, section III of the Articles of Organization is hereby amended and restated as follows:

III. The purpose for which the limited liability company is organized is to provide comprehensive hospitality solutions for events and venues and all necessary things ancillary thereto including but not limited to engaging in and doing any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company can be organized in accordance with the laws of the State of Alabama, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FIFTH: The address of the principal place of business in Alabama and the address of the registered agent in Alabama has changed since the original filing of the Articles of Organization, and the undersigned sole member of the Limited Liability Company desires to file this First Amendment to Articles of Organization to reflect the new address of the principal place of business in Alabama and the address of the registered agent in Alabama. Accordingly, section IV of the Articles of Organization is hereby amended and restated as follows:

IV. A. The address of the principal place of business in Alabama for the Company is 209 Alabama Street, Auburn, Alabama 36830.

B. The name and address of the Company's registered agent in Alabama is Bobby T. Greenawalt, 209 Alabama Street, Auburn, Alabama 36830.

SIXTH: All other matters, terms and conditions of the Articles of Organization of the Limited Liability Company shall remain in full force and effect.

IN WITNESS WHEREOF, the undersigned sole member has executed and acknowledged this First Amendment to the Articles of Organization on this the 15th day of July, 2019.

Greenawalt Holdings, LLC, Sole Member


By: Bobby T. Greenawalt
Its: Manager

STATE OF ALABAMA
COUNTY OF LEE

I, a notary public, hereby certify that Bobby T. Greenawalt, whose name as manager of Greenawalt Holdings, LLC, the sole member of the above-referenced limited liability company is signed to this First Amendment to Articles of Organization, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he, as such manager, executed the same voluntarily and with full authority as the act of said limited liability company.

Given under my hand and official seal on this 15 day of July, 2019.



J. ALEX MUNCIE, III
NOTARY PUBLIC, ALABAMA
STATE AT LARGE
MY COMMISSION EXPIRES MARCH 1, 2021


Notary Public:
My commission expires: MARCH 01, 2021

Prepared by:
J. Alex Muncie III
MUNCIE & MATTSON, P.C.
987 Drew Lane
Auburn, Alabama 36830
(334) 821-7301

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Greenawalt Hospitality, LLC was formed in Jefferson County, Alabama on May 14, 2009. The Alabama Entity Identification number for this entity is 433-963. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210525000022266

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.


05/25/2021

Date

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594850 1/2
Bk: LR200905 Pg:16907
Jefferson County, Alabama
I certify this instrument filed on
05/14/2009 12:12:08 PM ING
Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION
OF
B&B Bartending, LLC**

The undersigned person hereby forms a limited liability company under the Alabama Limited Liability Company Act and adopts as the ARTICLES OF ORGANIZATION of such limited liability company the following:

- I. The name of the limited liability company shall be:

B&B Bartending, LLC
(the "Company")

- II. The period of its duration shall be perpetual.

- III. The purpose for which the limited liability company is organized:

To purchase, own, mortgage, market, manage, maintain, improve, rent, lease, sell or otherwise dispose of helicopters and provide transport therewith, wheresoever situated and to do all things necessary or convenient to accomplish said business and to further engage in any business permitted by the laws of the State of Alabama.

- IV. A. The address of the principal place of business in Alabama:

1216 Jefferson Blvd
Tarrant, AL 35217

- B. The name and address of the registered agent in Alabama:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

- V. The names and addresses of the initial members are:

MEMBER

ADDRESS

Bobby T. Greenawalt

1216 Jefferson Blvd
Tarrant, AL 35217

- VI. Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

- VII. Additional members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.
- VIII. The remaining Members of the Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company upon unanimous agreement and as provided in the Operating Agreement of the Company.
- IX. Management of the Company is reserved to the following initial Managing Member who shall serve until his successors are elected and shall qualify:

Bobby T. Greenawalt
1216 Jefferson Blvd
Tarrant, AL 35217

X. Other provisions:

- (1) The Company shall indemnify an individual made a party to a proceeding because he or she is or was a Member, officer, organizer, employee or agent of the Company against liability incurred in the proceeding if:
- (a) he conducted himself in good faith;
 - (b) he reasonably believed that his conduct was in or at least not opposed to the Company's best interest; and
 - (c) in the case of any criminal proceeding, he had no reasonable cause to believe his conduct was unlawful.
- (2) In addition to the foregoing, the Company shall indemnify and save the organizers harmless for all acts taken by them as organizers of the Company and shall pay all costs and expenses incurred by or imposed upon them as a result of the same, including compensation based upon the usual charges for any time expenditures required of them in pursuit of the defense against any liability arising on the account of acting as organizers or arising on the account of enforcing the indemnification right hereunder, and the Company releases them from all liability for any such act as organizers not involving willful or grossly negligent misconduct.

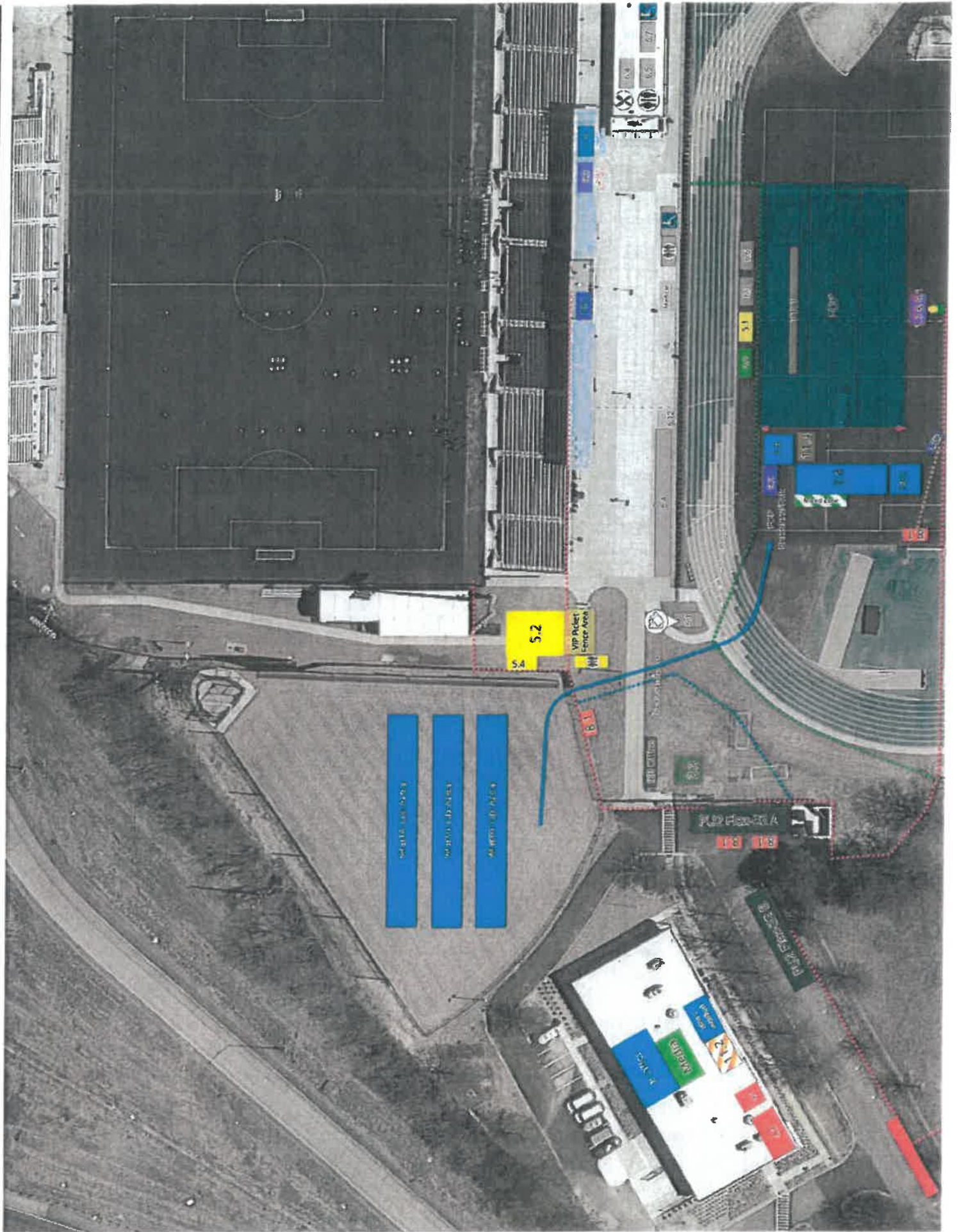
DATED: 5-14, 2009.

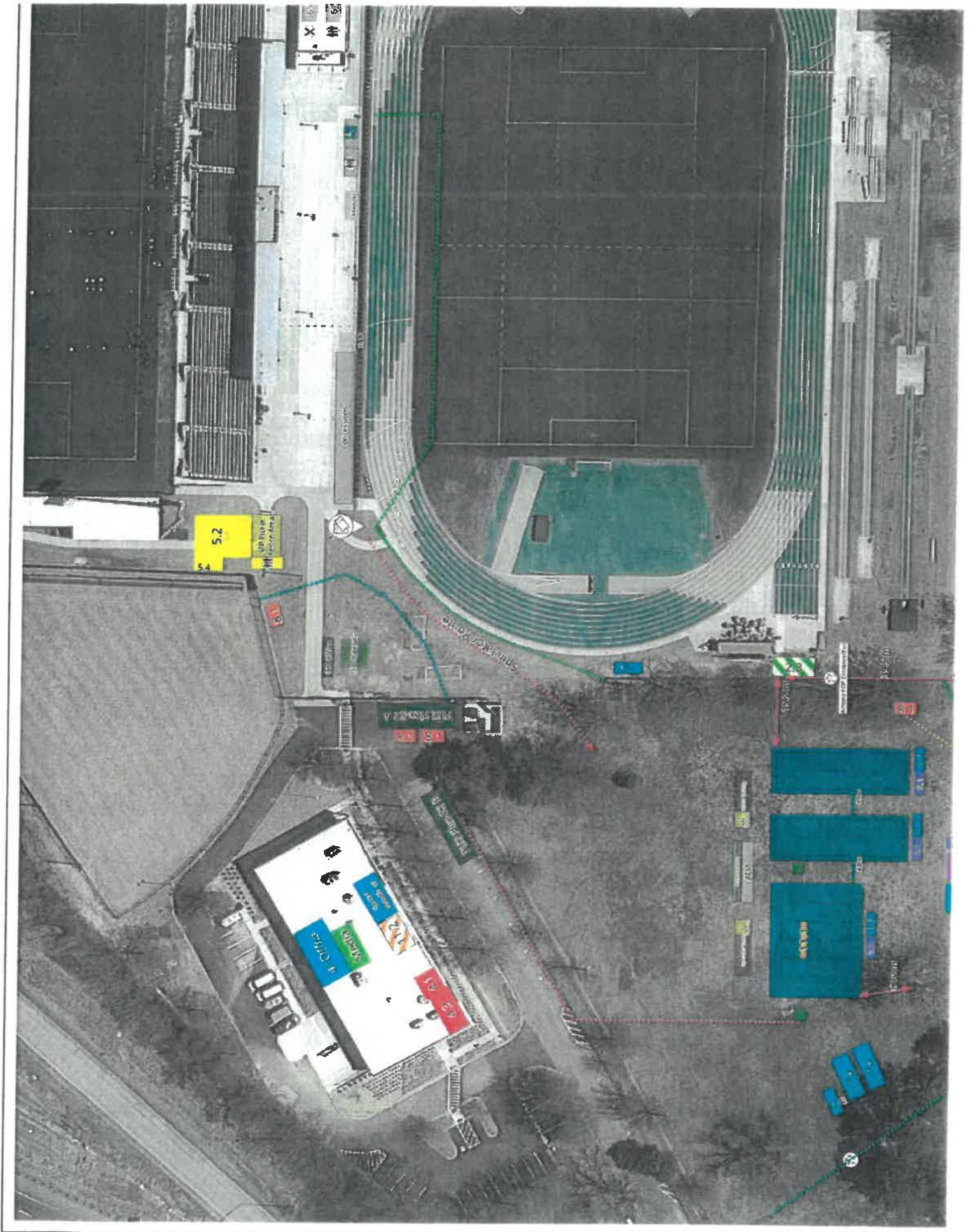
200905140009054050 2/2
Bk: LR200905 Pg: 18907
Jefferson County, Alabama
05/14/2009 12:12:08 PM INC
Fee - \$51.00

Total of Fees and Taxes-\$51.00
HATCHERK


BOBBY T. GREENAWALT







PARCEL ID: 012900013002002000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2021

DATE: Friday, June 3, 2022 10:59:49 AM

OWNER: UNIVERSITY OF AL- BIRMINGHAM

ADDRESS: AB 330 - 1530 3RD AVE S

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35294--0001

SITE ADDR: 1035 9TH AVE S

CITY/STATE: BHAM, AL

ZIP: 35205



LAND: \$2,819,100.00

BLDG: \$0.00

OTHER: \$0.00

AREA: 165,292.55

ACRES: 3.79

SUBDIVISION INFORMATION:

NAME

BLOCK:

LOT:

:

Section: 1-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Historic Building Area: In Historic Building Area

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Five Pts So (1701)

Communities: Southside (17)

Council Districts: District - 6 (Councilor: Crystal Smitherman)

Zoning Outline: B6

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

Public Safety Committee Meeting Agenda Submission Form

Date Submitted: June 1, 2022

For Meeting Date: June 14, 2022

Description of item as it should appear on agenda:

A Resolution approving payment to ACE American Life Insurance Company for renewal of lump sum and disability cancer benefits for eligible City of Birmingham Firefighters for a period of 12 months, commencing July 1, 2022 and ending June 30, 2023, in the amount of Eighty-One Thousand, Eight Hundred and Ten Dollars (\$81,810.00), as mandated by ACT 2019-361 (Alabama HB 360).

This item will be submitted to City Council on June 21, 2022.

Submitted by: Jill M. Madajczyk, Chief HR Officer

Department: Human Resources

Extension: 2306



ACE American Insurance Company
 (A stock Company)
 Philadelphia, PA 19106

Alabama Firefighter Cancer Insurance Application

Application is hereby made for a plan of Blanket Cancer Insurance based on the following statements and representations:

Policyholder (Full Legal Name): City of Birmingham

Street Address: 710 20th Street North, Suite 800

City, State, Zip: Birmingham, AL 35203

The terms and conditions of the requested plan of insurance may vary in certain states as required by the laws of those states. The terms of the policy when issued will govern. It is agreed the insurance applied for will not become effective unless: a) this Application is received and approved by the Insurance Company based on current rules and requirements; b) the Policy is accepted by the Applicant; and c) the required premium is paid when due.

Policy Number: PTP N17938289

Policy Effective Date: July 1, 2022

Policy Termination Date: July 1, 2023

Policy Term: July 1, 2022 to July 1, 2023

CLASSES OF ELIGIBLE PERSONS (elect all that apply):

- Class 1: All active Career Firefighters of the Policyholder
- Class 2: All Certified Volunteer Firefighters of the Policyholder
- Class 3: All Non-Certified Volunteer Firefighters of the Policyholder

A person may be insured only under one Class of Eligible Persons even though he or she may be eligible under more than one class.

DESCRIPTION OF COVERAGE (elect all that apply for the classes above):

Benefits:

- Lump Sum and Disability Cancer Benefits
 - Enhanced Covered Cancer Benefit
 - Cancer Death Benefit

Waiting Period:

- none
- 12 months

Premium: Class 1: \$81,810
Class 2: \$Not Applicable
Class 3: \$Not Applicable

Total Premium: \$81,810 per Policy Term

The Applicant represents the information contained in this application is true and correct and forms the basis of the requested insurance.

WARNING: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO RESTITUTION, FINES, OR CONFINEMENT IN PRISON, OR ANY COMBINATION THEREOF.

Signed for the Policyholder

Mayor

Title

5/25/2022

Date

Signed by Licensed Resident Agent
(Where Required by Law)

Public Safety Committee Meeting Agenda Submission Form

Date Submitted: June 1, 2022

For Meeting Date: June 14, 2022

Description of item as it should appear on agenda:

A Resolution authorizing a renewal agreement with Symetra Life Insurance Company for the provision of medical stop loss coverage, for a term of one (1) year, commencing July 1, 2022, and ending June 30, 2023, in the amount of One Million, Three Hundred Sixty-Six Thousand, Five Hundred Forty-Eight Dollars (\$1,366,548.00).

This item will be submitted to City Council on June 21, 2022.

Submitted by: Jill M. Madajczyk, Chief HR Officer

Department: Human Resources

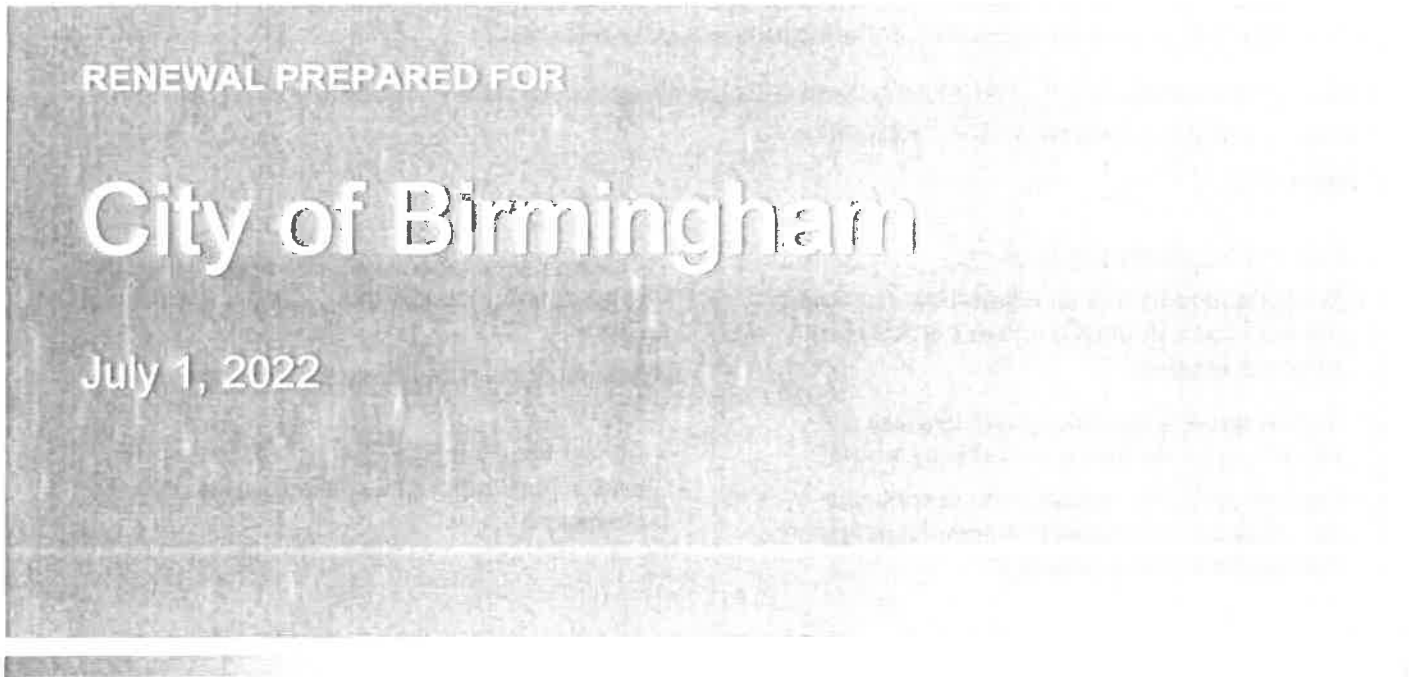
Extension: 2306

Stop Loss Renewal Summary - Symetra

- Lockton (healthcare consultant) requested quotes from 13 different carriers including the City's renewal with Symetra. Ten (10) of the 13 declined to quote.
- The request for quotes was released in early April as soon as March claims were made available. Markets normally require 10 months of data to release *firm* quotes (through April claims).
- COB's current coverage level includes a \$475K specific deductible and a \$100K aggregating specific deductible for active/retiree coverage, and one lasered member at \$1.5M.
- Despite upward trends and market challenges, Lockton was able to obtain a favorable renewal with Symetra, maintaining no new laser and rate cap provisions.
- Symetra's 2022-2023 Renewal (Option 2) includes a \$500K specific deductible and a \$100K aggregating specific deductible at an estimated annual cost of \$1,366,548.00 (\$31.14 per contract per month). This premium represents a 28% increase over last year's cost of \$1,064.77.
- Human Resources recommends Option 2 for approval.



Symetra Stop Loss



IN PARTNERSHIP WITH: LOCKTON COMPANIES LLC

You have challenges; we have solutions

We know you have options when choosing a stop loss carrier.

We also know that finding the right partner is important. You need to work with professionals who understand the self-funded industry, who realize the importance of building the right stop loss policy at the right price, and who deliver on their promises year after year.

When you renew with us, you'll find a seamless continuation of all the benefits you've come to expect from your Symetra stop loss policy.

Things like:

- **Fast and fair claims practices.**
- **Most catastrophic claims reviewed and processed within 24 hours through our Preferred ASO Claim Advance program.**
- **No new lasers or increase on existing lasers at renewal; laser at renewal available by request.**
- **Gapless option for renewal run-out contracts means claims paid outside the run-out period are still eligible for reimbursement.**
- **Cost containment and alternative treatment plans to help control costs without sacrificing quality of care.**
- **24/7 online policy administration via Group Online (GO).**
- **Access to Symetra Compliance Solutions for professional support navigating the health care landscape.**

Put our expertise to work for you

Symetra has been in the stop loss business for over 45 years.¹ In fact, we helped pioneer it. Our experienced team continues to be available as needed to help you understand and protect your self-funded plan.

2020 performance highlights:²



Most claims paid within 6 business days

Contract amendments average just 3 business days

Claims financial accuracy score

The average tenure of a Symetra stop loss client is five years, with approx. 300 clients that have been with us for 10 years or more (as of April 2020).

Understanding stop loss rates

Pricing stop loss is a complex process and there are many factors that impact rates, especially at renewal. Here are some things we consider when determining the best possible price for your plan:

- **Plan design:** what services are covered; how much are employee copays, coinsurance, deductibles and/or premiums; are there wellness or other value-add programs included?
- **Group population:** how many people are covered; where do members live and/or receive care; what are the demographics of the group?
- **Managed care networks:** are provider and hospital networks helping to lower plan risk; what is the network usage rate?
- **Claims experience:** what is the claims experience history; how many claims, to date, are over the Specific deductible; how many are expected before the end of the plan year?
- **Medical trend:** how much are health care costs projected to increase?
- **Share of risk:** what is your deductible threshold and risk tolerance; how will rising medical trend impact your plan and the accompanying stop loss policy?

What does a typical Symetra renewal look like? During the last five years:



Based on Symetra renewal data from August 1, 2015 to July 1, 2020.

Lowering premium renewal increases through deductible leveraging

Annual renewal is an opportunity to review how your plan performed over the past year, and to evaluate whether your current Specific deductible is still appropriate. This is especially true when rising medical costs are paired with higher than expected claims, as this combination typically means a rate adjustment is needed for the new plan year.

Leveraged trend or, as applied, deductible leveraging, can help mitigate higher renewal rates by sharing the impact of medical trend between the health plan and Symetra stop loss via a higher Specific deductible.

Here's how it works:

	Plan year 1	Plan year 2	Increase		Plan year 1	Plan year 2	Increase
Paid claim amount	\$300,000	\$330,000	10%	Paid claim amount	\$300,000	\$330,000	10%
Specific deductible	\$150,000	\$150,000	0%	Specific deductible	\$150,000	\$165,000	10%
Symetra reimbursement	\$150,000	\$180,000	20%	Symetra reimbursement	\$150,000	\$165,000	10%

For illustrative purposes only.

With deductible leveraging, you're trading lower premiums for a higher Specific deductible due to medical trend increases. It can be an effective way to help control the impact of rising costs on your plan.

If you're interested in deductible leveraging for your renewal, talk with your Symetra stop loss professional.

Renewal prepared for: City of Birmingham

Renewal Status: Firm if accepted by 05/13/2022

SPECIFIC STOP LOSS COVERAGE

COVERAGE	2021	2022	2023	2024
Coverages	Medical, Rx	Medical, Rx	Medical, Rx	Medical, Rx
Contract Type	Paid	48/12	48/12	48/12
Annual Specific Deductible per Individual	\$475,000	\$475,000	\$500,000	\$525,000
Except for				
Rembert, Antori	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Aggregating Specific Additional Plan Liability	\$100,000	\$100,000	\$100,000	\$100,000
Transplant Exclusion	No	No	No	No
No New Laser Option	Included	Included	Included	Included
Maximum Lifetime Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited
Maximum Policy Period Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited
Reimbursement Percentage	100%	100%	100%	100%
Quoted Rate(s) Per Month	Enrollment			
Composite	3,657	\$24.39	\$33.75	\$31.14
Estimated Annual Premium		\$1,070,331	\$1,481,085	\$1,366,548
Quoted Rate(s) include Commission of		5.00%	10.00%	10.00%

OVERALL COST SUMMARY

STOP LOSS COVERAGE	2021	2022	2023	2024
Estimated Total Annual Fixed Cost	\$1,070,331	\$1,481,085	\$1,366,548	\$1,292,384
Specific Variable	\$100,000	\$100,000	\$100,000	\$100,000
Estimated Maximum Annual Liability	\$1,170,331	\$1,581,085	\$1,466,548	\$1,392,384

OTHER OPTIONS

Rate cap option: Renewal rates are capped at a maximum increase of 50% assuming no material changes to the group plan have taken place (i.e. plan changes, changes in specific deductible, commission level or administrator). If there are material changes, first the specific rates will be produced using the rate cap, then material changes will be accounted for in order to arrive at the renewal rate level. The cap applies to both the rates and aggregating specific deductible (if applicable).

al prepared for: City of Birmingham

Renewal Status: Firm if accepted by 5/13/2022

PROPOSAL QUALIFICATIONS AND CONTINGENCIES

The terms of this proposal are based upon the policyholder having exercised commercially reasonable efforts to obtain and provide to Symetra all information set forth in this offer, together with all information identified in any prior proposal for coverage for the upcoming policy period. Except for the Plan Document or Plan Amendment, all requested information must be received no later than 15 days prior to the proposed effective date of coverage, otherwise we reserve the right to withdraw the proposed terms and return any premiums remitted.

Any secondary documents (i.e. "stop loss agreements", "procurement documents", "service contracts", etc.) must be disclosed to and approved by Symetra prior to the Employer's acceptance of our proposal. Subsequent undisclosed agreements may not be approved.

By delivering this proposal for coverage, the producer represents and warrants to Symetra that it and each of the persons or entities acting with or on behalf of the producer in the sale or solicitation of such coverage maintains such insurance producer licenses and appointments as are required by each state in which the coverage has been or will be solicited, and in all states in which the policy(ies) will be issued. This proposal is authorized for delivery only if the foregoing representation and warranty is true and correct.

This is a firm offer, which may be bound with no additional underwriting requirements provided that:

1. It is accepted in writing by the expiration date as shown above;
2. The policyholder has exercised commercially reasonable efforts to obtain and provide to Symetra all information requested in this proposal and any prior proposal for coverage for the upcoming policy period;
3. The data and information submitted to Symetra is, to the best of the policyholder's knowledge after due inquiry, materially accurate and materially complete as of the date of policyholder's written acceptance of this firm offer. Any material inaccuracies or material omissions in the data or other information submitted may require changes in underwriting, including but not limited to changes in the terms, rates and/or factors; and
4. The policyholder and its authorized agent agree that following acceptance of this firm offer, the policyholder or its authorized agent promptly notify Symetra upon becoming aware of any covered individual who (i) receives prior authorization approval for hospital confinement exceeding 30 days or more and/or (ii) becomes a listed transplant candidate, in each case so that Symetra can initiate appropriate cost containment efforts. For the avoidance of doubt, the provision of such notice pursuant to this item 4. will not change terms of the accepted offer.

If updated information is received by Symetra prior to written acceptance or the expiration date has passed, we retain the right to alter the terms, rates and/or factors. We will not be bound by any typographical errors or omissions contained herein.

- Renewal is Firm. Please qualify for updated information on Antori Rembert and we will re visit our laser.
- Any unfunded or pended claims balance must be disclosed, otherwise such claims will not be considered eligible under the excess loss policy.
- For inclusion of RX coverage under the specific and/or aggregate when there is a separate PBM, we require written documentation that we are in receipt of all prescription drug experience reports. Otherwise, RX will not be a covered expense under the excess loss policy.
- This renewal/proposal reflects the continuation of the current plan of benefits.
- Terms are subject to change if final enrollment varies by more than 10% from the proposal assumptions. A current census not older than 60 days prior to the effective date will be needed for final review.
- Eligibility is assumed to be all full time employees working 30 hours or more per week at their normal place of business.
- COBRA participation is limited to no more than 10% of the enrolled group.
- Network fees are ineligible expenses.
- Symetra reserves the right to revise this proposal if the incumbent administrator's claims backlog exceeds two weeks.
- In the event of early terminations (mid-policy period), Symetra will not provide coverage for run out claims.
- The producer must be properly licensed and appointed.
- No producer has the authority to bind or modify the terms of this offer without the approval of Symetra.
- The administrator must be approved by Symetra.
- This quote is subject to Symetra's stop loss policy provisions, limitations and exclusions.
- This quote/renewal excludes state assessment fees and is based on the group (through its TPA) collecting any such fee assessed with respect to the group's self-insured benefit plan and remitting such fee to the state on the group's

Renewal prepared for: City of Birmingham

Renewal Status: Firm if accepted by 05/13/2022

behalf. The group may be required to notify their TPA of any covered residents that would fall under an assessment program. Symetra's quote excludes coverage of such fees. In the event Symetra is required to be involved in the administration or collection of an assessment fee on the group's behalf, the assessment fee will be charged to and collected monthly from the group pursuant to the Premium Taxes and State Assessments provision of the Stop Loss Insurance Policy.

- This proposal is based upon the following network(s): Blues ASO
- These rates and factors reflect the assumption that all retirees over age 65 are Medicare Primary. It is assumed that all retirees known at the time of quote were listed and identified on the census.
- Plan must have utilization review and case management.
- There will be no new lasers at renewal.

Renewal prepared for: City of Birmingham

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Check the box next to the selected proposal option; for Specific only coverage, when both Specific and Aggregate coverages are listed, please also check the box to decline Aggregate coverage.

Option	Specific	Aggregate
<input type="checkbox"/> 1	\$475,000 / 48/12	
<input checked="" type="checkbox"/> 2	\$500,000 / 48/12	
<input type="checkbox"/> 3	\$525,000 / 48/12	

This is a firm offer, which may be bound with no additional underwriting requirements provided it is accepted in writing by the expiration date as shown above. The Premium, Aggregate Deductibles and all other terms are based on the data submitted. Any inaccurate or incomplete data submitted may require changes in underwriting. If updated information is received by Symetra prior to written acceptance or the expiration date has passed, we retain the right to alter the terms, rates and/or factors. We will not be bound by any typographical errors or omissions contained herein.

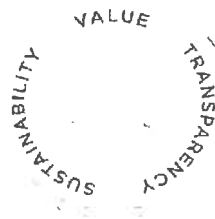
Please indicated your acceptance on this offer by having an authorized representative or agent of City of Birmingham sign below:

Authorized Signature:		Date:	5/25/2022
Printed Name:	Randall L. Woodfin	Printed Title:	Mayor
Company or Firm Name:	City of Birmingham		

Your partner for stop loss success

Symetra is a financially strong, well-capitalized company on the rise, as symbolized by our brand icon—the swift. Swifts are quick, hardworking and nimble—everything we aspire to be when serving our customers.

We've been in business for more than half a century with a commitment to creating employee benefit products that people need and understand. We appreciate your business and look forward to the opportunity to continue serving you with professional, informative and responsive service.



Our guiding principles of Value, Transparency and Sustainability (VTS) are at the core of all we do.

- **Value:** Products and solutions people need at a competitive price—backed by outstanding customer service.
- **Transparency:** Clear communication so people understand what they are buying.
- **Sustainability:** Products that stand the test of time and fiscal responsibility to ensure we are there for our customers.

Financial Strength Ratings: A.M. Best: A "Excellent" (3rd highest of 16); Moody's A1 "Good" (5th highest of 21); Standard & Poor's: A "Strong" (6th highest of 21). Ratings are subject to change. Please refer to www.symetra.com/ratings for current information. Ratings as of July 23, 2021.

Symetra Life Insurance Company (est. 1957) is a direct subsidiary of Symetra Financial Corporation. First Symetra National Life Insurance Company of New York (est. 1990) is a direct subsidiary of Symetra Life Insurance Company and is an indirect subsidiary of Symetra Financial Corporation (collectively, "Symetra"). Neither Symetra Financial Corporation nor Symetra Life Insurance Company solicits business in the state of New York and they are not authorized to do so. Each company is responsible for its own financial obligations.

Stop loss policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004. Base policies are ELC-24000 7/19 or LGC-12000 9/06, filed as Excess Loss. In New York, stop loss policies are insured by First Symetra National Life Insurance Company of New York, New York, NY. Mailing address: P.O. Box 34690, Seattle, WA 98124. Policy form numbers are ELC-24000/NY 7/19 or LGC-12000/NY 9/08, filed as Excess Loss. Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. Products are not available in any U.S. territory.

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¹45 years for Symetra Life Insurance Company; 17 years for First Symetra National Life Insurance Company of New York as of 2021.

² Performance highlights based on financial and quarterly audits for 2020.



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