



**BIRMINGHAM
CITY COUNCIL**

**PUBLIC SAFETY COMMITTEE MEETING
TUESDAY, JUNE 28, 2022
1 P.M. – CITY COUNCIL CHAMBERS
COUNCILOR LATONYA A. TATE CHAIRMAN**

AGENDA

A. CALL TO ORDER

B. APPROVAL OF MINUTES – June 14, 2022

C. LIQUOR LICENSES

1. 1102 – **NEW APPLICATION**
2. 12th Ave Chevron – **NEW APPLICATION**
3. Avenue D Events - **NEW APPLICATION**
4. Bar La Fete – **NEW APPLICATION**
5. Bosses Private Lounge – **NEW APPLICATION**
6. Crab Barrack – **NEW APPLICATION**
7. Graymont Food – **TRANSFER**
8. Hood Quick Mart – **TRANSFER**
9. Ikko Ramen & Sushi - **TRANSFER**
10. Slice Pizza and Brew – **NEW APPLICATION**

D. SPECIAL EVENTS LICENSES

11. Taste of 4th Avenue Jazz Festival – **NEW APPLICATION**
12. Birmingham Artwalk – **NEW APPLICATION**
13. Civil Rights District Marketplace – **NEW APPLICATION**

E. RESOLUTION

F. ADJOURNMENT

LIQUOR LICENSES

<p>1. 1102 301 Rev Abraham Woods Jr Blvd N Kariba Bush</p>	<p>Lounge Retail Liquor Class I 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. 12th Ave Chevron 3013 12th Ave North Nagib Saleh</p>	<p>Beer Off Premise Wine Off Premise 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. 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>4. 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>5. Bosses Private Lounge 201 Richard Arrington Jr. Blvd S Angela Gooden</p>	<p>Club Liquor Class II 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>6. Crab Barrack 1108 20th Street South LaSandra Hall</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>7. 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>8. Hood Quick Mart 213 Dugan Ave Pratt City, Suite A Lynette Peters</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>9. Ikko Ramen & Sushi 1909 11th Avenue South Mei Lu</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>10. Slice Pizza & Brew 1101 Dunston Avenue Denise Koch</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>

SPECIAL EVENTS

<p>11. Taste of 4th Avenue Jazz Festival 4th Ave North between 16th Street North and 18th Street North Carla Youngblood</p> <p>Event Date: 8/27/22</p>	<p>Special Retail Liquor (under 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>12. Birmingham Artwalk 20th Street North from 1st Ave North to 4th Ave North & Forstall Parking Lot Denise Koch</p> <p>Event Date: 9/9 – 9/10/22</p>	<p>Special Retail Liquor (under 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>13. Civil Rights District Marketplace 16th Street N/5th Ave North - Kelly Ingram Park Kellie Solomon</p> <p>Event Date: 7/7 – 7/17/22</p>	<p>Special Retail Liquor (under 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>



JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING
TUESDAY, JUNE 14, 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 24, 2022

Action Taken:

Councilor Smitherman Motioned to Approve.

Councilor Tate Seconded the Motion.

The May 24, 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

There were no incidents reported for this location.

The location meets Zoning requirements.

There are no tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

Avenue D Events

3008 4th Ave South

Contact: Jonathan Meador

Special Retail License (over 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Delay.

Councilor Tate Seconded the Motion.

The Item was Delayed for two (2) weeks (next Joint Public Safety and Special Called Committee of the Whole Meeting).

Bar La Fete

2212 Morris Ave Suite 201

Contact: Victor King

MINUTES

Restaurant Retail Liquor/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Delay.

Councilor Tate Seconded the Motion.

The Item was Delayed for two (2) weeks (next Joint Public Safety and Special Called Committee of the Whole Meeting.

Gifts of Love Banquet Hall

1343 Bessemer Road

Contact: Pamela Tubbs

Special Retail License (over 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

Graymont Food

541 Graymont Ave West

Contact: Lynette Peters

Beer Off Premise/Wine Off Premise/TRANSFER

Action Taken:

Councilor Smitherman Motioned to Delay.

Councilor Tate Seconded the Motion.

The Item was Delayed for two (2) weeks (next Joint Public Safety and Special Called Committee of the Whole Meeting.

Iron City Birmingham

513 22nd Street South

Contact: Brooke Garrison

Special Retail License (over 30 days)/TRANSFER

There was one incident reported for this location.

The location has a ZBA action from 2012 and dumpster, fencing, and striping.

The applicant will complete the dumpster and fencing issues.

There are no tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Delay.

Councilor Tate Seconded the Motion.

The Item was Delayed for two (2) weeks (next Joint Public Safety and Special Called Committee of the Whole Meeting.

Railroad Park

1600 1st Avenue South

Contact: Bernadine Birdsong

Special Retail License (over 30 days)NEW APPLICATION

There were no incidents reported for this location.

The location meets Zoning requirements.

There are no tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

MINUTES

Residence Inn by Marriot

821 20th Street South

Contact: Melinda Sellers

Beer Off Premise/Wine Off Premise/TRANSFER

There were seven (7) incidents reported for this location.

The location meets Zoning requirements.

There are no tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

The Spun Cow

2900 7th Ave South, Apt 420

Contact: Javier Grijava

Restaurant Retail Liquor/NEW APPLICATION

There were no incidents reported for this location.

The location meets Zoning requirements.

There are no tax delinquencies.

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

D. SPECIAL EVENTS LICENSES

TWG Avondale Park

4101 5th Ave South

Contact: Jonathan Meador

Event Date: 7/7 – 7/17/22

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

TWG BSC Berylson Soccer Park

900 Arkadelphia Road

Contact: Jonathan Meador

Event Date: 7/7 – 7/17/22

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

TWG Bill Battle Coliseum

801 Bruno Drive

Contact: Johnathan Meador

Event Date: 7/7 – 7/17/22

MINUTES

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

TWG John Carroll High School

300 Lakeshore Parkway

Contact: Jonathan Meador

Event Date: 7/7 – 7/17/22

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

TWG Powell Steam Plant

1800 Powell Avenue South

Contact: Jonathan Meador

Event Date: 7/7 – 7/17/22

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

TWG UAB PNC Field

800 11th Street South

Contact: Jonathan Meador

Event Date: 7/7 – 7/17/22

Special Retail Liquor (under 30 days)/NEW APPLICATION

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

E. RESOLUTION

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).

Submitted by: Human Resources

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent 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).

MINUTES

Submitted by: Human Resources

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

A Resolution approving and authorizing the Mayor to apply, accept and expend grant funds on behalf of the City of Birmingham in the amount of \$401,268.00 with the Alabama Law Enforcement Agency (ALEA) Homeland Security Grant Program to support the purchase of cyber security software and electronics equipment for the World Games. Said Funds shall be appropriated to the Birmingham Police Department. This grant requires no matching funds from the City and authorizes the Mayor to take any and all actions and execute such documents as are appropriate and necessary to accept and expend the grant funds on behalf of the City for use by the Birmingham Police Department in accordance with terms of the grant.

Submitted by: Grants Division

Action Taken:

Councilor Smitherman Motioned to Approve the Item.

Councilor Tate Seconded the Motion.

The Item was Recommended to the City Council Consent Agenda.

F. **ADJOURNMENT**

Councilor Smitherman Motioned to Adjourn.

Councilor Tate Seconded the Motion.

The Meeting was Adjourned.

Neighborhood Voting Form: Liquor Applications

Date: 6/6/2022

Application Type:

Subject: Applicant's Entity Name KJB Group LLC
Business Name 1102
Business Address 301 Rev Abraham Woods Jr Blvd N

Type of License/Permit Applying For:

- | | |
|--|--|
| <input checked="" 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 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 Smithfield Neighborhood Association met on 6-9-22 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)

16 Attendance 3 Oppose Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting

did not attend NA meeting

[Signature]
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.

6/24/2022

10:53

Mr. Bush

Lounge Retail Liq – Class I On/Off Prem Type 010

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

Name of Applicant: KJB Group LLC

Mailing Address: 6001 Enclave PL
Trussville, AL 35173

Trade Name: 1102

Location Address: 301 Rev Abraham Woods Jr Blvd N

Contact Number: (404)702-1064

Contact Person:
Kariba Bush

New Application

Transfer

Type of License

- | | |
|--|--|
| <input checked="" 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 type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input checked="" 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: **15TBS/60CHS**

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

LOUNGE RETAIL LIQ-CLASS I ON/OFF PREM TYPE 010

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) KJB Group 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>775037</u> Kariba Jomoa Bush	Member	<u>01/20/73</u> Atlanta, GA	6001 Enclave PL Trussville, AL 35173	4 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 019-314 Page: 1 of 2 Date: 5/11/2022 County: Jefferson

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

3. Trade Name 1102

4(a) Location 301 Rev Abraham Woods Jr Blvd N
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: **6001 Enclave PL Trussville, AL 35173**

(d) Business Phone _____ Fax: _____ Other Contact: **(404) 702-1064**

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 Kariba Bush
6001 Enclave PL Trussville, AL 35173
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? **15TBS/60CHS**

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 6th day of JUNE, 2022

Karla Bush
Signature of Affiant

Gregory Stanley
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:
Lounge Retail Lic - Class I

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: KJB Group LLC
Attention: _____
Address: 6001 Enclave PL
City: Birmingham State: AL Zip Code: 35204
Area Code and Phone Number: (404)702-1064
Area Code and Fax Number: _____
Name of Contact Person: Kariba Bush
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): 1102
Attention: _____
Address: 301 Rev Abraham Woods Jr Blvd N
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)
- 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) **Lounge/Bar**
- 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: Lounge/Bar Product: Alcohol/Div I Dance

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 86-1423610 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.

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.)**
Location

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 _____

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

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.)**
Location

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 _____

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

DANCE APPLICATION

(DIV I, DIV II & DIV III)

6/6/2022
DATE

Chief of Police
City of Birmingham
Birmingham, Alabama

I, KJB Group LLC (Name of Applicant) 01/20/73 (D.O.B.) B (Race)
respectfully represent that I am a resident citizen of Alabama, residing at

6001 Enclave PL (Street Address) Trussville (City) 404-702-1 (Telephone)

and as operator of 1102 (Name of Business)

301 Rev Abraham Woods Jr Blvd N (Street Address) 404-702-1064 Telephone

in the City of Birmingham, Alabama, request that I be granted to allow

Division I (Division I) Division II (Division II) Division III (Division III)

dancing at such place of business under and in accordance with the provisions of (Title 12, Article B, Vol. II of the General Code of the City of Birmingham, Alabama 1980) as amended, regulating the same. I have paid the fee of _____ to cover the

cost of investigation. The size of the dance area is 20x10 square feet (\$25 or \$500)

and is located as described in the drawing on the reverse side of this application. I presently hold a Applying for Lounge Retail Liquor (Type of Alabama A.B.C. Board License)

At this place of business in the name of _____ (Person, Firm or Corp. Holding License)

The name of the person in control of the premises and under whose supervision dancing will be conducted is Kariba Bush

\$25.00 for Division I, \$50.00 for Division II Birmingham Police Department Background Investigation Form will be completed.



Kariba Bush

6001 Enclave Pl.

Trussville, Al 35173 (4 years)

SS# [REDACTED]

Place of Birth. Atlanta, Ga

This Instrument Was Prepared By:
Rodney S. Parker, Attorney at Law
300 Vestavia Parkway, Suite 2300
Birmingham, AL 35216
File No. 2017-10-5470

County Division Code: AL039
Inst. # 2017123312 Pages: 1 of 1
I certify this instrument filed on
12/4/2017 10:58 AM Doc: D
Alan L. King, Judge of Probate
Jefferson County, AL. Rec: \$16.00
DeedTx: \$20.00
Clerk: ALLDREDGEM

Send Tax Notice To:
Kariba Bush
301 Reverend Abraham Woods Jr
Birmingham, AL 35204

Documentary Evidence: Sales Contract

(Grantees' Mailing Address)

WARRANTY DEED

STATE OF ALABAMA)
COUNTY OF JEFFERSON)

16
20
36

KNOW ALL MEN BY THESE PRESENTS:

That in consideration of **Twenty Thousand and 00/100 Dollars (\$20,000.00)**, which is the total purchase price, in hand paid to the undersigned Grantor(s) herein, the receipt and sufficiency of which are hereby acknowledge, I, **Ernestine Mack Marshall**, an unmarried individual, (hereinafter referred to as "Grantor") do by these presents grant, bargain, sell, and convey unto **Kariba Bush**, (hereinafter referred to as "Grantee"), the following described real estate situated in **Jefferson County, Alabama**, to-wit:

The North 80 feet of Lots 7 and 8, Block 27, Smithfield, as recorded in Map Book 1, page 149, in the Office of the Judge of Probate of Jefferson County, Alabama.

SUBJECT TO: Taxes for the current year and all subsequent years, all covenants, restrictions, conditions, encumbrances, easements, rights of way, set back lines, liens and other rights, if any, of record and not of record.

TO HAVE AND TO HOLD unto said Grantee.

Grantor does, for himself/herself, his/her heirs, successors, executors, administrators, personal representatives and assigns, covenant with Grantee, his/her heirs and assigns, that Grantor is lawfully seized in fee simple of said premises; that he/she is free from all encumbrances, unless otherwise noted above; that Grantor does have good right to sell and convey the same as aforesaid; and that Grantor will and his/her heirs, successors, executors, administrators, personal representatives and assigns shall warrant and defend the same to Grantee, his/her heirs and assigns forever, against the lawful claims of all persons.


IN WITNESS WHEREOF, the said Grantor has set his/her hand and seal, this 30th day of November, 2017.
Ernestine Mack Marshall by and through her

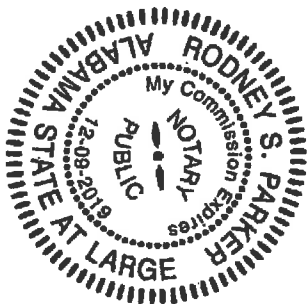
STATE OF ALABAMA
COUNTY OF SHELBY

Ernestine Mack Marshall
Ernestine Mack Marshall by and through her
Attorney in Fact Rodney Alan Marshall
(Seal)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that Rodney Alan Marshall, whose name as Attorney in Fact for Ernestine Mack Marshall, an unmarried individual, is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this date that, being informed of the contents of said conveyance, he as such Attorney in Fact and with full authority, executed the same voluntarily for and as the act of Ernestine Mack Marshall on the date the same bears date.

Given under my hand and official seal, this 30th day of November, 2017.


Notary Public Rodney S. Parker
My Commission Expires: 12/09/2019



Grantors' Mailing Address:
1310th Ave. NE West
Birmingham, AL 35204

Date of this notice: 01-13-2021

Employer Identification Number:
86-1423610

Form: SS-4

Number of this notice: CP 575 B

KJB GROUP LLC
KJB GROUP
% KARIBA BUSH MBR
6001 ENCLAVE PL
TRUSSVILLE, AL 35173

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 86-1423610. 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.

When filing tax documents, payments, and 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.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

03/15/2022

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

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.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

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

Thank you for your cooperation.

Keep this part for your records.

CP 575 B (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 B

9999999999

Your Telephone Number Best Time to Call
() -

DATE OF THIS NOTICE: 01-13-2021
EMPLOYER IDENTIFICATION NUMBER: 86-1423610
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023
|||

KJB GROUP LLC
KJB GROUP
% KARIBA BUSH MBR
6001 ENCLAVE PL
TRUSSVILLE, AL 35173

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:

KJB GROUP 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): Kariba J Bush

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

301 Reverend Abaraham Woods Jr BLVD Trussville, AL 35173

COUNTY of above address: JEFFERSON

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

6001 Enclave Pl. Trussville, AL 35173 SAINT CLAIR

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
001-019-314 DLL
Date 05/11/2022
Time 12:08:00
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 5 / 12 / 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 0 : 0 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).

5 / 11 / 2022
Date (MM/DD/YYYY)

Kariba Bush
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:

KJB GROUP LLC

This name reservation is for the exclusive use of Kariba Bush, 6001 Enclave Pl., Trussville, AL 35173 for a period of one year beginning May 11, 2022 and expiring May 11, 2023



RES022273

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.

May 11, 2022

Date

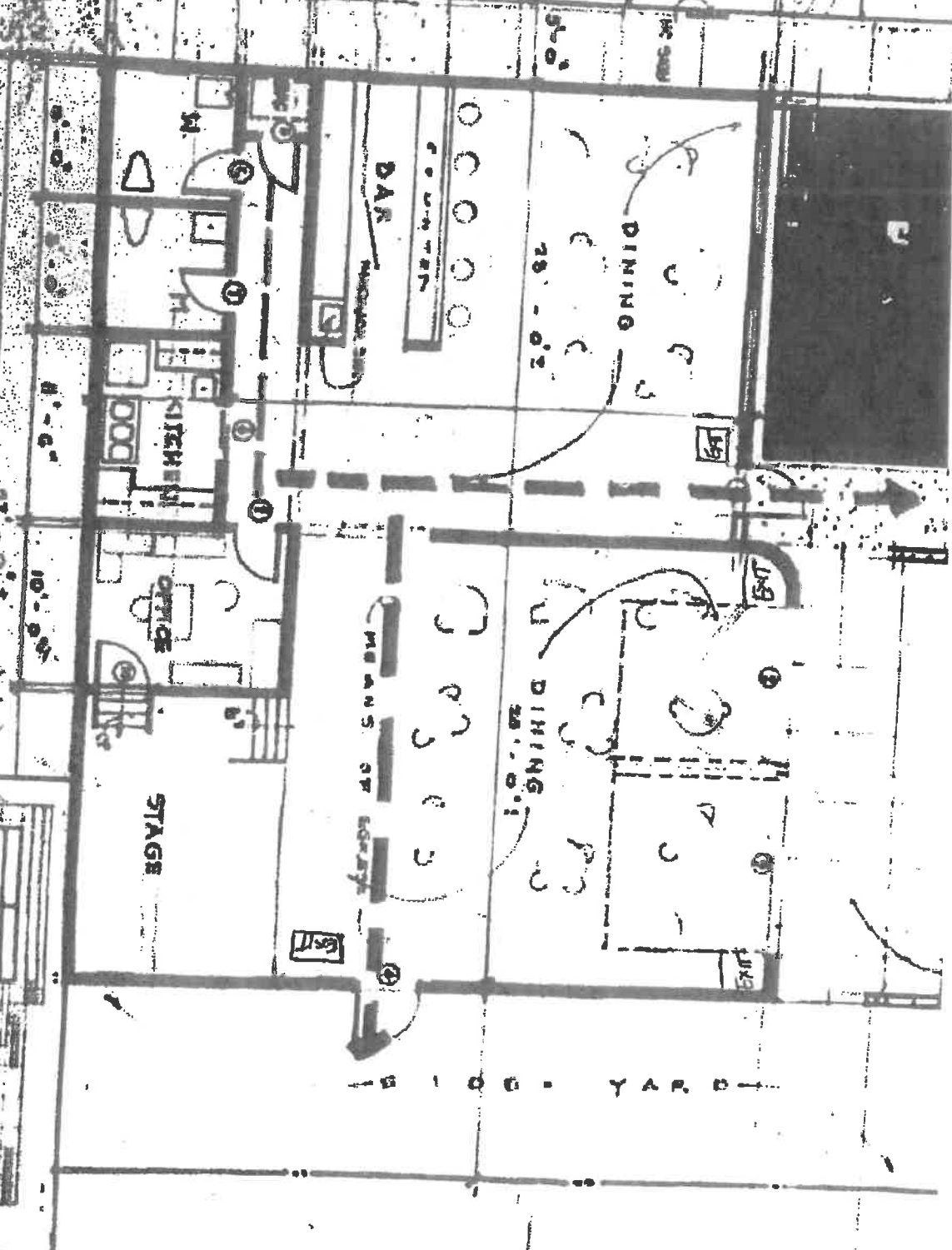
John H. Merrill

Secretary of State

FLOOR PLAN

SCALE: 1/4" = 1'-0"

REV ABOVE ROOMS BY D. REV



KARIBA

Kariba Bush
404-702-1064

NO. 1	DATE
NO. 2	DATE
NO. 3	DATE
NO. 4	DATE
NO. 5	DATE

PARCEL ID: 012200344001001000

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

DATE: Monday, June 6, 2022 9:21:48 AM

OWNER: BUSH KARIBA

ADDRESS: 6001 ENCLAVE PLACE

CITY/STATE: TRUSSVILLE AL

ZIP+4: 35173

SITE ADDR: 301 REV ABRAHAM WOODS JR BLVD

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$14,000.00

BLDG: \$23,100.00

OTHER: \$0.00

AREA: 7,885.81

ACRES: 0.18

SUBDIVISION INFORMATION:

NAME SMITHFIELD (SOUTH)

BLOCK: 27

LOT: 7&8

:

Section: 34-17-3W
Land Slide Zones: Not in Land Slide Zones
Historic Districts: Smithfield
Commercial Revitalization District: 8th Avenue North
Fire District: Not in Fire District
Flood Zones: Not in Flood Zones
Tax Increment Financing District: Not in Tax Increment Financing District
Neighborhoods: Smithfield (1605)
Communities: Smithfield (16)
Council Districts: District - 5 (Councilor: Darrell O'Quinn)
Zoning Outline: B2
Demolition Quadrants: DEM Quadrant - 3
Impaired Watersheds: Not in Impaired Watersheds
Strategic Opportunity Area: 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.

Lounge Retail Liq – Class I On/Off Prem Type 010

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

Name of Applicant: KJB Group LLC

Mailing Address: 6001 Enclave PL
Trussville, AL 35173

Trade Name: 1102

Location Address: 301 Rev Abraham Woods Jr Blvd N

Contact Number: (404)702-1064

Contact Person:
Kariba Bush

New Application

Transfer

Type of License

- | | |
|--|--|
| <input checked="" 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 type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input checked="" 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: **15TBS/60CHS**

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

LOUNGE RETAIL LIQ-CLASS I ON/OFF PREM TYPE 010

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) KJB Group 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] ALDL# [REDACTED] Kariba Jomoa Bush	Member	[REDACTED] Atlanta, GA	6001 Enclave PL Trussville, AL 35173	4 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 019-314 Page: 1 of 2 Date: 5/11/2022 County: Jefferson

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

3. Trade Name 1102

4(a) Location 301 Rev Abraham Woods Jr Blvd N
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: **6001 Enclave PL Trussville, AL 35173**

(d) Business Phone _____ Fax: _____ Other Contact: **(404)702-1064**

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 Kariba Bush
6001 Enclave PL Trussville, AL 35173
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? **15TBS/60CHS**

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
No - Applicant				

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 6th day of JUNE, 2022

Karla Busch
Signature of Affiant

Emily Stanley
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:
Lounge Retail Lic - Class I

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: KJB Group LLC
Attention: _____
Address: 6001 Enclave PL
City: Birmingham State: AL Zip Code: 35204
Area Code and Phone Number: (404)702-1064
Area Code and Fax Number: _____
Name of Contact Person: Kariba Bush
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): 1102
Attention: _____
Address: 301 Rev Abraham Woods Jr Blvd N
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)
- 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) **Lounge/Bar**
- 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: Lounge/Bar Product: Alcohol/Div I Dance

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 86-1423610 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.

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.)**

Location

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 _____

<p>ZONING APPROVAL AND COMMENTS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE</p>	<p>SIC OR NAICS _____</p> <p>BLIC _____</p> <p>TERRITORY _____</p> <p>ANNEX _____</p> <p>HEALTH DEPT PERMIT _____</p> <p>OTHER REQUIRED PERMIT _____</p> <p>ARTICLES OF INCORPORATION _____</p> <p>CERTIFICATE OF AUTHORITY _____</p> <p>TAX FORMS ORDERED <input type="checkbox"/> NBL ORDERED <input type="checkbox"/></p>
---	---

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.)**

Location

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 _____

<p>ZONING APPROVAL AND COMMENTS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE</p>	<p>SIC OR NAICS _____</p> <p>BLIC _____</p> <p>TERRITORY _____</p> <p>ANNEX _____</p> <p>HEALTH DEPT PERMIT _____</p> <p>OTHER REQUIRED PERMIT _____</p> <p>ARTICLES OF INCORPORATION _____</p> <p>CERTIFICATE OF AUTHORITY _____</p> <p>TAX FORMS ORDERED <input type="checkbox"/> NBL ORDERED <input type="checkbox"/></p>
---	---

DANCE APPLICATION

DIV I, DIV II & DIV III)

6/6/2022

DATE

Chief of Police
City of Birmingham
Birmingham, Alabama

I, KJB Group LLC 01/20/73 B
(Name of Applicant) (D.O.B.) (Race)
respectfully represent that I am a resident citizen of Alabama, residing at

6001 Enclave PL Trussville 404-702-1
(Street Address) (City) (Telephone)

and as operator of 1102
(Name of Business)

301 Rev Abraham Woods Jr Blvd N 404-702-1064
(Street Address) Telephone)

in the City of Birmingham, Alabama, request that I be granted to allow

Division I
(Division I) (Division II) (Division III)

dancing at such place of business under and in accordance with the provisions of (Title 12, Article B, Vol. II of the General Code of the City of Birmingham, Alabama 1980) as amended, regulating the same. I have paid the fee of _____ to cover the
(\$25 or \$500)

cost of investigation. The size of the dance area is 20x10 square feet

and is located as described in the drawing on the reverse side of this application I presently hold a Applying for Lounge Retail Liquor
(Type of Alabama A.B.C. Board License)

At this place of business in the name of _____
(Person, Firm or Corp. Holding License)

The name of the person in control of the premises and under whose supervision dancing will be conducted is Kariba Bush

\$25.00 for Division I, \$50.00 for Division II Birmingham Police Department Background Investigation Form will be completed.

Kariba Bush

6001 Enclave Pl.

Trussville, Al 35173 (4 years)

SS#

[REDACTED]

Place of Birth. Atlanta, Ga

This Instrument Was Prepared By:

**Rodney S. Parker, Attorney at Law
300 Vestavia Parkway, Suite 2300
Birmingham, AL 35216
File No. 2017-10-5470**

Documentary Evidence: Sales Contract

County Division Code: AL039
Inst. # 2017123312 Pages: 1 of 1
I certify this instrument filed on
12/4/2017 10:58 AM Doc: D
Alan L. King, Judge of Probate
Jefferson County, AL. Rec: \$16.00
DeedTx: \$20.00
Clerk: ALLDREDGEM

Send Tax Notice To:

**Kariba Bush
301 Reverend Abraham Woods Jr
Birmingham, AL 35204**

(Grantees' Mailing Address)

WARRANTY DEED

STATE OF ALABAMA)
COUNTY OF JEFFERSON)

16
20
56

KNOW ALL MEN BY THESE PRESENTS:

That in consideration of **Twenty Thousand and 00/100 Dollars (\$20,000.00)**, which is the total purchase price, in hand paid to the undersigned Grantor(s) herein, the receipt and sufficiency of which are hereby acknowledge, I, **Ernestine Mack Marshall**, an unmarried individual, (hereinafter referred to as "Grantor") do by these presents grant, bargain, sell, and convey unto **Kariba Bush**, (hereinafter referred to as "Grantee"), the following described real estate situated in **Jefferson County, Alabama**, to-wit:

The North 80 feet of Lots 7 and 8, Block 27, Smithfield, as recorded in Map Book 1, page 149, in the Office of the Judge of Probate of Jefferson County, Alabama.

SUBJECT TO: Taxes for the current year and all subsequent years, all covenants, restrictions, conditions, encumbrances, easements, rights of way, set back lines, liens and other rights, if any, of record and not of record.

TO HAVE AND TO HOLD unto said Grantee.

Grantor does, for himself/herself, his/her heirs, successors, executors, administrators, personal representatives and assigns, covenant with Grantee, his/her heirs and assigns, that Grantor is lawfully seized in fee simple of said premises; that he/she is free from all encumbrances, unless otherwise noted above; that Grantor does have good right to sell and convey the same as aforesaid; and that Grantor will and his/her heirs, successors, executors, administrators, personal representatives and assigns shall warrant and defend the same to Grantee, his/her heirs and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, the said Grantor has set his/her hand and seal, this 30th day of November, 2017.

Ernestine Mack Marshall by and through her

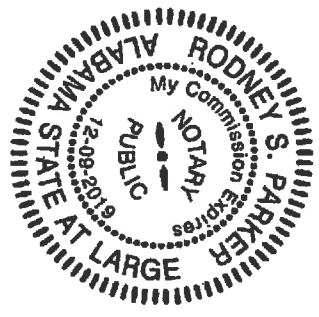
STATE OF ALABAMA
COUNTY OF SHELBY

Ernestine Mack Marshall
Ernestine Mack Marshall by and through her
Attorney in Fact Rodney Alan Marshall
(Seal)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that Rodney Alan Marshall, whose name as Attorney in Fact for Ernestine Mack Marshall, an unmarried individual, is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this date that, being informed of the contents of said conveyance, and who is Fact and with full authority, executed the same voluntarily for and as the act of Ernestine Mack Marshall on the date the same bears date.

Given under my hand and official seal, this 30th day of November, 2017.

[Signature]
Notary Public Rodney S. Parker
My Commission Expires: 12/09/2019



Grantors' Mailing Address:
1310TH AVE NE West
Birmingham, AL 35204

Date of this notice: 01-13-2021

Employer Identification Number:
86-1423610

Form: SS-4

Number of this notice: CP 575 B

KJB GROUP LLC
KJB GROUP
% KARIBA BUSH MBR
6001 ENCLAVE PL
TRUSSVILLE, AL 35173

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 86-1423610. 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.

When filing tax documents, payments, and 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.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

03/15/2022

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

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.

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:

KJB GROUP 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): Kariba J Bush

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

301 Reverend Abaraham Woods Jr BLVD Trussville, AL 35173

COUNTY of above address: JEFFERSON

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

6001 Enclave Pl. Trussville, AL 35173 SAINT CLAIR

- 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	
001-019-314	DLL
Date	05/11/2022
Time	12:08:00
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 5 / 12 / 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 0 : 0 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).

5 / 11 / 2022
Date (MM/DD/YYYY)

Kariba Bush
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:

KJB GROUP LLC

This name reservation is for the exclusive use of Kariba Bush, 6001 Enclave Pl., Trussville, AL 35173 for a period of one year beginning May 11, 2022 and expiring May 11, 2023



RES022273

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.

May 11, 2022

Date

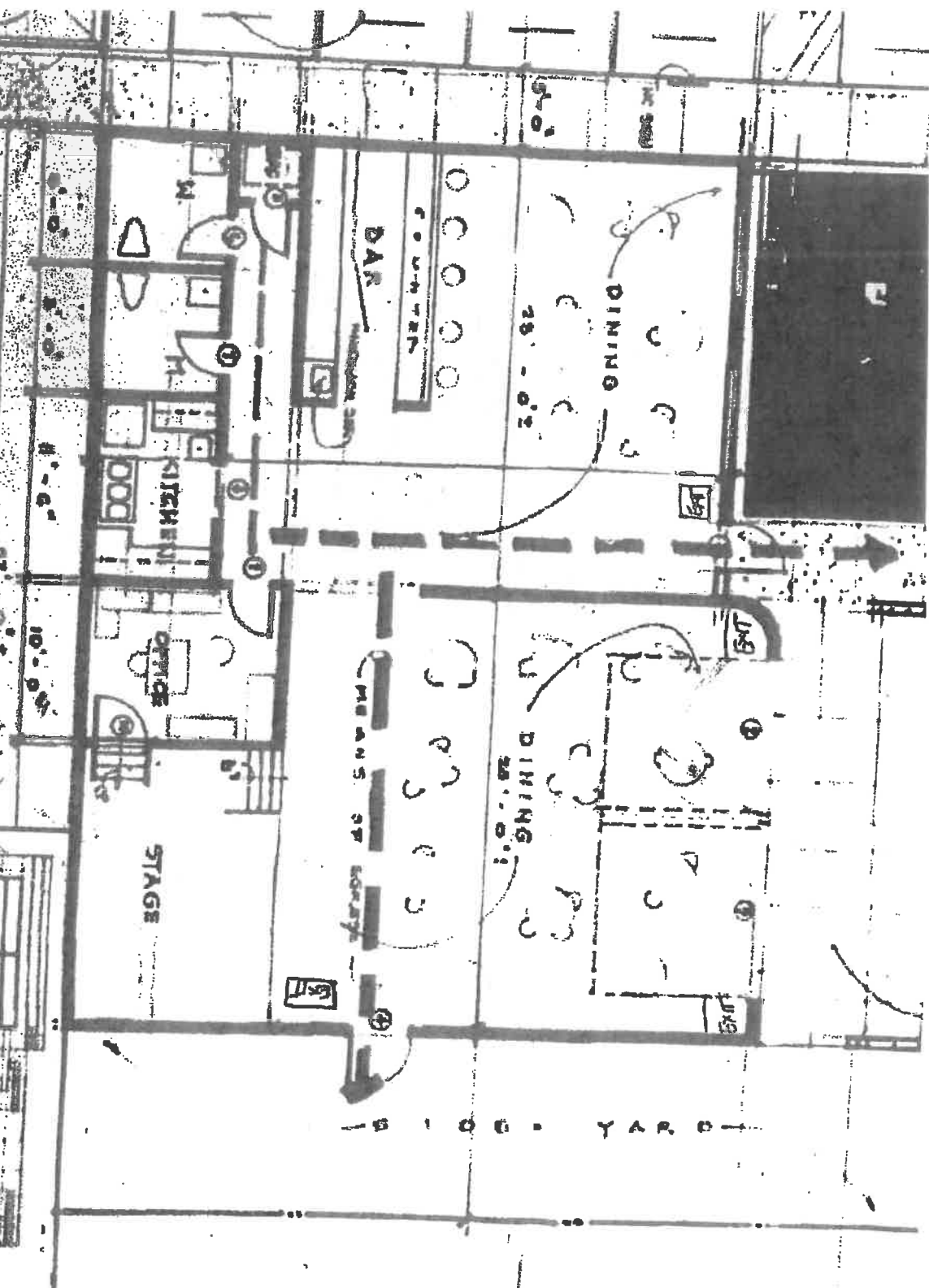
John H. Merrill

Secretary of State

FLOOR PLAN

SCALE: 1/4" = 1'-0"

REV. ABRAHAM MOORE RUD. PLY



KARIBA

Kariba Bush
404-702-1064

PARCEL ID: 012200344001001000

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

DATE: Monday, June 6, 2022 9:21:48 AM

OWNER: BUSH KARIBA

ADDRESS: 6001 ENCLAVE PLACE

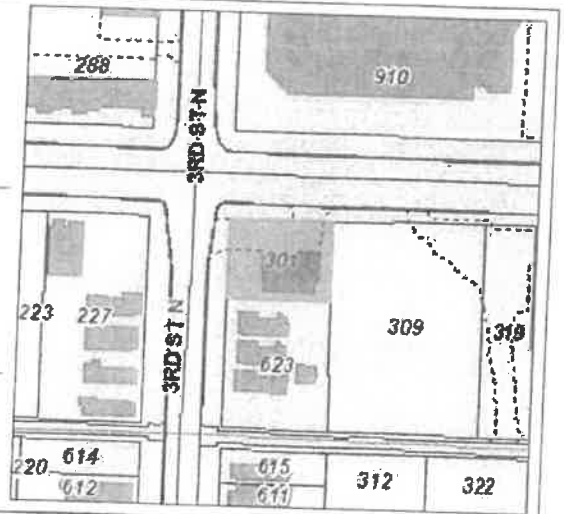
CITY/STATE: TRUSSVILLE AL

ZIP+4: 35173

SITE ADDR: 301 REV ABRAHAM WOODS JR BLVD

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$14,000.00

BLDG: \$23,100.00

OTHER: \$0.00

AREA: 7,885.81

ACRES: 0.18

SUBDIVISION INFORMATION:

NAME SMITHFIELD (SOUTH)

BLOCK: 27

LOT: 7&8

:

Section: 34-17-3W
Land Slide Zones: Not in Land Slide Zones
Historic Districts: Smithfield
Commercial Revitalization District: 8th Avenue North
Fire District: Not in Fire District
Flood Zones: Not in Flood Zones
Tax Increment Financing District: Not in Tax Increment Financing District
Neighborhoods: Smithfield (1605)
Communities: Smithfield (16)
Council Districts: District - 5 (Councilor: Darrell O'Quinn)
Zoning Outline: B2
Demolition Quadrants: DEM Quadrant - 3
Impaired Watersheds: Not in Impaired Watersheds
Strategic Opportunity Area: 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: 5/9/22

Application Type: New Application for Beer/Wine (Off Premise Only)

Subject: Applicant's Entity Name David, LLC
Business Name 12th Ave Chevron
Business Address 3013 12th Ave N

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 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 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 |

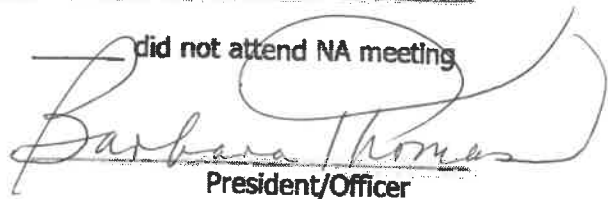
The Norwood Neighborhood Association met on _____ and voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

18 Attendance 1 Oppose 17 Support _____ No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting

did not attend NA meeting


Barbara Thomas
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.

6/24/2022

Mr. Salem @ 10:56

205-567-5706

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

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

Name of Applicant: David, LLC
Mailing Address: 3013 12th Ave N
Birmingham, AL 35234
Trade Name: 12th Ave Chevron
Location Address: 3013 12th Ave N
Contact Number: (205)567-5706 Contact Person: Nagib Saleh

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: 5/9/22

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

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

By: GS

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) David, 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] Nagib Faisal N Saleh	Member	[REDACTED] Yemen	2442 Huntington Glen DR Birmingham, AL 35226	16years

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 20171114 Page: 1 of 3 Date: 10/27/2017 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name 12th Ave Chevron

4(a) Location 3013 12th Ave N

Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35234 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **3013 12th Ave N Birmingham, AL 35234**

(d) Business Phone _____ Fax: _____ Other Contact: **(205)567-5706**

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 Moore Oil Company, Inc
1800 Center Point Pkwy Birmingham, AL 35215

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
NO-Applicant				

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 May, 2022

Nogiris Samal
Signature of Affiant

Kerry Stanley
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:
Beer/Wine (Off Premises Only)

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: David, LLC
Attention: _____
Address: 3013 12th Ave N
City: Birmingham State: AL Zip Code: 35234
Area Code and Phone Number: (205)567-5706
Area Code and Fax Number: _____
Name of Contact Person: Naqib Saleh
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): 12th Ave Chevron
Attention: _____
Address: 3013 12th Ave N
City: Birmingham State: AL Zip: 35234
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
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/Gas/Grocery/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 82-3139687 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
Saleh, Nagib	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 _____ 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 C-22 "Must Be Approved By City Council" 05/10/22
 E.R.

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.)

Location

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.)

Location

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"/>

DRIVER LICENSE



ALABAMA



NAME: **NAGIB FAISAL N. SALEH**
DOB: [REDACTED]
SEX: [REDACTED] HT: 5-06 WT: 155 HAIR: BRN EYES: BLK

CLASS: **D**
EXPIRES: [REDACTED]

2442 HUNTINGTON QUEEN DR
BIRMINGHAM AL 35226-1907

ISSUED: [REDACTED]

APPROVED: [REDACTED]
STATE OF ALABAMA

082-82-8671

CONVENIENCE STORE LEASE AGREEMENT

LESSOR:

Moore Oil Company, Inc.
1800 Center Point Pkwy
Birmingham, AL 35215

DATE: May 5, 2022

LESSEE:

David, LLC
2021 Shady Crest Dr.
Hoover, AL 35216

THE PREMISES TO WHICH THIS LEASE AGREEMENT PERTAINS ARE DESCRIBED ON EXHIBIT "A" ATTACHED HERETO AND ARE LOCATED AT:

12th Ave. Chevron
3013 12th Ave. North
Birmingham, AL 35234

This Convenience Store Lease Agreement (hereinafter "Agreement") is entered into on this date by and between Lessor (as hereinabove described) and Lessee (as hereinabove described) and is in consideration of Lessee leasing a certain portion of the Premises (as hereinabove described) from Lessor, and Lessor leasing such portion of the Premises to Lessee for Lessee's use in selling retail food and other products to the public.

Except as specifically amended or modified in these Basic Provisions, the Terms and Conditions attached hereto and made apart hereof, along with all addendums hereto and any subsequent amendments, shall govern the terms of this Agreement.

BASIC PROVISIONS

- I. **TERM:** The term of this Agreement shall be for 2 year(s), commencing on the 1st day of May, 2022 and expiring on the 30th day of May, 2024. This Lease shall automatically renew unless 60 days written notice is given by either Lessee or Lessor.
- II. **PORTION OF PREMISES BEING LEASED:** The following portions of the Premises are being leased by Lessor to Lessee (hereinafter "Leased Premises"): THE BUILDING THAT HOUSES A CONVENIENCE STORE WHICH IS LOCATED ON THE PREMISES (exclusive of all equipment located therein which is for the dispensing of motor fuels, the electronic point of sale equipment, the credit card data imprinters, the underground storage tanks, the pumps, the canopy, the islands, the piping, and any other item connected with the sale of motor fuels).
- III. **RENT:** The rent for the term of this Lease shall be payable in advance at the rate of \$ 1,000.00 per month on the 1st day of each and every month commencing on June 1, 2022

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 Judge of Probate in the county where the entity's initial registered office is located. **The information required in this form is required by Title 10A.**

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the limited liability company's (LLC) registered office is/will be located. **Contact the Judge of Probate's Office to determine the county filing fees. Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00 for standard filing (based on date of receipt and volume) or \$200.00 for expedited service (processed within twenty four (24) hours after date of receipt from the County Probate Office) and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is filed. Your notification of filing was provided by the Probate Judge's Office via a stamped copy which is evidence of existence (if it is certified by the Probate Office) according to 10A-1-4.04(c) and the Secretary of State's Office does not send out a copy. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment. Your entity will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.**

The information completing this form must be typed (for your convenience the information is fill-able on this computer form on the website above).

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, Title 10A-1-5.06. You may use Professional or Series before Limited Liability Company if they apply or you may use those abbreviations):
David, LLC
2. A copy of the Name Reservation certificate from the Office of the Secretary of State must be attached and the name reserved must agree with item 1 above [proves name reservation under 10A-1-4.02(f)].

This form was prepared by: (type name and full address)

Najib Saleh
2486 Huntington Glen Drive
Birmingham, AL 35226

County Division Code AL039
Inst. # 2017111497 Pages. 1 of 3
I certify this instrument filed on
10/27/2017 9:05 AM Doc: INC
Alan L. King Judge of Probate
Jefferson County, AL Rec. \$63.00

Clerk CSBESS

(For County Probate Office Use Only)

(For SOS Office Use Only)

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

3. The name of the Registered Agent located at the Registered Office (only one agent):

Naqib Saleh

Street (No PO Boxes) address of Registered Office (must be located in Alabama):

3181 Green Valley Rd Vestavia, AL 35243

Mailing address in Alabama of Registered Office (if different from street address):

2021 Shady Crest Drive Hoover, AL 35216

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:

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 10A-5A-1.04(c)

6. The filing of the limited liability company is effective immediately on the date filed by the Judge of Probate or at the delayed filing date (cannot be prior to the filing date) specified in this filing. 10A-1-4.12

The undersigned specify 10/ 24 /2017 as the effective date (must be on or after the date filed in the office of the county Judge of Probate, but no later than the 90th day after the date this instrument was signed) and the time of filing to be _____ : _____ OAM or OPM. (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).

10/ 24 /2017
Date (MM/DD/YYYY)

Naqib Saleh
Signature as required by 10A-5A-2.04

Naqib Saleh
Typed Name of Above Signature

Member
Typed Title (Organizer or Attorney-in-fact)

Additional Organizers/Attorney-in-facts may sign (add additional sheets if necessary).

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:

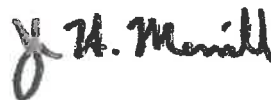
David, LLC

This name reservation is for the exclusive use of David, LLC, 2021 Shady Crest Dr Suite 100, Hoover, AL 35216-5417 for a period of one year beginning October 19, 2017 and expiring October 19, 2018

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.

October 19, 2017

Date



RES775218

John H. Merrill

Secretary of State

Date of this notice: 10-19-2017

Employer Identification Number:
82-3139687

Form: SS-4

Number of this notice: CP 575 A

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

DAVID LLC
NAGIB SALEH MBR
2021 SHADY CREST DR STE 100
HOOVER, AL 35216

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 82-3139687. 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.

When filing tax documents, payments, and 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.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941	01/31/2018
Form 940	01/31/2018
Form 1065	03/15/2018

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

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.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at www.irs.gov for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

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.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

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

Thank you for your cooperation.

PARCEL ID: 012200251003001000

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

DATE: Tuesday, May 10, 2022 9:15:30 AM

OWNER: MCDONALDS CORPORATION

ADDRESS: PO BOX 182571

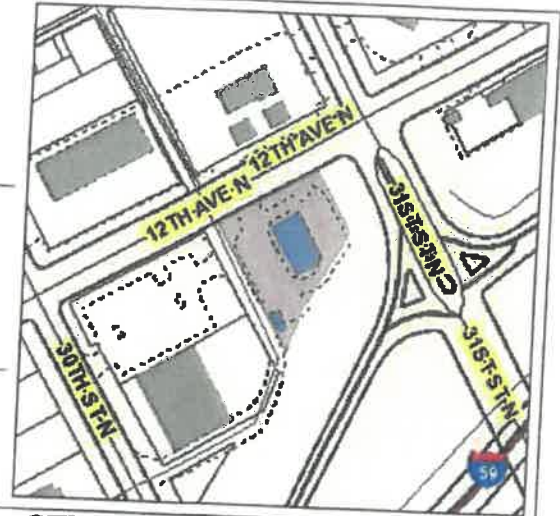
CITY/STATE: COLUMBUS OH

ZIP+4: 43218

SITE ADDR: 3019 12TH AVE N

CITY/STATE: BHAM, AL

ZIP: 35234



LAND: \$221,300.00

BLDG: \$282,600.00

OTHER: \$0.00

AREA: 19,689.78

ACRES: 0.45

SUBDIVISION INFORMATION:

NAME MCDONALDS SURVEY 22-25-1

BLOCK: 642

LOT: 1B

Section: 25-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: 12th Avenue North

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Norwood (1205)

Communities: Northside (12)

Council Districts: District - 4 (Councilor: J. T. Moore)

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

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: 5/27/22

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

Subject: Applicant's Entity Name Greenawalt Hospitality, LLC
Business Name Avenue D Events
Business Address 3008 4th Ave 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.

10:58

334-734-2468

Colby Scott

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 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: 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.

- 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
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-ADS-5-27-2022
 Must be approved by City Council. LIS

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
ISS 04-22-2021

REST SEX M HT 6-03 EYES GRN
WT 280 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

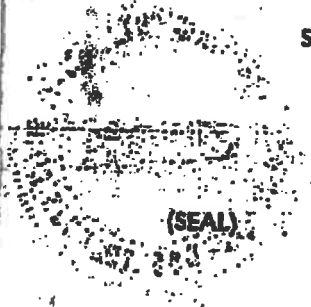
was born in Goshen, Elkhart County, Indiana
Place Month Day Year

Child of Robert R. Greenawalt and Kimberly M. Acton

Indiana Michigan
Birthplace of Father Birthplace of Mother

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

Signed *Stanley J. [Signature]*
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]
Signature
Robby 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.

Jonathan Meador
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
Robby 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.

[Signature]
Notary Public
My commission expires: 1/29/25

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 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.

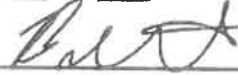
X On the 31st day of May, 2022.

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 a 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

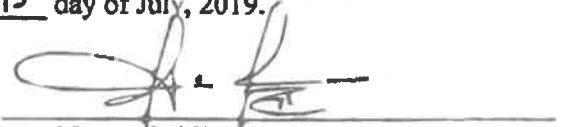
STATE OF ALABAMA
COUNTY OF LEE

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

J. H. Merrill

John H. Merrill

Secretary of State

STATE OF ALABAMA)
JEFFERSON COUNTY)


20090514000594050 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

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 Alcohol 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"

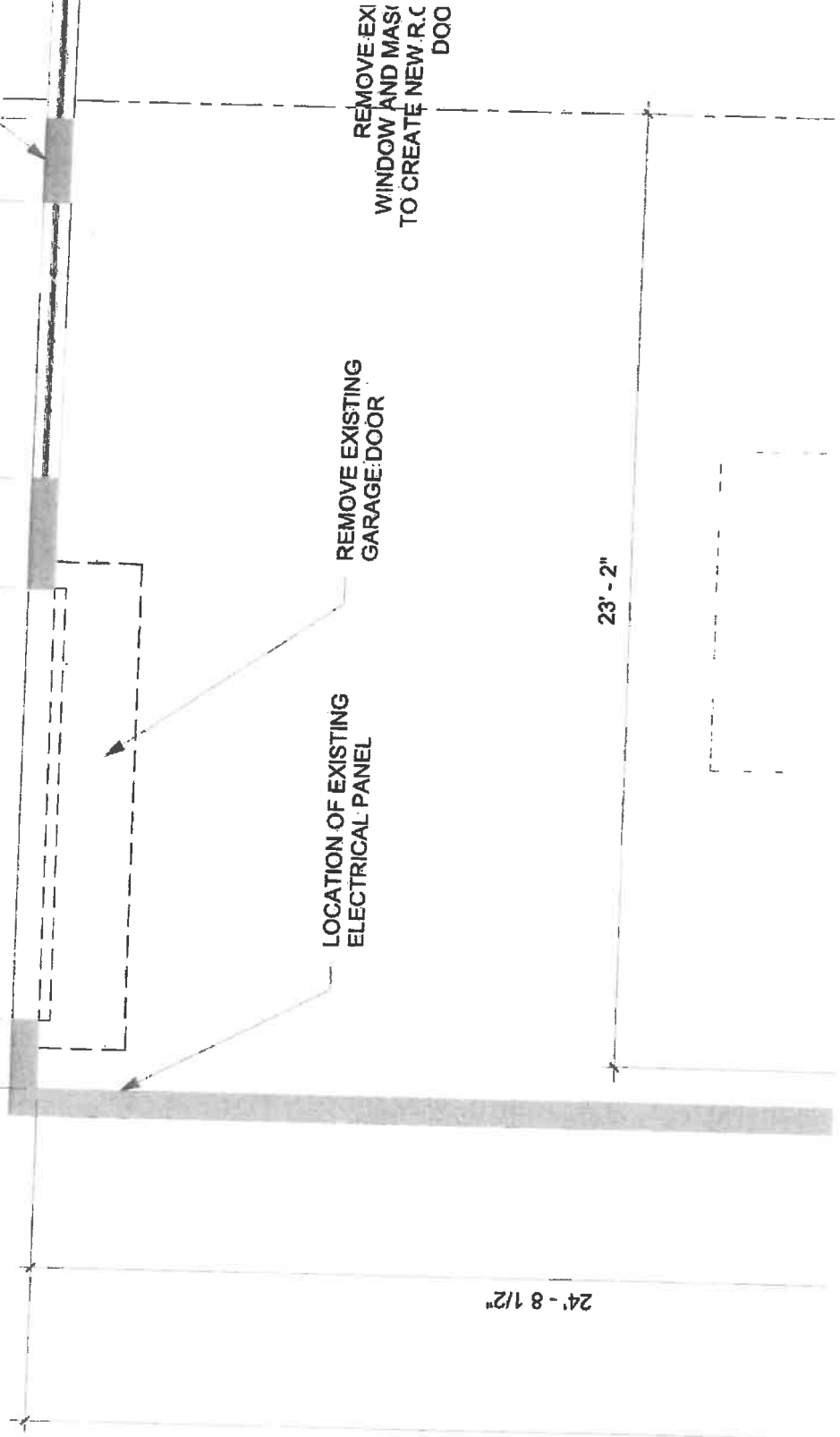
1' - 8 1/4"

10' - 6"

2' - 8"

6' - 8 1/2"

2' - 0"



LOCATION OF EXISTING ELECTRICAL PANEL

REMOVE EXISTING GARAGE DOOR

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

24' - 8 1/2"

23' - 2"

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} ___ did not attend NA meeting

Jhelita Purifoy
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.

06/24/2022

Brandon Will email

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 LIQUOR-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
ND - Applicants				

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)
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: 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, 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
King, Victor	Member	
Hall, Kristen	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:

Michael T. Clarke _____ 4/22/22 _____
 Signature of Person Completing This Application Date

Michael T. Clarke _____ (205) 834-3176 _____
 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 BY 04/22/22 E.R.
Must Be Approved by City 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

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.)
Location

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.)
Location

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

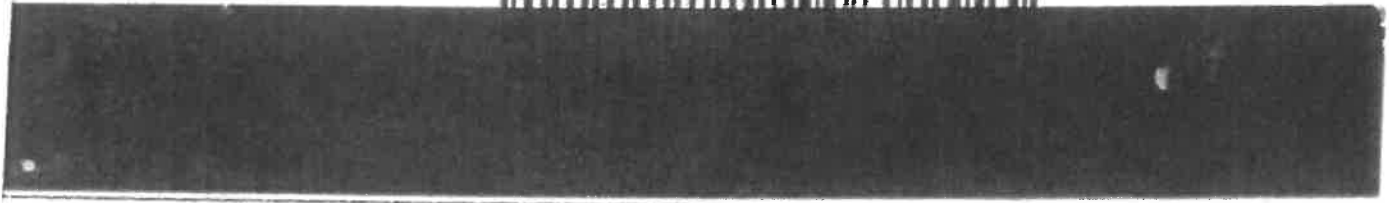
HT 6-00

EYES BLU

WT 190

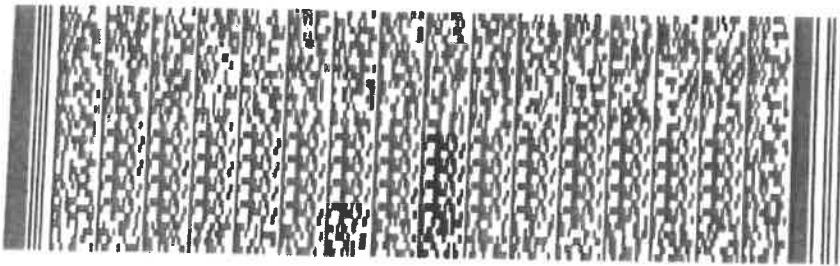
HAIR BRO

Secretary Hal Taylor
Secretary of Law Enforcement



VICTOR BUCHANAN KING
CLASS: D-Regular Operators License

ENDORSEMENTS:
RESTRICTIONS:



Rev 11-01-2014



DRIVER LICENSE

ALABAMA



NO. 7139972

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

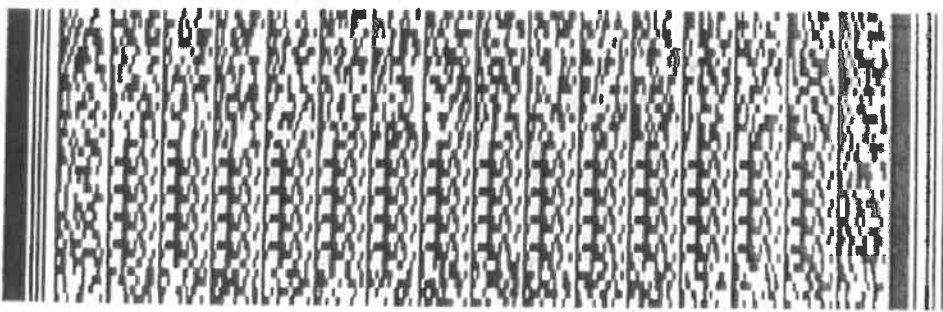
Secretary Hal Taylor
Secretary of Law Enforcement

0000000000000000000000000000000000



KRISTEN FARMER HALL
CLASS: D-Regular Operators License

ENDORSEMENTS:
RESTRICTIONS: A-Corrective Lenses



Rev 11-01-2014
13997240

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:

1. **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

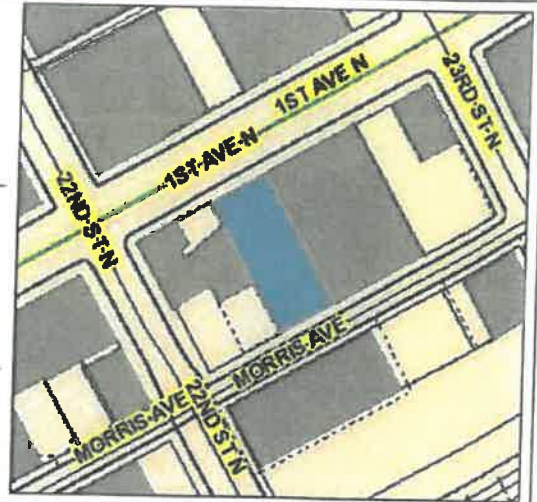
CITY/STATE: BIRMINGHAM AL

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: 4/18/22

Application Type: New Application

Subject: Applicant's Entity Name Bosses Private Lounge LLC
Business Name Bosses Private Lounge
Business Address 201 Richard Arrington JR Blvd 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 checked="" 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 License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input checked="" type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The FIVE POINTS SMITH Neighborhood Association met on MAY 17, 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

Reason for Opposition NONE. VOTE IN FAVOR WAS 10-0 APPROVE WITH 0 DENY.

Applicant: attended NA meeting
YES SHE DID AND MADE AN EXCELLENT PRESENTATION ABOUT HER SECURITY PLANS AND PARKING MITIGATION.

did not attend NA meeting
Sheila McChaffin
SHEILA MCCHAFFIN
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.

06/24/2022 11:01
205-409-1453 Angela Gaudin

New Application: Club Liq Class II Type 032(Private)

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

Name of Applicant: Bosses Private Lounge LLC

Mailing Address: 6605 Tensaw CT
Fairfield, AL 35064

Trade Name: Bosses Private Lounge

Location Address: 201 Richard Arrington Jr Blvd S

Contact Number: (205)409-1453

Contact Person:
Angela Gooden

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 5TBS/67CHS

Date Applied: 6/17/2022

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

CLUB LIQ CLASS II TYPE 032 (PRIVATE)
(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Bosses Private Lounge 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> </u> Angela Maria Gooden	Member	<u> </u> Birmingham, AL	6605 Tensaw CT Fairfield, AL 35064	5 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 837-083 Page: 1 of 3 Date: 02/24/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Bosses Private Lounge
- 4(a) Location 201 Richard Arrington Jr Blvd 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: 6605 Tensaw CT Fairfield, AL 35064
- (d) Business Phone _____ Fax: _____ Other Contact: (205)409-1453

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 Jack Smith Real Estate LLC
2520 Marcal RD Birmingham, AL 35244 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? 5TBS/67CHS

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
NO - Applicant				

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 18th day of April, 2022

Cynthia Shuster
Signature of Affiant

Mary Stanley
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!
Club Lig Class II Type 03a (Private)

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: Bosses Private Lounge LLC
Attention: _____
Address: 6605 Tensaw CT
City: Fairfield State: AL Zip Code: 35064
Area Code and Phone Number: (205) 409-1453
Area Code and Fax Number: _____
Name of Contact Person: Angela Gooden
E-Mail: Angelagooden38@gmail.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): Bosses Private Lounge
Attention: _____
Address: 201 Richard Arrington Jr Blvd 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) **Private Lounge**
- 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: Private Lounge/Bar Product: Alcohol/Pool/Hookah

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
- 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
Gooden, Angela	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 Date 4/18/2022

Angela M. Gooden
Print the Name of the Person Completing This Application Phone Number of Person Completing Application (205) 756-1886

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
(A) ZBA 2022-06627
OK M1 Must Be Approved By City Council 06/17/22 E.H.
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.)
Location

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.)
Location

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"/>

Neighborhood Response Form – (if the APPLICANT attends the NA meeting)

RE: ZBA2022-00027 BOSSER PRIVATE LOUNGE

Date: MAY 20, 2022 FILED OUT.

To: Angelica Moton, Room 210, 2nd Floor City Hall (205) 279-8917, FAX: (205)254-2111
Angelica.moton@birminghamal.gov

From: FIVE POINTS SOUTH N.A. President, Vice President, Secretary
(Please indicate the Officer who chaired the meeting when this request was heard)

On MAY 17, 2022, the request was heard by our Neighborhood Association and we took the following action:

SUPPORT (# of votes) 10-0

OPPOSE (# of votes) 0 DENY

The decision of the Neighborhood Association was to (circle one) support not support) the request for the following reasons:

THE APPLICANT DID HER HOMEWORK TO SECURE PARKING ARRANGEMENTS FOR HER FUTURE CUSTOMERS AND HAS A RESPONSIBLE PLAN FOR SECURITY.

The Neighborhood Association understands that its opinion is only advisory and that this form will be given to ZBA members. Representatives from the Association or its members can attend the ZBA meeting to personally express concerns and requests.

Neighborhood Officer Signature: Sheila M Chaffin
SHEILA M CHAFFIN, PRESIDENT
(Officer who chaired or presided over the meeting when the case was presented should sign above)

NOTE:

Five Points South Neighborhood Association meets 3rd Tuesday of each month at 6:00 PM in the Social Hall of the Highlands United Methodist Church located at 1045 20th Street South, Birmingham AL 35209. Applicants should contact Sheila Chaffin, Neighborhood President, at 205-914-3286 and info@birminghamandb.com to get on the agenda.



BIRMINGHAM PARKING AUTHORITY

1732 5th Avenue North
Birmingham, AL 35203

(205) 321-7050
Fax (205) 214-1493
www.bhamparking.com

Kevin L. Owens
Chairman

Hester L. Hill
Vice Chairman

Dora Sims
Secretary/Treasurer

André R. Davis
Chief Executive Officer

April 22, 2022

Bosses Private Lounge
Attn: Angela Gooden
201 Richard Arrington Jr. Blvd South
Birmingham, AL 35233

Dear Ms. Gooden:

It is our understanding that on behalf of Bosses Private Lounge, you have applied for a Business License with the City of Birmingham. As part of the application process, you have requested parking arrangements with the Birmingham Parking Authority for patrons of Bosses Private Lounge.

Pending the City of Birmingham's approval of your business license, the Birmingham Parking Authority is prepared to support parking for Bosses Private Lounge as follows:

- Parking Facility – BPA Deck #8 at 2021 3rd Avenue South
- Number of Parking Spaces – 100 Space Maximum
- Hours of Parking Access
 - 7-days per week
 - 5:00 PM – 2:00 AM

All associated parking fees will be at the expense of your patron's and/or Bosses Private Lounge. In addition, if Bosses Private Lounge will be financially responsible for patron parking fees, a Parking Use Agreement will need to be executed accordingly.

On behalf of the Birmingham Parking Authority, we look forward to working with you.

Sincerely,

André R. Davis
Executive Director & CEO



BOSSES PRIVATE LOUNGE, LLC.

☎ 205-756-1886 ✉ angelagooden38@gmail.com

**Bosses Private Lounge
201 Richard Arrington Jr. Blvd. S.
Birmingham, AL 35233**

April 26, 2022

PARKING

To: ZBA

From: Angela Gooden

CC: Parking for 201 Richard Arrington Jr. Blvd South

Here is an explanation of the agreement between Bosses Private Lounge and Birmingham Parking Authority.

I will be paying for parking monthly. They are giving me 1000 validation parking tickets per order, on as needed basis. The guests will park in the deck and bring me their ticket and I will validate it for them to get out of the deck. This will cost me \$2 per ticket. Each validation will be good for 1 year. This has already been approved via parking validation application. Please see attached.

Sincerely,

Angela Gooden

**Angela Gooden
CEO/Owner**

\$25.00 Application Fee to be paid to cashier before processing

Application For

Pool Table Permit

**Office of the Mayor
City of Birmingham
Birmingham, Alabama**

Date: 4/18/22

Your petitioner, Angela Gooden (Name)

[REDACTED] ; B ; respectfully represents that he is a resident Citizen of
(D.O.B) (RACE)

Alabama, residing at 6605 Tensaw CT
(Street Address)

Fairfield ; 35064 ; 409-1453 and that he desires to
(CITY) (ZIP) (TELEPHONE)

operate slot or coin-operated pool table(s) or standard pool table(s) at
(Number) (Number)

Bosses Private Lounge ; 201 Richard Arrington Jr Blvd S
(Name of Business) (Location Address)

409-1453 in the City of Birmingham; wherefore your petitioner
(TELEPHONE)

prays that he may be granted a permit to operate such business under and in accordance with the provisions of Title 12, Article C, Volume II of the General Code of the City of Birmingham, Alabama 1980, regulating the same.

I presently hold a Applying: Club Liq Class II at this place of business
(TYPE OF BUSINESS)

Approved by;

Date: _____



STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC)
CERTIFICATE OF AMENDMENT

PURPOSE: In order to amend a Limited Liability Company's (LLC) Certificate of Formation under Section 10A-5A-2.02 of the *Code of Alabama 1975*, this Certificate of Amendment and the appropriate filing fees must be filed with the Office of the Secretary of State.

1. The current recorded name of the Limited Liability Company:

Bosses Private Lounge LLC

2. The date the Certificate of Formation was filed: 02 / 24 / 2021 (MM/DD/YYYY)

3. Alabama Entity ID Number (Format: 000-000-000): 000 - 837 - 083 **TO OBTAIN ID NUMBER,** website at www.sos.alabama.gov click on Business Services (below picture), click on Business Entity and Name Search, click on Entity Name, enter the name of the entity in the appropriate box, and enter. Click on the number and verify that this is the correct entity. **This step is strongly recommended.**

(For SOS Use Only)

Alabama	
Sec. Of State	
000-837-083	DLL
Date	04/12/2022
Time	18:27:41
File	\$100.00
County	-----
Total	\$100.00

DOMESTIC LIMITED LIABILITY COMPANY AMENDMENT

4. The following amendment was adopted on 04 / 12 / 2022 (MM/DD/YYYY):

See attached.

Additional Amendments and the dates on which they were adopted are attached.

*Be very specific about what must be changed if you are amending existing information.

*If the amendment includes a name change, a copy of the **Name Reservation Certificate** issued by the Office of Secretary of State **must be attached**.

*Registered agents and registered agent addresses are changed by filing a Change Of Registered Agent Or Registered Office By Entity form directly with the Office of the Secretary of State (the new agent's signature is required agreeing to accept responsibility). **Agent information will NOT be changed with an amendment.**

5. The undersigned authorized signature certifies that the amendment or amendments have been approved in the manner required by Title 10A of the *Code of Alabama of 1975* and the governing documents of this entity.

04 / 12 / 2022

Date (MM/DD/YYYY)

ANGELA GOODEN

Signature as required by 10A-5A-2.04

OWNER

Title/capacity to sign under 10A-5A-2.04

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

as appears on file and of record in this office, the pages hereto attached, contain a true, accurate, and literal copy of the Articles of Formation filed on behalf of Bosses Private Lounge LLC, as received and filed in the Office of the Secretary of State on 02/24/2021.



20220412000027808

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.

04/12/2022

Date

John H. Merrill

Secretary of State

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:

Bosses Private Lounge LLC

This name reservation is for the exclusive use of ANGELA M GOODEN, 6605 Tensaw Court, Fairfield, AL 35064 for a period of one year beginning February 24, 2021 and expiring February 24, 2022



RES933727

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.

February 24, 2021

Date

A handwritten signature in black ink that reads "John H. Merrill". The signature is written in a cursive style.

John H. Merrill

Secretary of State



STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

1. THE NAME OF THE LIMITED LIABILITY COMPANY

Bosses Private Lounge LLC

2. THIS FORM WAS PREPARED BY:

ANGELA M GOODEN

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

Angela Gooden
1179 16th Ave west
Birmingham, AL 35204
JEFFERSON

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

6605 Tensaw Court
Fairfield, AL 35064
JEFFERSON

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

837-083 DLL

Date	02/24/2021
Time	11:19:00
File	\$100.00
County	\$100.00
Exp	\$0.00

Total	\$200.00

6. THE UNDERSIGNED SPECIFY 02/24/2021 11:15:48 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

02/24/2021
DATE

ANGELA GOODEN OWNER
ELECTRONIC SIGNATURE & TITLE

COMMERCIAL LEASE

Revised June 2008 (Previous forms obsolete)

This is a legally binding contract. Seek competent advice prior to execution.

STATE OF ALABAMA

____ Jefferson ____ COUNTY

This Commercial Lease (the "Lease") is made this 26th day of April, 2022 between and among the following:

NAME OF LANDLORD: JACK SMITH REAL ESTATE LLC
whose address is: 201 RICHARD ARRINGTON JR
(hereinafter called "Landlord"),

and

NAME OF AGENT: Ironvest Partners

whose address is: 112 24th Street N Suite 201

as agent for Landlord (hereinafter called "Agent"),

and

NAME OF TENANT: BOSSSES PRIVE LOUNGE LLC

whose address is: 201 Richard Arrington Jr Blvd S

(hereinafter called "Tenant").

NOW THEREFORE, in consideration of the mutual covenants and agreements contained herein, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto hereby agree as follows:

1. **LEASED PREMISES.**

(a) **Description.** Landlord does hereby demise and let unto Tenant the following described premises located in the City of Birmingham, County of Jefferson, State of Alabama, to wit:

DESCRIPTION OF THE LEASED PREMISES: 3,715 square feet located in the middle suite of 201 Richard Arrington Jr. Blvd S, Birmingham, AL 35233

_____ (the "Leased Premises") subject to all existing easements, if any, and the regulatory laws and ordinances of the political subdivision in which the Leased Premises is situated. The Leased Premises is described in Exhibit A.

(b) **Use.** The Leased Premises shall be used by Tenant as a lounge/bar/private club intended for business owners and professionals and for no other or different use or purpose. Tenant shall not use or occupy the Leased Premises, or permit the Leased Premises to be used or occupied, in violation of any ordinance, law or regulation of any governmental body, or in any manner which would vitiate or increase the premium charged for insurance on the Leased Premises or the building in which it is located, if applicable. Tenant shall not allow smoking.

2. **TERM.** The Term of this Lease is for Thirty Six (36) Months (the "Term") beginning on the First (1st) day of May, 2022 ("Commencement Date") and ending on the Thirtieth (30th) day of April, 2025, unless sooner terminated pursuant to the terms and conditions provided for herein.

The Birmingham Association of Realtors® is not engaged in rendering legal, accounting or other professional service. This form is published as a service to real estate professionals and an explanation of its various provisions should be obtained from the appropriate professional. Because of varying state and local laws, competent legal or other advice should be secured before using any form.

Commercial Lease - Page 1 of 9

Amendment Details

Entity Info

Current Entity Name

Bosses Private Lounge LLC

Entity ID

000-837-083

Type

Limited Liability Company (LLC)

Formation Date

2021-02-24

Principal Address

Original**Amended****Physical Address**

,

Physical Address201 RICHARD ARRINGTON JR. BLVD S.
BIRMINGHAM, AL 35233**Mailing Address**

,

Mailing Address201 RICHARD ARRINGTON JR BLVD S.
BIRMINGHAM, AL 35233



205-756-1886



angelagooden38@gmail.com

Bosses Private Lounge
201 Richard Arrington Jr. Blvd. S.
Birmingham, AL 35233

April 26, 2022

PARKING

To: ZBA

From: Angela Gooden

CC: Parking for 201 Richard Arrington Jr. Blvd South

Here is an explanation of the agreement between Bosses Private Lounge and Birmingham Parking Authority.

I will be paying for parking monthly. They are giving me 1000 validation parking tickets per order, on as needed basis. The guests will park in the deck and bring me their ticket and I will validate it for them to get out of the deck. This will cost me \$2 per ticket. Each validation will be good for 1 year. This has already been approved via parking validation application. Please see attached.

Sincerely,

Angela Gooden

Angela Gooden
CEO/Owner

BOSSES PRIVAT LOUNGE LLC

PARKING

To: ZBA

From: Angela Gooden

CC: Parking for 201 Richard Arrington Jr. Blvd South

Here is an explanation of the agreement between Bosses Private Lounge and Birmingham Parking Authority.

I will be paying for parking monthly. They are giving me 1000 validation parking tickets per order, on as needed basis. The guests will park in the deck and bring me their ticket and I will validate it for them to get out of the deck. This will cost me \$2 per ticket. Each validation will be good for 1 year. This has already been approved via parking validation application. Please see attached.

Bosses Private Lounge LLC

Angela Gooden/Owner

Angela Gooden

201 Richard Arrington Jr. Blvd S.
T: 2057561886 W: bossesofbirmingham.com



SECURITY & SAFETY PLAN BOSSES PRIVATE LOUNGE/CLUB

Purpose

This plan has been prepared to ensure the safety and livelihood of all of its patrons and the city in which this establishment is located. This security and safety plan will discuss the necessary details to ensure all potential safety hazards or threats will be handled accordingly and in order.

Address: 201 Richard Arrington Jr. Blvd. Birmingham, AL 35233

Phone Number: (205) 756-1886

Hours of Operation

Monday-Thursday 12pm-2am

Friday & Saturday 11pm-2am

Sunday 2pm-12am

BOSSES PRIVATE LOUNGE/CLUB SECURITY PLAN

Security Personnel

Requirements set in place for all security personnel are as followed:

- Security positioned at all doors wearing a distinctive uniform.
- They will be well-trained for the post and knows every regulation.
- Must maintain control of access and club entry lines.
- ID verification for legal age prior to admission.
- Verify prior to entry that the person is not obviously intoxicated.
- Verify that the person is not carrying a weapon or contraband.
 - Use an optional metal detector or pat-down or bag search.
- Enforce the dress code and refuse objectionable attire.
- Refuses admission to known troublemakers.
- Direct communication with bartender and management.
- Access and egress control and fire safety duties.
- Calls the police to report criminal acts, as required.

Security Patrol

The duties of the security personnel during operating hours are as followed:

- Work primarily inside of a nightclub or at the door.
- Patrol's exterior and parking lot sometimes.
- Wear a distinctive uniform and is highly visible.
- Positioned in a room with an unobstructed view.
- Have adequate staff if high-risk.
- Monitor patron behavior and level of intoxication.
- Enforce club rules often with early warnings.
- Removes obnoxious and offensive persons.
- Always professional when asking patrons to leave.
- Implement control of patrons with tendencies of fighting.
- Use force only in self-defense or detention for police.

- Calls the police to enforce criminal acts, as required.

Intoxication Observation

All security and staff will be trained on the following behaviors to identify intoxication levels of patrons:

- Red or puffy eyes
- Slurred speech
- Confusion
- Unsteady Balance
- Obnoxiousness
- Fainting or sleeping
- Fumbling or dropping items repeatedly
- Acts of irrational violence and/or verbal threats

If any or all of these items have been observed the patron will be cut off from anymore alcoholic beverage purchases for the night. If the patron causes any disruptions or acts of violence, security will be informed to remove the patron from the facility. If any members have (2) or more incidents of such nature their membership will be revoked. If a patron begins to get physically violent with any other patrons or staff police will be notified and security will detain the accused until local authorities have arrived.

Daily Preparation

All security and staff will have a daily preparations and meetings. The daily preparations for security will be as followed:

- Checking all emergency exits to ensure a clear pathway
- Check all alarms and panic bar alarms
- Walking the perimeter of the lounge to check for any obstructions or any unsafe items
- Checking all lights inside, perimeter, & parking lots and notating any outages
- Testing all metal detection devices

BOSSSES PRIVATE LOUNGE/CLUB SAFETY PLAN

Fire Safety & Evacuation Plan

In Case of a Fire

The plan for a safe evacuation after fire alarm has been triggered:

- All staff and personnel will safely and calmly point all patrons to the emergency exit
- There will be a security personnel stationed at the exit to guide patrons safely to the parking lot at safe distance from the club
- There will be a designated staff member that will be tasked of having a list of staff & personnel that were scheduled to work that night and a list of all members that entered the lounge and commence a head count to ensure everyone has been accounted for.

Personnel & Staff

- All staff will be trained on the procedures to handling & executing the fire safety & evacuation plan
- There will be a quarterly fire drill to ensure staff and personnel are adequately trained
- There will be an appointed Evacuation Director that will be tasked with accounting for everyone in the designated safety zone and alerting the proper authorities.
- Records shall be kept and made available to the fire code official upon request.
- All personnel will also be aware of the following risk and alert the on-duty security personnel if any of the following risk are being seen:
 - Blocked doors or exits
 - Overcrowding or over occupancy
 - Any extension cords or exposed wiring
 - Patrons gathering too closely to exit routes
 - No emergency lighting

- Patrons smoking or seen using a lighter too closely to the building

Medical Emergencies

In case of a medical emergencies the following will take place:

Minor Cuts or Scratches

For minor cuts or scratches there will be a First Aid Kit readily available for staff and/or patrons.

Major Medical Emergencies:

Personnel will clear the area around the Individual suffering from the medical emergency and call 911 immediately. Security will ensure a safe and easy pathway for First Responders.

Criminal Incident

In the event that a crime has been committed the following will take place:

- If the accused is still present the on-duty security personnel will detain the person until local authorities arrive.
 - The person who witnessed the crime will be asked to stay to give their statement to the police officer
- In the event that the accused is no longer on the premises the individual who witnessed the crime will be asked to stay and the on-duty security personnel will call the local authorities to report the crime.
- All documentation and incident reports will be copied and kept on site for safe keeping and records.



BYLAWS & HOUSE RULES

BOSSSES PRIVATE LOUNGE/CLUB

Address: 201 Richard Arrington Jr. Blvd. Birmingham, AL 35233
Phone Number: (205) 756-1886

Hours of Operation
Monday-Thursday 12pm-2am
Friday & Saturday 11pm-2am
Sunday 2pm-12am

BYLAWS AND HOUSE RULES BOSSES PRIVATE LOUNGE/CLUB

Bylaws

Article I. Name

The name of the organization shall be **BOSSES PRIVATE LOUNGE** (hereinafter referred to as the club) with the name being written in proper sequence with no deviations. This name shall not be changed unless permission has first been obtained from the business owner or appointed council.

Article II. Purpose of the Organization

The purpose of this Organization is for:

The maintenance of a social club for the social enjoyment, entertainment, amusement, and association of its members for social purposes.

Article III. Admission to Membership

Section 1.

Any citizen of the United States of America, of good character, who is 21 years of age or over, may be elected to membership of this organization in accordance with the rules herein provided.

Section 2.

Application for membership shall be filled out and signed by the applicant and (2) members in good standing. The application shall be turned over to the Secretary together with a receipt for deposit of the initiation fee and the current year's dues and fee for background investigation.

Section 3.

The name of the applicant shall be presented for ballot at the next regular meeting, provided, however, that at least (1) of the sponsors shall be present at said meeting.

Section 4.

If the vote upon the applicant shall contain less than (3) black balls, the candidate shall be considered elected. If (3) or more black balls are cast at the election, the candidate may not be received into the organization as a member at this time. He or She may not

be reconsidered for membership for at least a period of (6) months. All fees received from him/her shall be returned.

Section 5.

The members, by two-thirds vote, may elect to honorary life membership at any regular meeting any person who has rendered distinguished service to the Organization.

Section 6.

An elective official who has served in office at least 6 consecutive months or any member who has been a member in good standing for 1 consecutive year shall become eligible for a Life Membership in Bosses. Each member who has become a Life Member shall be presented with a permanent Life Membership Card.

Article IV. Meetings

Section 1.

The regular monthly meetings of the Organization shall be held on the third Thursday of each month in the Club of this Organization.

Section 2.

The regular hour of the meeting shall be 11 am. At any time when convenience requires, the regular meeting may be held at a different hour, to be determined by vote of the Organization or of the Board of Directors. Such change or meeting hour shall be posted.

Section 3.

The annual meeting of the Organization shall be held on the third Thursday of October in the Club of the Organization. This meeting shall be for the purpose of electing Officers and Directors, consideration of reports and the transaction of such other business as may properly come before the meeting.

Section 4.

Special meetings may be called at any time by the President of the Board of Directors on their own initiative and shall be called by the President upon written request of (5) members.

Section 5.

A written notice of all annual meetings and special meetings of the Organization shall be mailed to all members at least (5) days prior to date of such meeting.

Section 6.

At any meeting of the Organization (7) members in good standing shall constitute a quorum.

Article V. Board of Directors

Section 1.

The government of the Organization and its operation shall be vested in a Board of Directors consisting of (5) members, (2) of whom shall also be the Officers of the Organization. (2) Board Members shall be elected annually for a term of (3) years. Officers shall be elected annually for a term of (1) year. Officers shall automatically be deemed members of the Board of Directors.

Section 2.

Any member of the Board of Directors who is absent from (3) consecutive Board meetings without just cause may be dropped from the Board of Directors.

Section 3.

In the event of resignation, death, or inability for any cause whatsoever of any of the Officers or Board Members to serve, the remaining members of the Board of Directors shall have the power to select a person to fill such vacancy until the next annual meeting of the Organization when the members of the Organization shall elect a person to fill the unexpired term of the (1) who was unable to serve, for any of the reason aforesaid.

Section 4.

The Board of Directors shall manage the business and govern the affairs of the Organization and shall strive to carry out all the plans made by the Organization at any regular or special meeting. The Board of Directors may further exercise all such powers of the Organization and do all such lawful acts and things as are not by statutes or by these By-Law directed to be exercised or done by the members of the Organization.

Section 5.

The President shall appoint the committees.

Section 6.

Meetings of the Board of Directors may be called by the President at any time and shall be called whenever asked for by (3) Members of the Board. At least (1) day's notice of each meeting shall be given each member of the Board, either personally or by mail.

Section 7.

A majority of the Board of Directors shall be necessary to constitute a quorum for the transaction of business.

Article VI. Officers

Section 1.

The officers of this Organization shall be a:

- (A) President
- (B) Vice-President
- (C) Treasurer
- (D) Secretary

Section 2.

All officers shall be elected at the annual meeting of the Organization to serve for (1) year and shall take office at the next regular monthly meeting following elections.

Section 3.

In the event (1) person is elected to fill the offices of Secretary and Treasurer, the Organization shall then elect an Assistant Secretary.

Article VII. Duties of Officers

Section 1.

The President shall act as the representative head of the Organization. He/She shall preside at all the meetings of the Organization and of the Board. He/She may from time to time call special meetings of the Organization and of the Board for any purpose. He/She shall call a special meeting of the Organization on written request of (5) members and a meeting of the Board on request of (3) members of the Board. He/She shall appoint all committees, subject to the approval of the Board and shall be, ex-officio, a member of all committees. He/She shall have the general control and management of the business of the Organization, subject, however, to these Bylaws and to the regulations and directions of the Board. The President shall order and see to the disposition of a yearly inventory

Section 2.

The Vice-President shall assist the President and, in the absence, or disability of the President shall perform the duties and exercise the powers of the President.

Section 3.

The Secretary and / or Treasurer or a person designated by the Board of Directors shall handle and receive all moneys for all functions carried out by the Organization.

Section 4.

The Secretary shall give all such notice of meetings as are requested by the Bylaws, shall attend all meetings of the Organization and of the Board and shall keep minutes of the

same. He/She shall perform all duties usually appertaining to the office of Secretary and such other duties as may be from time to time fixed and required by the Board. He/She shall receive receipts of all dues from members and remit same to the Treasurer.

Section 5.

The Assistant Secretary shall aid the Secretary in all his/her duties and take his/her place at all meetings in the absence of the Secretary.

Section 6.

The Treasurer shall have charge of all moneys of the Organization. He/She shall receive the receipts of all dues collected by the Secretary and all income from the operation of all the facilities of whatever source or nature.

His/Her receipts shall be deposited in the name and to the credit of the Organization in a bank to be designated by the Organization. He/She shall pay all bills and obligations from this fund only upon the written approval of the President and Secretary.

The accounts of the Treasurer shall be audited annually by an Auditor appointed by the Board of Directors. His/She accounts shall be audited as of the close of business on October 31 of each year. A report of the audit shall be given at the January meeting.

Article VIII. Duties of the Board of Directors

Section 1.

The Directors shall look after and care for the property of the Organization and shall make a report on the inventory and condition of the property at each annual meeting. The Directors shall see to such repairs and replacements to the property as may from time to time be required. The Directors shall have the authority to buy merchandise and supplies for the operation of the Club rooms and to engage, supervise, and discharge all employees required for the care and operation of these said rooms.

Section 2.

The Directors shall promote and supervise the social activities of the Organization.

Section 3.

The President shall serve as Chairman of the Board of Directors and shall see to the execution of all Board decisions.

Section 4.

The Board shall meet at least once a month.

Article IX. Nominations

Section 1.

Nominations of Officers and Directors to be elected at the annual meeting shall be named either by the nominating committee appointed by the President or from the floor the night of the regular meeting in the month of October of each year.

Section 2.

A nominating committee consisting of not less than (5) members, not more than (2) of whom shall be members of the Board, shall be appointed by the President, with the approval of the Board, sixty days prior to the nominations. The committee shall nominate from the membership of the Organization members to be voted on for membership on the Board in relation to vacancies to be filled. The committee shall file with the Secretary a list of nominees recommended not later than (11) days before the nominations. Their names shall be posted in a conspicuous place in the Club room immediately following the nominations meeting held on the third Thursday in October. Nominations, other than the ones recommended by the committee, may be made from the floor the night of nominations.

Section 3.

Any person who has been a member of the Board of Directors for (2) years is eligible to hold the position of President or Vice-President. Any person who has been a member in good standing for at least (3) years immediately prior to his/her nomination may be nominated for the position of Secretary or Treasurer. Any person who has been a member in good standing for at least (2) years immediately prior to his/her nomination may be nominated for the position of Director of the Organization.

Section 4.

A nomination does not have to be seconded.

Section 5.

At least (1) person shall be nominated for each office to be filled, but any member who is nominated and does not wish to hold office must withdraw by the last day of the month preceding the annual election.

Section 6.

Only the persons nominated in the manner above shall be eligible for election; provided, however, that if no nomination for a particular office shall have been made prior to the date of such election, or if all candidates previously nominated for a particular office shall have declined or withdrawn, nomination for that office shall be made at the regular monthly meeting.

Section 7.

All elections shall be by written ballot except where there is but (1) candidate in nomination, in which event the President may direct any officer to cast the vote of the Organization for such candidate.

Article X. Membership Fees & Dues

Section 1.

The fee for initiation in this Organization shall be \$25.00.

Section 2.

The regular dues for each member shall be one hundred dollars (\$100.00) every (12) months.

Section 3.

The membership year shall run from June 1st to June 30th. Dues will be due June 1st and must be paid by June 30th. or a member will be considered in arrears.

Section 4.

Members who are in arrears in their dues for a period of (3) months shall be served with a written notice sent by the Secretary through U.S. mail to pay the amount due within thirty (30) days. If the dues are not paid within the time allowed and payment is not excused for justifiable reasons by the Board of Directors, the member shall be dropped from the Organization.

Article XI. Use of Organization Property

Section 1.

The use and enjoyment of the Club Rooms by members of the Organization and their guests shall be subject to house rules adopted by the Organization.

Section 2.

It shall be the duty of the Board of Directors to enforce such rules, and in the time of emergency or when the best interest of the Organization may be served, the Board may temporarily suspend or amend such rules as do not relate to conduct.

Section 3.

Neither the Club Rooms or any other property of the Organization shall be rented except upon approval of the Board of Directors. All damage and loss during such private use must be paid for by the contracting parties for such use.

Section 4.

The use of the Club Rooms and facilities of the Organization by the Ladies Auxiliary and use and storage of any equipment upon the premises of the Auxiliary shall be subject to approval by the Board, based upon a consideration of the best interests of the Organization. The installment of any equipment upon the premises may be made only upon the condition that the equipment so installed shall become the property of the Organization.

Article XII. Expenditures

Section 1.

All expenses of normal operation of the Organization and all other items of expenditure involving \$500.00 or less shall be paid upon approval of the Board of Directors.

Section 2.

All items of expenditure, other than the expenses of normal operation and emergencies of the Organization, involving more than \$500.00 shall be paid upon the approval of both the Board of Directors and the members of the Organization.

Article XIII. Loss of Membership

Section 1.

A member of the Organization may be denied the privilege of the Organization and dropped from its rolls for nonpayment of dues as provided in these Bylaws, nonpayment of damages of property for which damage the member is held responsible under the House Rules, a serious infraction of other House Rules, or conduct unbecoming a member of the Organization.

Section 2.

A complaint against any member alleging an infraction of the House Rules or conduct unbecoming a member of the Organization shall be submitted in writing to the Secretary who shall transmit the same to the Board. The accused has the right to be heard. The Board will make a decision within (1) week. The Board shall have the right to drop the accused from the rolls of the Organization.

Section 3.

A member who has been dropped from the rolls of the Organization, may be reinstated upon application and approval thereof and upon payment of the same initiation fee and regular dues in the same manner provided for the admission of new members.

Article XIV. Amendment

These Bylaws may be amended by a majority vote of the members present and voting at any meeting of the Organization, PROVIDED, that the amendment has been approved by the Board of Directors, has been read at a regular meeting of the Organization, and laid over until the next regular meeting, at which time it shall be voted upon. Notice of such amendment must be given in the call of the meeting of the Organization at which said amendment is to be voted upon.

Article XIV. Dissolution

In the event of the dissolution of this club to the extent allowed under applicable law, all of the assets of the club shall be distributed to BOSSES PRIVATE LOUNGE,LLC., provided that the corporation is then in existence.

HOUSE RULES of Bosses Private Lounge

1. The right to use the privileges and facilities of the Club and other property of the Organization in accordance with the Bylaws and House Rules of the Organization is extended to each member and his/her immediate family. An exception, however, is made in the case of adult sons/daughters, 21 years of age, of members, who to enjoy such a right, are required to become members themselves.
2. Any member may bring with him/her to the Club, nonmember relatives or friends, but the constant use of such privilege amounting to an abuse thereof shall not be allowed.
3. Sale of alcoholic beverages is restricted to anyone who is visibly intoxicated and/or unruly, under NO circumstances. This is not permitted
4. The member bringing guests to the club property will be held responsible for their conduct and compliance with House Rules.
5. Members bringing nonmembers to the Clubrooms shall be responsible for such nonmembers and shall pay all charges for such nonmembers.
6. No minor shall enjoy the facilities of the Organization at any time, period.
7. Each member shall be responsible for all damages to the Club or Organization property of any kind caused by himself/herself, his/her family, or his/her guests and upon his/her failure to reimburse the Organization within thirty days after notice by the Secretary of such charge, he/she shall be dropped from the rolls of the Organization.
8. Each member is under obligation to always conduct himself/herself in a respectable manner during his/her use of the Club property and facilities. Under no circumstances shall ungentlemanly/unladylike conduct or obscene or profane language be permitted in the Club or on any portion of the Organization property.
9. Members having suggestions or complaints as to the management of the Club or other facilities of the Organization may present them in writing to the Board of Directors.

Adopted May 3, 2021
Last Amended April 15, 2022



**MEMBERSHIP LIST
BOSSES PRIVATE LOUNGE/CLUB**

Address: 201 Richard Arrington Jr. Blvd. Birmingham, AL 35233
Phone Number: (205) 756-1886

Hours of Operation
Monday-Thursday 12pm-2am
Friday & Saturday 11pm-2am
Sunday 2pm-12am

BOSSSES PRIVATE LOUNGE MEMBER LIST

1. Vermon Kimble
5600 Court Q
Birmingham, Al 35208

2.TATANISHA MOORER
1836 19TH AVE NORTH
Birmingham, AL 35234

3. PRINCE SHEPHERD
1124 15TH STREET SW
Birmingham, AL 35211

4. VERONICA SHEPHERD
1121 15th street sw APT 6
Birmingham, AL 35211

5. KATHERINE MCKENZIE
1909 30TH AVE NO
Birmingham, AL 35207

6. SHAWN HIGHTOWER
1789 STEINER AVE
Birmingham, AL 35211

7. DANDRE GOODEN
110 E Hawkins Parkway APT 4307
Longview, TX 75605

8. NAAMON RIGGS
3113 CAROUSEL CT APT A
Birmingham, AL 35216

9. Venida Manning
1508 ARTHUR SHORES DR APT C
Birmingham, AL 35211

10. PATRICIA RIGGS
1720 6TH NW STREET
Birmingham, AL 35215

11. JOHN GOODEN
2201 14TH AVE NORTH
Birmingham, AL 35234

12. AMBER MAXWELL
2850 VENICE RD SW APT 2308
Birmingham, AL 35211

13. Andrea Payne
1423 32nd street n
Birmingham, AL 35234

14. Tiffany Campbell
Carrington lakes parkway
Birmingham, AL 35215

15. NATASHA REASOR
660 Valley Crest drive APT E85
Birmingham, AL 35215

16. KIARA EVANS
108 DUGAN AVE APT E
Birmingham, AL 35214

17. AMBER TUCKER
153 Sterling Cir NW apt D
Birmingham, AL 35215

18. VONQUETTE THOMAS
3184 45TH AVE NORTH
Birmingham, AL 35207

19. JIMMIE PAYNE
1440 TUSCALOOSA AVE
Birmingham, AL 35211

20. LAKESHIA RINGO
1440 TUSCALOOSA AVE
Birmingham, AL 35211

21. NAKIA SANDERS
740 CLOVER DRIVE
Birmingham, AL 35214

22. Kevin Poe
740 CLOVER DRIVE
Birmingham, AL 35214

23. William Sharp
5065 Bella Court
Moody, AL 35004

24. SALEEMAH AKRAM
829 79TH PL S
Birmingham, AL 35206

25. ROSALIND HARDING
1508 ALABAMA AVE
Birmingham, AL 35211

26. MESHANTA MYLES
900 27TH AVE NE
Birmingham, AL 35215

27. WILLIAM PENNELL
501 VANDERBILT STREET APT A
Birmingham, AL 35206

28. Christopher Davis
35 Ansley Street
Jasper, AL 35504

29. MARY SHARP
35 ANSLEY
Jasper, AL 35504

30. DANNY BATTLE
1300 16TH COURT NO APT A
Birmingham, AL 35204

31.MATTELYN PARKS
2160 KELLY ST APT 4C
Augusta, GA 30904

32. CHARLES KING
153 sterling Cir NW Apt D
Birmingham, AL 35215

33. Justin Payne
3109 CHASE LANE
Birmingham, AL 35215

34. MARCIA PAYNE
3109 CHASE LANE
Birmingham, AL 35215

35. ROSEMARY ALLEN
2128 EMERALD POINTE DRIVE APT 9
Birmingham, AL 35216

36. TRACY KIRKMAN
467 ALTAMONT DR
Pleasant Grove, AL 35127

37. Jacob Jones
7130 hwy 253
Guin, AL 35563

38. RODERICK PARKER
4720 40TH PL NO
Birmingham, AL 35217

39. Dejordan Stenson
4859 Hutson Avenue
Birmingham, AL 35207

40. ARETELVION COLLIER
1129 DEVINE DR
Birmingham, AL 35214

41.TYNETTA BYRD
518 VILLA ESTA LANE
Birmingham, AL 35214

42. MARKIA LEWIS
704 Clover Drive
Birmingham, AL 35214

43. Zaria Robinson
1423 32nd street n
Birmingham, AL 35234

44. Joshua Mcferrin
7508 15th street road
Hueytown, AL 35023

45. DARINA INGRAM ADAMS
4859 Hutson Ave
Birmingham, AL 35207

46. BYRON MOSLEY
1113 PEBBLE CREEK PPKWAY APT F
Birmingham, AL 35214

47. Demetrius Robinson
3306 Ridge Manor Drive APT 2
Birmingham, AL 35216

48. Jennifer Wilson
2027 CENTER WAY SOUTH
Birmingham, AL 35206

49. MALINDA EVANS
514 newton drive
Birmingham, AL 35228

50. JOHNATHIA GOODEN
1341 16TH AVE SOUTH-SIDE A
Birmingham, AL 35205

51. MICHELLE PETTWAY
4004 SAINT JOHN LANE
Birmingham, AL 35215

52. DONNA SIMPSON
1721 1ST PLACE SOUTH
Birmingham, AL 35205

53. JOHNATHAN GOODEN
5310 GASTON AVENUE APT 107
Dallas, TX 75214

54. Cassandra Brown-Wright

210 SHELTERWOOD CIRCLE
Pinson, AL 35126

55. CARLINE BERMUDEZ
2612 15TH STREET NORTH
Birmingham, AL 35204

56. DONALD JELKS
915 HICKORY KNOLL
Birmingham, AL 35226

57. ED RODGERS
1241 SEATTLE STREET
Birmingham, AL 35224

58. Shanese TALL
478 IOTA AVE S
Birmingham, AL 35205

59. Jeremy Mccrary
300 Elm Street
Leeds, AL 35094

60. RAPHAEL TRINIDAD
1103 BLOSSOM AVE
Suisun City, CA 94585

61. Gary Armstrong
140 South Run Circle
Birmingham, AL 35244

62. Tellvia Callins
6632 Ave N
Birmingham, AL 35228

63. MYRIN WHITE
1539 CROWN POINT DRIVE
Mount Olive, AL 35117

64. Douglas Perez Portillo
3779 Timberlake Road
Bessemer, AL 35023

65. MICHAEL LEWIS
7715 2ND COURT NORTH APT 4
Birmingham, AL 35206

66. Joshua Smith
51 Standifer Dr
Odenville, AL 35120

67. CHERYL SAMUEL
3418 ROGER WILLIAMS ST
New Orleans, LA 70119

68. MATTHEW BROWN
535 FULTONBROOK DRIVE
Fultondale, AL 35068

69. SHAVARIS CALLOWAY
1907 PORTAGE AVE
Birmingham, AL 35234

70. ERIC KIMBLE
1619 1ST STREET SOUTH
Birmingham, AL 35205

71. Devin Callins
6632 Ave N
Birmingham, AL 35228

72. FRANCES WILLIAMS
1203 SUMMERCHASE DRIVE
Birmingham, AL 35244

Continued on next page
in written format

ZONES PRAYERS LOGS

MEMBERS LIST

1. Cassandra Wright	210 Shefferwood Cir. Pinson AL 35126
2. Jimmy Payne	1440 Tuscaloosa Ave. Bham AL 35211
3. Marc Sharp	35 Ansley Rd. Jasper AL 35504
4. Donald Jelks	915 Hickory Knoll Bham, AL 35226
5. Byron Mosley	1113 Pebble Creek Pkwy. Bham AL 35214
6. Gary Armstrong	140 South Run Cir. Bham AL 35244
7. Francis Williams	1203 Summer Chase Dr. Bham AL 35244
8. Bianca Patrick	706 2nd Ave No. Bess. AL 35080
9. Ophelia Daniels	5350 Ken Saly Dr. Calhoun AL 35453
10. Sandra Macon	11644 6th Pl. NW Bham AL 35215
11. Steven Eubanks	308 Martin DR. Bham AL 35215
12. DeCoriye Myles	2821 Sydney Dr. #106 Bham AL 35211
13. Jessica Rapley	4004 St. John Ln. Bham AL 35215
14. Laneisha Johnson	2471 Chestnut Ridge. Bham AL 35216
15. Tranisha Morrow	7228 Division Ave. Bham AL 35206
16. Amanda Ware	9821 Greenlee Rd Bham AL 35215
17. Angelique Riggs	2421 7th Pl. NE Bham AL 35215
18. Sade Watts	1515 31st St. No. Bham AL 35234
19. Yasanian Watts Dillard	2230 4th Ave No. Bham, AL 35205
20. Michael Craig	5621 Hwy. 69 S. #1931 Tuscaloosa AL 35405
21. Cameron Thomas	2511 Wildwood Crossings Bham AL 35211
22. Daniel Reid	3111 Carousel Ct #B Bham AL 35216
23. Deric Jackson	40 20th Ave So. Bham AL 35205
24. Brenda McKinney	760 Gene Reed Rd. Bham, AL 35235
25. Jeremy McCarty	300 Elm St. Leeds AL 36094

Eric Kimble	11019 1st St. So. Bham 35205
Iesha Johnson	7738 4th Ave So th C Bham 35206
Michelle Pettway	400 1/2 St. John Ln Bham 35205
Reginald Dunning	400 1/2 St. John Ln Bham 35205
Matinda Fowler	514 Newton Drive N. Field 35208
Johnathia Gooden	808 7th Ave N. Field 35208
Patricia Piags	1720 6th St. NW Bham AL 35215
David Brown	3036 Apple Valley LN. Bham 35215
Myrin White	3108 Hillcrest Trace Bham 35205
Rebekah Nordire	1406 Wild Forest Dr. Bham 35209
Kiara Evans	108 Dugan Ave #E Bham AL 35214
Tanisha Moorer	1826 19th Ave Ab. Bham AL 35214
Shwataura Lester	4201 Bessemer Rd 35020 Bham AL
Carl Lester	4201 Bessemer Rd Bham AL 35020
Pernethia Gamble	1128 Aurora Cir. Bham AL 35215
Gerald Jones	528 N. Bessemer 35020
Artelvion Collier	1129 Devine Dr. Bham AL 35214
William Pennell III	501 Vanderbilt Street #C Bham 35206
Anthony Jones	866 60th Pl. Fairfield AL 35064
Candice Patton	3036 Apple Valley LN Bham AL 35215
Malika Fluker	2512 30nd St. #6 Bham AL 35476
Malika Fluker	2542 30nd St. #6 Northham AL 35476
Danny Battle	1713 30nd Pl. No th C Bham AL 35204
Daria Adams	4859 Hutson Ave Bham AL 35207
Emma Rodgers	509 85th Street South Bham AL 35206
Nyeshia Nurwood	100 Huntley Dr #1004 Pelham AL 35124

Demetrius Robinson	3306 Ridge Manor Dr. Bham AL 35246
Donna Simpson	1721 1st Pl. So. Bham AL 35205
Jacob Jones	7130 Hwy 80 GUN AL 35563
Markia Lewis	704 Clover Drive Bham AL 35214
Kevin Poe	740 Clover Drive Bham AL 35214
Christopher Davis	35 Anstey St. Jasper AL 35501
Charles King	
Tiffany Campbell	Carrington Lake Pkwy Bham AL 35215
Jennifer Wilson	2027 Center Way So. Bham AL 35206
Matthew Brown	535 Fullonsdale AL 3
Matthew Brown	535 Fullon Brook Dr. Fullonsdale AL 35068
Amber Tucker	153 Sterling Cir. NW #D Bham AL 35215
Joshua Smith	51 Standifer Dr. Odenville AL 35180
Ed Rodgers	1241 Seattle St. Bham AL 35224
Lakeshia Binyo	1440 Tuscaloosa Ave Bham AL 35211
Shawn Hightower	1789 Steiner Ave Bham AL 35211
Roderick Parker	4720 40th Pl. No. Bham, AL 35247
Tynetta Byrd	518 Villa Esta W. Bham AL 35214
Andrea Payne	1423 3rd St. No. Bham AL 35234
Sharonis Colloway	1907 Portage Ave Bham AL 35234
William Sharp	5065 Bella Ct Moody AL 35004
Jeremy McCrary	300 Elm St. Leeds AL 35094
Shanese Tall	478 Jata Ave S. Bham AL 35205
Davin Collins	6632 Ave No Bham AL 35228
Joshua McFerrin	7508 15th St. Hueytown AL 35023
Telvia Collins	6632 Ave No. Bham, AL 35228
Vonquette Thomas	3184 45th Ave No. Bham, AL 35207

Rosalind Harding	1508 Alabama Ave Bham AL 35211
Naaman Riggs	3113 Carousel Ct #A Bham AL 35216
Anya McQueen	1229 Five Mile Rd Bham AL 35215
Antonio Lawson	8001 Ft Ave S. Bham AL 35206
Katherine Moore	1909 30th Ave. No. Bham AL 35206
Terryauna Manley	2320 Centerway So. Bham AL 35205
Venida Manning	1508 Ardhor Shores Dr. Bham AL 35211
Jacoria Manning	1508 Ardhor Shores Dr. Bham AL 35211
Terrykah Kimble	7306 Division Ave. Bham AL 35206
Nikita Buford	2320 Centerway So. Bham AL 35206
Terry Manley	2320 Centerway So. Bham AL 35206
Natasha Pearson	806 Jubilee Cir. Pell City AL 35215
Nekya Williams	5339 Willow Ridge Ln. Prichard AL 35136
DeJordan Skason	4859 Hudson Ave. Bham, AL 35207
Joe Veronica Shepherd	1121 15th St. SW #6 Bham AL 35211
MeShana Myles	716 24th Ave N.W. #C Bham AL 35215
Marcia Payne	3109 Chase W. Bham AL 35215
Nakia Sanders	740 Clover Dr. Bham, AL 35214
Michael Lewis	7715 2nd Cf. No #B Birmingham AL 35206
Zaria Robinson	1423 3rd St. No. Bham, AL 35234
Carline Bermudez	2612 15th St. No. Bham, AL 35204
Tracy Kirkman	467 Affluent Dr. Pleasant Gr. AL 35127
Rosemary Allen	2128 Emerald Pointe Dr. Bham AL 35216
Amber Maxwell	2850 Venice Rd. SW #280 Bham AL 35211
Saleemah Akram	829 79th Pl. So. Bham AL 35206

Bosses Private Lounge BUSINESS PLAN

Prepared by:

Angela Gooden Kimble

201 Richard Arrington Jr Blvd S
Birmingham, Alabama 35233
)205)756-1886
angelagooden38@gmail.com

I. EXECUTIVE SUMMARY

Bosses Private Lounge (referred to from hereon in as the "Company") is intended to be established as a Limited Liability Company at 201 Richard Arrington Jr Blvd S, Birmingham, Alabama 35233 with the expectation of rapid expansion in the social entertainment industry.

Business Description

The Company shall be formed as Limited Liability Company under Alabama state laws and headed by Angela Gooden Kimble.

Event Specialist- 10 years
Events Manager -8 years
Security Engineer-6 years
Manager-12 years
Accounting and Tax Prep-8 years
Bookkeeping-10 years
Business Experience-20 years

The Company will employ 6 full-time employees and 2 part-time employees.

Management Team

The Company has assembled an experienced management team:

Director of Security and Marketing - Pernithia Gamble, 8 years experience with Wells Fargo Security and Unlimited Entertainment LLC

Business Mission

My goal for Bosses Private lounge is to create a safe fun Entertainment Venue for the upper class individuals that own their own businesses to have somewhere to come and enjoy themselves. The main focus will be providing a secure, safe location with valet parking to set the mind of guests at ease to enjoy the evening.

New Service

The Company is prepared to introduce the following service to the market:

Social Private Club: Providing entertainment for business owners that will also make a place for social and business networking. BPL will open from 5pm to 2am Sunday-Wednesdays and 5pm-4am Thursday-Saturday. Hours are subject to change upon discretion.

This will be a upscale Establishment

Dress Code will be strictly enforced.

Birmingham Police Department will provide security onsite

No sneakers of any kind

No Tank tops or T-shirts

No Sagging Pants

Valet parking will be available

All members must adhere to all rules and regulations of this establishment or membership will be revoked.

II. BUSINESS SUMMARY

Industry Overview

In the United States, the social entertainment industry presently makes 500,000 dollars in sales.

Research shows that consumers in this industry primarily focus on the following factors when making purchasing decisions:
All members must qualify for membership

1. At least 21 years of age
2. Have and continue to operate a successful business for at least two years.
3. Club Rules & Regulations
4. Members, and their Guests are expected to abide by these Membership Rules and any violation of the Rules may subject the Member to suspension or forfeiture of their Membership.
5. Members and guests are fully responsible for personal items that are lost, stolen, or damaged at the Club.
6. It is strictly forbidden for any Member or Guest to bring any food or beverage to the club.
7. Good order, proper hygiene, appropriate attire, and consideration of the rights and comforts of others must be observed at all times.
8. No Abusive or Provocative Language. Respect other members.
7. Any complaints regarding the conduct of staff or of a Member or Guests should be reported directly to the Club Management Team.
8. Smoking is NOT permitted at all
9. Walking bare feet is NOT permitted, please make sure your shoes are comfortable.
10. Valet parking will be provided for \$10, or self parking located across the street inside Birmingham Parking Authority Deck for free, validate your parking with Valet office.
11. Members and Guests are required to follow the parking and traffic regulations. Parking in reserved, restricted or unmarked areas will result in the removal of the offending cars at the expense of its registered owner.
12. Members and guests may not display actions that the Club staff deems unsportsmanlike or rude, or misuse, move or alter any portion of the Club environment or property; any abuse will result in loss of Membership and Club Privileges.
14. Members shall pay for any loss or damage to property for which they or their Guests are responsible. No property or furniture shall be moved from or to the Club without management approval.

We hope you enjoy all the benefits of a safe and effective private club!!

Business Goals and Objectives

Short Term:

- Acquire at least 500 plus members
- Provide a place where members want to return.
- Gain sales of at least \$5000 per night

Long Term:

- Offer a superior experience for members, Stay focused on budget and profit for success

Legal Issues

The Company affirms that its promoters have acquired all legally required trademarks and patents.

III. MARKETING SUMMARY

Target Markets

The Company's major target markets are as follows:

People who are prominent in business, respected socially, and who fit the culture of the club. Those that are aware of and engaged in the membership process and bring others of the same nature with them.

The estimated number of potential clients within the Company's geographic scope is 500.

Pricing Strategy

The Company has completed a thorough analysis of its competitors' pricing. Keeping in mind our competition's pricing and the costs of customer acquisition, we have decided on the following pricing strategy:

Members will pay a \$30 fee for membership.

No door charge with a 3 drink minimum. Any guests they bring will have a \$20 door cover charge for each visit, with a limit of 3 visits, after that a membership will be required.

Promotional Strategy

The Company will promote sales using the following methods:

Website, Online Marketing, Celebrity guests, Direct Marketing, word of mouth

Services

First-rate service is intended to be the focus of the Company and a cornerstone of the brand's success. All clients will receive conscientious, one-on-one, timely service in all capacities, be they transactions, conflicts or complaints. This is expected to create a loyal brand following and return business.

IV. FINANCIAL PLAN

12-Month Profit and Loss Projection

Monthly expense for salaries and overhead (projected):	\$6,500.00
Revenue and sales for first year of business (projected):	\$400,000.00
Gross profit for first year of business (projected):	\$300,000.00

Date of this notice: 02-24-2021

Employer Identification Number:
86-2259770

Form: SS-4

Number of this notice: CP 575'G

BOSSSES PRIVATE LOUNGE LLC
ANGELA M GOODEN SOLE MBR
1179 16TH AVE W
BIRMINGHAM, AL 35204

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 86-2259770. 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.

When filing tax documents, payments, and 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.

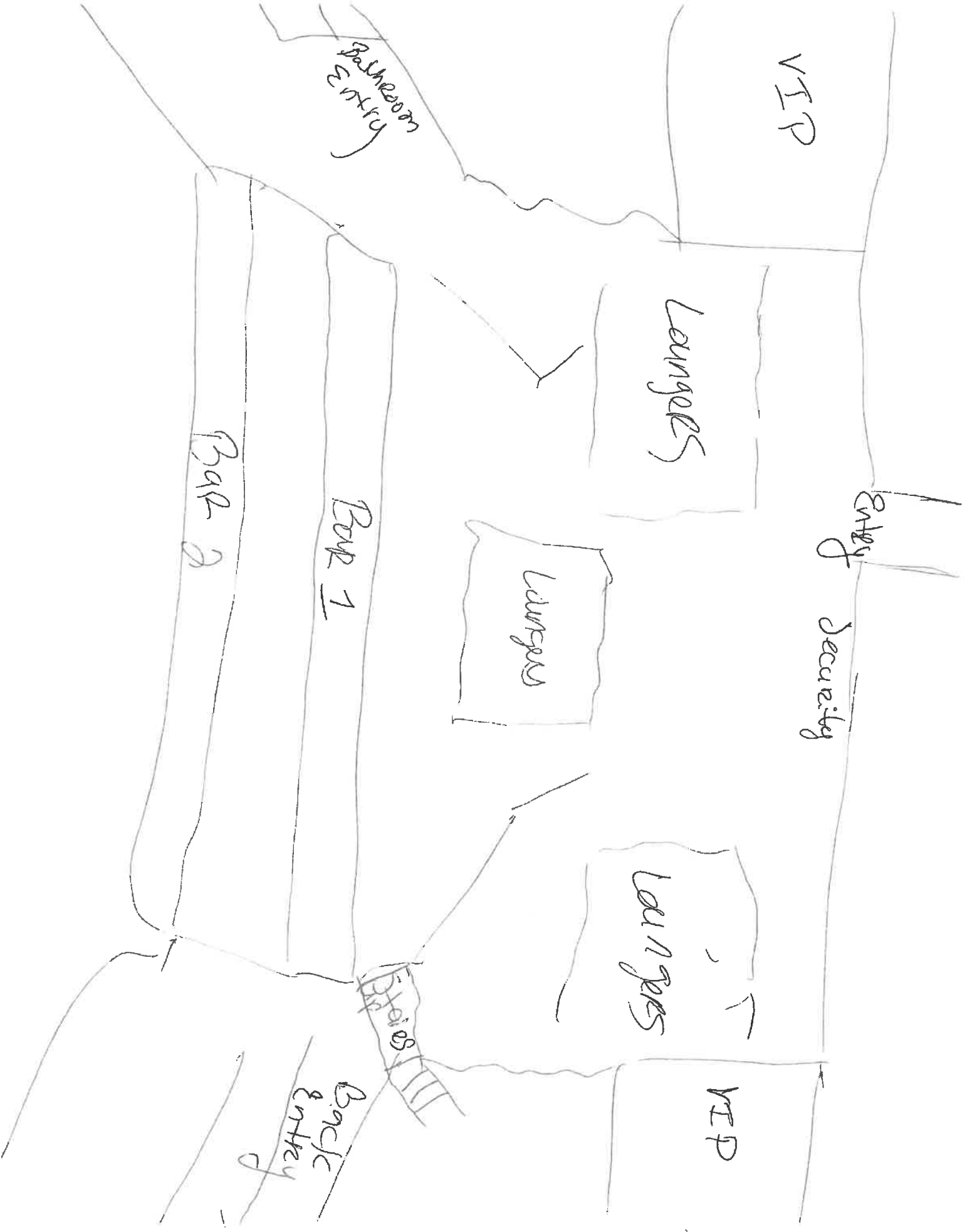
IMPORTANT REMINDERS:

- * 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.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

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

Thank you for your cooperation.



VIP

Entry

Security

Loungers

Loungers

Loungers

VIP

Restroom
Entry

Bar 1

Bar 2

Restroom

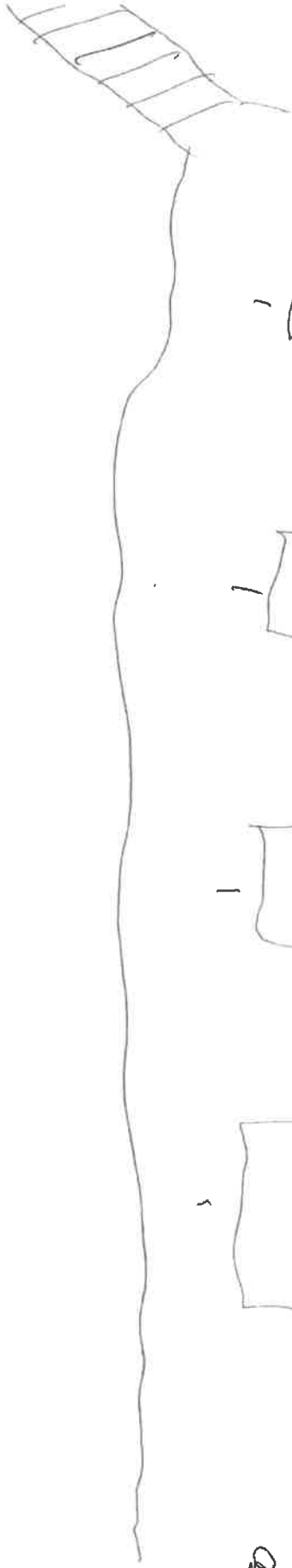
Back
Entry

Lounger

Room 1

Dance Area

Lounger



Upstairs

Sitting Area

Bathroom

PARCEL ID: 012200364018004000

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

DATE: Wednesday, April 13, 2022 10:08:17 AM

OWNER: JACK SMITH REAL ESTATE LLC

ADDRESS: 2520 MARCAL RD

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35244

SITE ADDR: 201 RICHARD ARRINGTON JR BLVD

CITY/STATE: BHAM, AL

ZIP: 35233

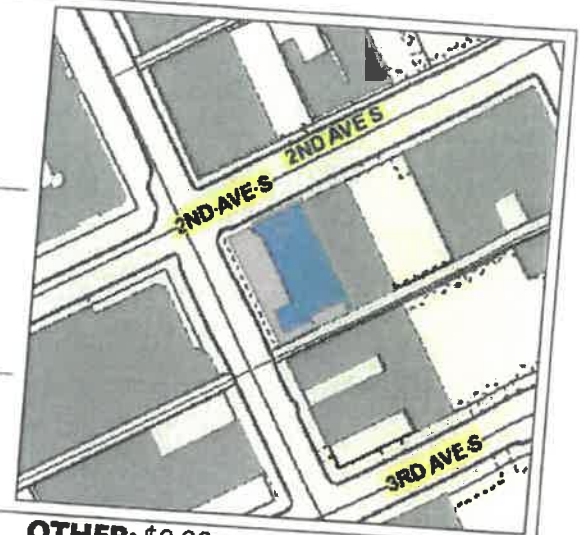
LAND: \$378,000.00

BLDG: \$79,900.00

OTHER: \$0.00

AREA: 13,900.16

ACRES: 0.32



SUBDIVISION INFORMATION:

NAME BIRMINGHAM BLOCKS

BLOCK: 137

LOT: 8A

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Automotive

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: 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.

SENT TO: CC latonya.tate@birmingham.al.gov
 brandon.mccray@birmingham.al.gov
 gregory.stanley@birmingham.al.gov
 danny@ourjameshome.com

Neighborhood Voting Form: Liquor Applications

Date: 6/15/22

Application Type: New – Restaurant Retail Liquor

Subject: Applicant's Entity Name RJ Five Points West LLC
 Business Name Crab Barrack
 Business Address 1108 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 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 FIVE POINTS SEARCH Neighborhood Association met on JUNE 21, 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)

8 Attendance 0 Oppose 8 Support 0 No Recommendation
 NEIGHBORHOOD IN

Reason for Opposition WAS NOT OPPOSED. NEIGHBORS PLEASED TO HAVE NEW BUSINESS IN THIS ESTABLISHED LOCATION

Applicant: attended NA meeting did not attend NA meeting

Sheila McChaffin 6/21/2022
 President/Officer
 SHEILA MCHAFFIN

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.

6/24/2022

11:03 205-586-5560

LaSandra Hall.

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: RJ Five Points West LLC

Mailing Address: 1108 20th St S
Birmingham, AL 35205

Trade Name: Crab Barrack

Location Address: 1108 20th St S

Contact Number: (205)586-5560

Contact Person:
LaSandra Hall

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 40TBS/160CHS

Date Applied: 6/15/22

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

(Enter Type of License Applied For)

By: GS

(Revenue Official)

1. Name of Applicant (s) RJ Five Points West 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: <u>[REDACTED]</u> <u>Bin Qiang Jin</u>	Member	<u>[REDACTED]</u> China	3191 Chase Ct Birmingham, AL 35235	5 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 956-071 Page: 1 of 3 Date: 12/07/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Crab Barrack
- 4(a) Location 1108 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: **1108 20th St S Birmingham, AL 35205**
- (d) Business Phone Fax: Other Contact: **(205)586-5560**

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 Munger LLC
PO Box 130715 Birmingham, AL 35213
Address

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description I Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **40TBS/160CHS**

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
NO - Applicant				

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 15th 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.

For Zoning Purposes Only:
Restaurant Retail Liquor-Type 020

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: RJ Five Points West LLC
Attention: _____
Address: 1108 20th St S
City: Birmingham State: AL Zip Code: 35205
Area Code and Phone Number: (205)586-5560
Area Code and Fax Number: _____
Name of Contact Person: LaSandra Hall
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): Crab Barrack
Attention: _____
Address: 1108 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: _____
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:
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: Restaurant

Product: 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 87-3875976 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.

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 Jin, Bin	TITLE Member	SOCIAL SECURITY NUMBER

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 June 15, 2022

LaSandra Heel _____ Phone Number of Person Completing Application 205 586-5560

CITY OFFICE USE ONLY Location _____

ZONING APPROVAL AND COMMENTS:
OK B306/15/22 ER
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

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.)
Location

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.)
Location

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"/>



DRIVER LICENSE

ALABAMA

NO. 99647441

CLASS D

D.O.B. 09-17-1987

EXP 09-17-2017

BIN QIANG JIN

3191 CHASE CT

BIRMINGHAM AL 35235-4305

ENDORSEMENTS

ISS. 09-17-2017

REST
SEX M

HT 5-10
WT 175

EYES BRO
HAIR BLK

Secretary Hal Taylor
Secretary of Law Enforcement

Handwritten signature

SOCIANT SECURITIES

CYAL SECUR

THIS NUMBER HAS BEEN ASSIGNED FOR

BEN JAMES BEN

Ben James Ben

SIGNATURE



UNITED STATES DEPARTMENT OF HOMELAND SECURITY

DEPARTMENT OF



DEPARTMENT OF

No. 29510640

Personal description of holder
as of date of naturalization:

ETS Registration No.

Date of birth: SEPTEMBER 17, 1974

I certify that the description given is true, and that the photograph affixed
hereto is a likeness of me.

Sex: MALE

Height: 5 feet 10 inches

B. QIANG JIN
(Complete with true signature of holder)

Marital status: MARRIED

Country of former nationality:

CHINA, PEOPLES REPUBLIC OF

Be it known that, pursuant to an application filed with the Secretary of
Homeland Security:

at: JACKSONVILLE, FLORIDA

The Secretary, having found that:

BIN QIANG JIN

then residing in the United States, intends to reside in the United States; where so
required by the Naturalization laws of the United States, and had in all other
respects complied with the applicable provisions of such naturalization laws and
was entitled to be admitted to citizenship, such person having taken the oath of
allegiance in a ceremony conducted by the

US DISTRICT COURT NORTHERN DISTRICT



at: PENSACOLA, FLORIDA

that such person is admitted as a citizen of the United States of America.

IT IS PUNISHABLE BY U S LAW TO COPY,
PRINT OR PHOTOGRAPH THIS CERTIFICATE,
WITHOUT LAWFUL AUTHORITY.

Sheweth *Bin Qiang Jin* Citizenship and Immigration Services

DEPARTMENT OF HOMELAND SECURITY



STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

1. THE NAME OF THE LIMITED LIABILITY COMPANY

RJ FIVE POINTS WEST LLC

2. THIS FORM WAS PREPARED BY:

BIN QIANG JIN

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

**BIN QIANG JIN
1108 20TH STREET SOUTH
BIRMINGHAM, AL 35205
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 6
- SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11

(FOR SOS OFFICE USE ONLY)

Alabama
Sec. Of State

956-071 DLL

Date	12/07/2021
Time	15:54:00
File	\$100.00
County	\$100.00
Exp	\$0.00

Total	\$200.00

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:

RJ FIVE POINTS WEST LLC

This name reservation is for the exclusive use of BIN QIANG JIN, 1108 20TH STREET SOUTH, BIRMINGHAM, AL 35205 for a period of one year beginning December 07, 2021 and expiring December 07, 2022



RES990363

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.

December 07, 2021

Date

J. H. Merrill

John H. Merrill

Secretary of State

6. THE UNDERSIGNED SPECIFY 12/07/2021 15:54:02 AS THE EFFECTIVE DATE AND THE TIME OF FILING



ATTACHED ARE ANY OTHER MATTERS THE MEMBERS DETERMINE TO INCLUDE HEREIN

7. ORGANIZER(S) - OPTIONAL

Organizer	Office Address	Mailing Address
BIN QIANG JIN	1108 20TH STREET SOUTH BIRMINGHAM, AL 35205	1108 20TH STREET SOUTH BIRMINGHAM, AL 35205
	12/07/2021 DATE	BIN QIANG JIN ORGANIZER ELECTRONIC SIGNATURE & TITLE

LEASE SUMMARY

Landlord:

Name: Munger, LLC, an Alabama limited liability company
Address: P.O. Box 130715
Birmingham, Alabama 35213

Tenant:

Name: RJ Five Points West, LLC, an Alabama limited liability company
Address: 1108 20^t Street South
Birmingham, AL 35205

Building:

Munger Building which is located at 1102 20th Street South, Birmingham, Alabama 35205

Premises and Approximate Square Footage:

Approximately 5,641 square feet, as shown on that picture attached hereto as Exhibit A.

Term of Lease:

Sixty (60) calendar months, commencing on the Commencement Date. If the Commencement Date occurs on a date other than the first day of a calendar month, then the period from the Commencement Date to the first day of the next calendar month shall be added to the Term.

Commencement Date:

The earlier to occur of March 30, 2022, or the date Tenant opens for business on the Premises.

Minimum Rent:

\$3,864.09 per month.

Other Sums Payable:

Taxes, Insurance, Common Area Charge, Utilities, which are estimated to be \$2,134.18 per month

Tenant Tradename:

Crab Barrack

Permitted Use:

Seafood restaurant

Security Deposit: \$5,998.27

Guarantor: Not Applicable

Date of this notice: 12-07-2021

Employer Identification Number:
87-3875976

Form: SS-4

Number of this notice: CP 575 G

RJ FIVE POINTS WEST LLC
BIN QIANG JIN SOLE MBR
1108 20TH STREET SOUTH
BIRMINGHAM, AL 35205

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 87-3875976. 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.

When filing tax documents, payments, and 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.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

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

Thank you for your cooperation.

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023
|.....|

RJ FIVE POINTS WEST LLC
BIN QIANG JIN SOLE MBR
1108 20TH STREET SOUTH
BIRMINGHAM, AL 35205

Your Telephone Number Best Time to Call _____
() - _____
DATE OF THIS NOTICE: 12-07-2021
EMPLOYER IDENTIFICATION NUMBER: 87-3875976
FORM: SS-4
NOBOD

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.
9999999999999999
CP 575 G

Keep this part for your records. CP 575 G (Rev. 7-2007)



ALABAMA LAW ENFORCEMENT AGENCY

RECORDS AND IDENTIFICATION DIVISION

301 S. RIPLEY STREET / P.O. BOX 1511 / MONTGOMERY, AL 36102
PHONE 334.353.4340 / ALEA.GOV

KAY IVEY
GOVERNOR

HAL TAYLOR
SECRETARY

May 18, 2022

Dear Mr. Jin,

The ALEA Criminal Justice Information Services Division has received and processed your Alabama Criminal History Record Information (CHRI) request.

Our review found no state criminal records based on the information you provided in your application, based on a fingerprint check of Alabama criminal records only. As additions or deletions to an individual's criminal history may be made at any time, a new request for your state CHRI should be made via the same procedure if it is needed later.

Please do not hesitate to contact the Criminal Justice Information Services Division at 334-353-4340 if we may be of further assistance in this matter.

Respectfully,

A handwritten signature in black ink, appearing to read "W. Avery Morris".

W. Avery Morris, CLEE
Operations Commander
Criminal Justice Information Services Division
Alabama State Bureau of Investigation

XXXXXXXXXXXX STATE ABI SEARCH RESULT AND RAP SHEET XXXXXXXXXXXXXXX
TCN:8002203106
NAME:JIN,BIN QIANG
SOC:237990748
ABI RESULT:IDENT
SID:AL02986606

**CERTIFIED COPY
OF ALEA DOCUMENT**

05-18-2022 11:40 ALLEA0049 *
*ATN/TCN8002203106 *
*OPR/AFIS *
*FOLLOWING RESPONSE IS TO YOUR INQUIRY ON SID AL02986606 *
*-CIVIL APPLICANT RESPONSE- REPORT DATE: 05-18-2022 *
*NAME STATE ID NO. FBI ID NO. *
*JIN,BIN QIANG AL02986606 *
*SEX RACE BIRTH DATE HEIGHT WEIGHT EYE HAIR POB *
*M A 09-17-1978 510 175 BRO BLK CN *
*SOCIAL SECURITY SCARS-MARKS-TATTOOS *
*237990748 *
*FILE NUMBER BIRTH DATE SOCIAL SECURITY OCCUPATION *
* * *

*LAST PAGE ON SID AL02986606 *

SEQ # 618 MRI # 72536605

JEFFERSON COUNTY DEPARTMENT OF HEALTH

FOOD PERMIT

PERMIT NO. 27469

DATE ISSUED 06/09/2022

AN INSPECTION BY AN AUTHORIZED REPRESENTATIVE OF THE DEPARTMENT OF HEALTH HAS DETERMINED REASONABLE COMPLIANCE WITH THE REQUIREMENTS OF JEFFERSON COUNTY REGULATIONS GOVERNING THE MANUFACTURE, PREPARATION, DISPLAY, AND SERVICE OF FOODS, CONFECTIONS, AND BEVERAGES; THEREFORE A FOOD PERMIT IS ISSUED TO:

THE CRAB BARRACK

**LOCATED AT: 1108 20TH ST S
BIRMINGHAM, AL 35205**

TO ENGAGE IN THE BUSINESS OF MANUFACTURING, PREPARING, HANDLING, SERVING, OR DISTRIBUTING FOOD INTENDED FOR HUMAN CONSUMPTION IN THE COUNTY OF JEFFERSON IN ACCORDANCE WITH THE LAWS AND REGULATIONS OF THE COUNTY AND THE STATE OF ALABAMA.

THE NATURE OF THE BUSINESS IS CLASSIFIED AS FOLLOWS:

FOOD PERMIT - LEVEL 3

THIS PERMIT IS VALID FROM DATE OF ISSUE, IS NOT TRANSFERABLE AND IS RENEWABLE IN ACCORDANCE WITH THE LAWS PERTAINING THERETO UNLESS SUSPENDED OR REVOKED. IT SHALL BE CONSPICUOUSLY POSTED ON THE PREMISES FOR WHICH ISSUED.

* NON TRANSFERABLE * EXPIRATION DATE 9/30/2022



Approved by:
Mark E. Wilson, M.D.
Health Officer

Jonathan Stanton, Director
Environmental Health Services



JEFFERSON COUNTY
DEPARTMENT OF HEALTH
1400 Sixth Avenue South
Birmingham, Alabama 35202

Invoice Number: 104042204035

06/09/2022

Payment For: Food Permit - Level 3

Received From: RJ Five Points West LLC - The Crab Barrack

Amount: \$275.00

Received by

PARCEL ID: 012900011012004000

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

DATE: Wednesday, June 15, 2022 8:15:09 AM

OWNER: MUNGER LLC

ADDRESS: P.O. BOX 530277

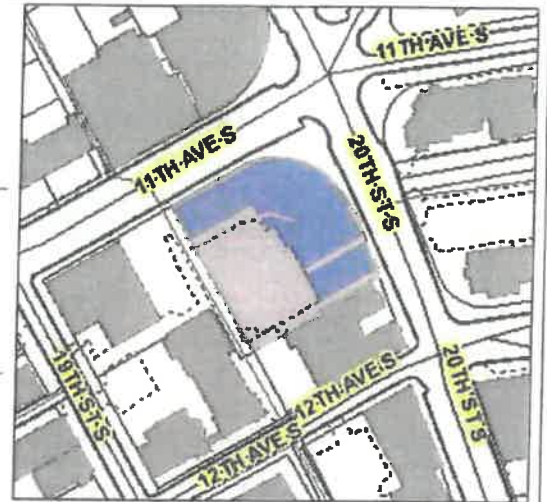
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35253

SITE ADDR: 1102 20TH ST S

CITY/STATE: BHAM, AL

ZIP: 35205



LAND: \$1,939,100.00

BLDG: \$1,736,000.00

OTHER: \$0.00

AREA: 43,979.41

ACRES: 1.01

SUBDIVISION INFORMATION:

NAME BHAM BLK 770 RES 29-1-1

BLOCK: 770

LOT: 3A

:

Section: 6-18-2W; 1-18-3W

Land Slide Zones: In Land Slide Zones

Historic Districts: Five Points South

Commercial Revitalization District: Five Points South

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 - 3 (Councilor: Valerie A. Abbott)

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: 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.

LICENSE STATUS REPORT FORM

Date: **11/9/2020**

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Maiadah A. Abdullah
Business Name Graymont Food
Business Address 541 Graymont Ave W Ste A

Type of License & Description

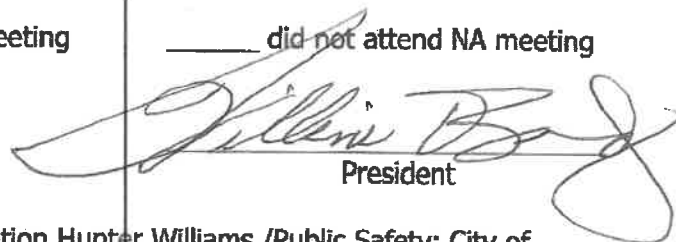
- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off 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 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 Graymont Neighborhood Association met on June 15th 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)

6 Attendance _____ Oppose 1 Support _____ No Recommendation

Reason for Opposition _____

Applicant: ✓ 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.

6/24/2022
11:05
Lynelle Peters
Left VM

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>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 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: _____

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: 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.

- 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
 - Business License 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 _____
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-02-OK-AOS-11-9-2020
 Must be approved by City Council 137

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 <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"/>

LIMITED TERM



FN DRIVER LICENSE

ALABAMA

NO. 9580416 CLASS D

D.O.B. 06-20-1993 EXP. 05-04-2023

MALABAH ABDURAHMA

ABDULLAH

2860 REGAL GIR APT 5

VESTAVIA HILLS AL 35216-4660

ENDORSEMENTS

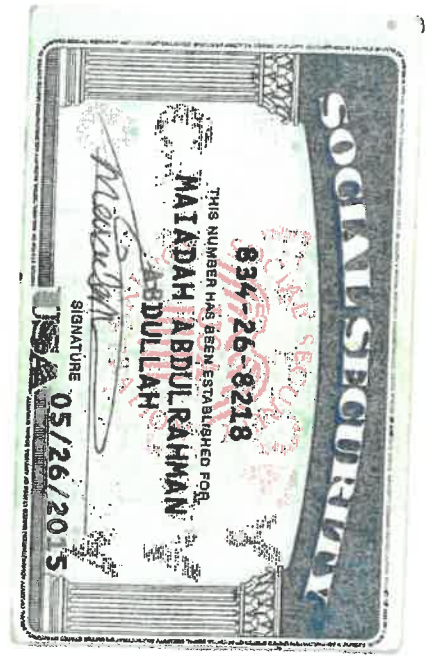
ISS 06-20-2019 EXPI

HT 5-09 WT 112 HAIR BLK



Secretary/Neil Taylor
Secretary of Law Enforcement

Malabaha



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 Peters
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

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

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.

LICENSE STATUS REPORT FORM

Date: **12/3/21**

To: Latonya Tate, Chairman
Public Safety

Subject: Applicant's Name QWIKH LLC
Business Name Hood Quick Mart
Business Address 213 Dugan Ave PC, Ste A

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 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 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 North Pratt Neighborhood Association met on May 10, 2022 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)

 Attendance Oppose X Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting

 X did not attend NA meeting

Faith Abraham Faith Abraham
President

(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.

11:25

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

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

Name of Applicant: QWIKH LLC
Mailing Address: 213 Dugan Ave PC, Ste A
Birmingham, AL 35214
Trade Name: Hood Quick Mart
Location Address: 213 Dugan Ave PC, Ste A
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: 12/3/21

Revenue Examiner: GS

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

**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) QWIKH 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] Yagoub Saleh Mohamed	Member	[REDACTED] Detroit, MI	213 Dugan Ave PC Birmingham, AL 35214	7 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 845-898 Page: 1 of 3

Date: 04/09/2021

County: Jefferson

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

3. Trade Name Hood Quick Mart

4(a) Location 213 Dugan Ave PC, Ste A
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35214 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **213 Dugan Ave PC, Ste A Birmingham, AL 35214**

(d) Business Phone _____ Fax: _____ Other Contact: **(205)563-2075**

5. Name, trade name and License number of last or previous licensee: **Erik Trinh**
Trade name Hood Qwik Mart Year 2014 Type 150k 150n Taxpayer ID 481004

6 (a) Owner of real estate for which license is desired Erik Trinh
213 Dugan Ave PC Birmingham, AL 35214
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>ND - 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 December, 2021

[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.

TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)

I, Erik Tu Trinh (current taxpayer), holding City of Birmingham

License ID# [REDACTED] located at 213 Duane Ave Ste A PC
(six-digit City ID) (business address)

Birmingham, AL 35214, hereby agree that said License be

transferred to QWIKH LLC (applicant)
provided QWIKH LLC (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 QWIKH LLC
(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 Symette Peters

DATE 12-3-21

APPLICANT Yusef Sur

DATE 12-3-21

Witness [Signature]
NOTARY Greg Stuber

DATE 12-3-21

Summary of calls for service for Hood Mart – 213 Dugan Ave

Total Calls for service 6 months- 36

January 23,2022- June 23,2022

06/17/2022 : 22:50:21 macanno Narrative: REQ OFCR TO LOC

06/17/2022 : 22:49:32 macanno Narrative: STS THEY WERE ARGUING AT EACH OTHER AND CURSING LOUD

06/17/2022 : 22:49:28 macanno Narrative: MALE WITH HAND BEHIND HIS HEAD HAD WEARING WHITE T-SHIRT, BLUE SHORTS SAGGING

06/17/2022 : 22:47:44 macanno Narrative: STS HE HAD THE GUN TO ANOTHER B/M IN FRONT OF HIM WITH HIS HANDS BEHIND HIS HEAD

06/17/2022 : 22:47:02 macanno Narrative: STS SHE SEEN A B/M, SHORT DREADS, THEY CALL HIM "BLACK MAC" WITH A GUN

06/17/2022 : 22:46:12 macanno Narrative: BEHIND THE LOC

06/13/2022 : 19:51:59 dbbryan Narrative: CALLER IS NOT AT THE LOC....SEE THIS ON HIS CAMERA

06/13/2022 : 19:51:39 dbbryan Narrative: SUBJ IS KYDELL

06/13/2022 : 19:51:13 dbbryan Narrative: SUBJ IS NOT SUPPOSED TO BE THERE

06/13/2022 : 19:51:05 dbbryan Narrative: CALLER STS THERE IS A BM TALL SKINNY IS INSIDE THE LOC

06/12/2022 : 17:35:26 kzcraig Narrative: REQ A OFCR TO ASK THEM TO LEAVE

06/12/2022 : 17:35:15 kzcraig Narrative: CALLER STS HE HAS PPL IN HIS PARKING LOT ABOUT 5 BLK MALES

06/07/2022 : 00:43:22 srharri Narrative: MALE LEFT LOCATION

06/07/2022 : 00:26:20 dfulle Narrative: MALE IN RED HAT REFUSING TO LEAVE THE STORE...STS THE MALE IS BEATING ON THE DOOR

06/06/2022 : 20:53:15 amgerma Narrative: REQ OFFICER...

06/06/2022 : 20:53:12 amgerma Narrative: ABOUT 6 BM...

06/06/2022 : 20:53:01 amgerma Narrative: CALLER STS ITS SEVERAL PEOPLE HANGING OUTSIDE DRINKING AND TALKING...

05/28/2022 : 12:24:05 sdhende Narrative: ONE HAS ON RED SHORTS, OTHERS HAVE ON DK SHORTS

05/28/2022 : 12:23:41 sdhende Narrative: SEE COMP.....CALLER STS THERE'S 3 BM'S OUTSIDE ARGUING ON HIS LOT, REQ OFC

05/27/2022 : 00:14:24 tjones Narrative: NO OTHER INFO

05/27/2022 : 00:14:19 tjones Narrative: CALLER STS THAT 3 MEN STANDING NEAR THE VEH BM'S

05/27/2022 : 00:13:23 tjones Narrative: CALLER STS THAT PEOPLE IN A SILVER VEH AT THE LOC DRINKING A ND WILL NOT LEAVE THE PARKING LOT

05/24/2022 : 11:30:28 vгатkin Narrative: comp sts police poss looking for sibj also the call him denkin

05/24/2022 : 11:29:21 vгатkin Narrative: male hanging outside want leave subj wearing blue hat /blue shirt/ light blue pants

05/17/2022 : 20:57:16 sldavid Narrative: REQ OFCR MK THEM LEAVE

05/17/2022 : 20:57:04 sldavid Narrative: 3RD PARTY CALLER , CALLING FOR SAM THE OWNER

05/17/2022 : 20:56:50 sldavid Narrative: ABT 6 BMS SITTING OUT IN FRT OF LOC DRINKING

05/14/2022 : 22:44:28 mdleona Narrative: multiple bm in front of location that he want removed

05/12/2022 : 17:25:26 alduff Narrative: wants an officer ot make them move on.

05/12/2022 : 17:25:21 alduff Narrative: caller states that there is a bout 4 or 5 males hangin out in front of the loc refusing to leave..

05/08/2022 : 17:24:49 djcade Narrative: REQ UNIT TO CLEAR

05/08/2022 : 17:24:46 djcade Narrative: REQ UNIT TO CLEAR OUT THE FRONT OF THE STORE ... STS WHEN THE POLICE COME THEY JUST HIDE BEHIND THE BUILDING

05/05/2022 : 15:06:29 cmray Narrative: 3-4 B/M

05/05/2022 : 15:05:58 cmray Narrative: PEOPLE HANGING IN FRINT OF THE BUSINESS

05/05/2022 : 11:19:46 rjames Narrative: 1024

05/05/2022 : 11:19:26 rjames Narrative: HOLDING RADIO

05/05/2022 : 11:16:09 vгатkin Narrative: STORE # 205-791-9988

05/05/2022 : 11:13:28 vгатkin Narrative: COMP STS HE CAN SEE CAMERA OF SUBJ ON HIS PHONE SUBJ STILL ON SCENE

05/05/2022 : 11:12:32 vгатkin Narrative: SUBJ WAS STILL AT LOCA WHEN HE LEFT

05/05/2022 : 11:12:21 vгатkin Narrative: FYI: COMP HAS LEFT SEE MITCH AT LOCA COMP STS HE HAS DOCTOR APT

05/05/2022 : 11:11:15 vгатkin Narrative: SUBJ STILL ON SCENE

05/05/2022 : 11:11:08 vгатkin Narrative: SUBJ ON FOOT

05/05/2022 : 11:11:05 vгатkin Narrative: STS SUBJ HANG OUT ON PROPERTY ALL THE TIME

05/05/2022 : 11:10:50 vгатkin Narrative: BM WEARING BLK T SHIRT/ BLK HAT / BLK PANTS WITH WF

05/05/2022 : 11:10:09 vгатkin Narrative: STS HE WANT TO GO GET A HAMMER

05/05/2022 : 11:10:00 vгатkin Narrative: STS SUBJ TRYING TO KNOCK THE WALL OUT

05/05/2022 : 11:09:35 vгатkin Narrative: COMP STS MALE STS HE LOST 20 DOLLARS

4/19/2022 : 16:59:33 drdavis Narrative: NO OTHER DETAILS OR DESCRIPTIONS.

04/19/2022 : 16:59:00 drdavis Narrative: CALLER STS THAT A GROUP OF YOUNG BLACK MALES ARE OUTSIDE GAS STATION FIGHT WITH GUNS.

03/18/2022 : 17:04:16 acknobl Narrative: FIRE STATION 13 200 DUGAN AVE

03/18/2022 : 17:03:07 acknobl Narrative: HEARD ARGUING

03/18/2022 : 17:03:00 acknobl Narrative: WHITE SUV/ PERSON SHOOTING AT SOMEONE AT GAS STATION

03/18/2022 : 17:02:32 acknobl Narrative: PER BFRS SHOTS FIRED AT GAS STATION ACROSS FROM STATION

03/11/2022 : 21:21:11 dbbryan Narrative: caller wants them removed

03/11/2022 : 21:21:01 dbbryan Narrative: caller sts there are about 6 bm's standing around his door to the business

03/11/2022 : 21:20:30 dbbryan Narrative: caller requesting police to the loc

/11/2022 : 12:24:15 krrutle Narrative: HARASSING CUSTOMERS

03/11/2022 : 12:23:58 krrutle Narrative: REFUSING TO LEAVE

03/11/2022 : 12:23:52 krrutle Narrative: IN FRONT OF THE LOCA

03/11/2022 : 12:23:48 krrutle Narrative: 2 BMS AT THE LOCA

03/10/2022 : 19:36:22 sbsteel Narrative: caught by train for about 15 minutes

03/10/2022 : 19:08:45 cmray Narrative: CALLER STS THAT HE NEEDS THEM TO MOVE'

03/10/2022 : 19:08:37 cmray Narrative: 3 B/M'S

03/10/2022 : 19:08:31 cmray Narrative: PEOPLE HANGING AROUND HIS BUSINESS

3/08/2022 : 00:34:25 dlbrown Narrative: STS STORE IS CLOSED RIGHT NOW

03/08/2022 : 00:33:55 dlbrown Narrative: WANTS THEM GONE FROM LOCA

03/08/2022 : 00:33:46 dlbrown Narrative: BM WEARING DREDS ORANGE HOODIE, BM WEARING HUNTING SUIT

03/08/2022 : 00:33:24 dlbrown Narrative: CALLER STS 2 MALE IS HANGING OUTSIDE OF STORE

03/03/2022 : 21:11:33 sbsteel Narrative: Dispatch stated that complainat left the location and would call back when she got home

03/03/2022 : 20:55:13 tjones Narrative: SUBJ LEFT THE LOC

03/03/2022 : 20:54:43 dlgenou Narrative: IS HE STILL THERE?

03/03/2022 : 20:54:07 tjones Narrative: SUBJ IN A BLK ALTIMA

03/03/2022 : 20:53:36 tjones Narrative: CALLER STS THAT SHE HAVE A PROTECTION ORDER ON THE MALE BECAUSE HE SLAPPED HER LAST YEAR

03/03/2022 : 20:52:51 tjones Narrative: CALLER IN A WHITE CHARGER

03/03/2022 : 20:52:35 tjones Narrative: OPEN LINE

03/03/2022 : 20:52:28 tjones Narrative: CALLER STS THAT BM CARLOS JOHNSON PULLED A GUN OUT ON HER TAG #1FB6085

03/01/2022 : 00:42:41 crwashi Narrative: 3 BM UNK CLOTHING

03/01/2022 : 00:42:36 crwashi Narrative: 2 BM ARMY JACKET...BLUE JEANS

03/01/2022 : 00:41:44 crwashi Narrative: 1 BM WEARING ALL BLACK CLOTHING

03/01/2022 : 00:41:12 crwashi Narrative: STS POSS SMOKING

03/01/2022 : 00:41:02 crwashi Narrative: CALLER STS 3 MALE ARE STANDING ON CORNER OF THE STORE

PARCEL ID: 012200203032007000

SOURCE: TAX ASSESOR RECORDS **TAX YEAR:** 2021

DATE: Friday, December 3, 2021 12:49:12 PM

OWNER: TRINH ERIK

ADDRESS: 213 DUGAN AVE

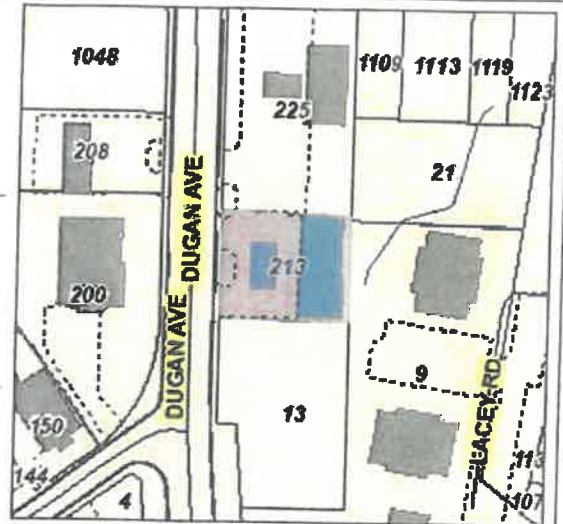
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35214--5150

SITE ADDR: 213 DUGAN AVE

CITY/STATE: BHAM, AL

ZIP: 35214



LAND: \$11,100.00

BLDG: \$144,100.00

OTHER: \$0.00

AREA: 13,798.95

ACRES: 0.32

SUBDIVISION INFORMATION:

NAME WAINWRIGHT AD-P C 22-20-3

BLOCK:

LOT: 6&7

:

Section: 20-17-3W

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: No. Pratt (1302)

Communities: Pratt (13)

Council Districts: District - 9 (Councilor: LaTonya Tate)

Zoning Outline: B2

Demolition Quadrants: DEM Quadrant - 2

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: 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.

SENT TO: latoya.tate@birmingham.al.gov
brandon.mccray " " "
gregory.stanley " " "
danny@ourjakeshome.com

Neighborhood Voting Form: Liquor Applications

Date: 5/12/22

Application Type: Transfer Application – On/Off Premise Beer/Wine

Subject: Applicant's Entity Name Remington Investment LLC
Business Name Ikko Ramen & Sushi
Business Address 1909 11th Ave 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 SUMMIT Neighborhood Association met on MAY 17, 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)

10 Attendance 0 Oppose 10 Support 0 No Recommendation
IN NEIGHBORS

Reason for Opposition WAS NOT OPPOSED. NEIGHBORS FREQUENT AND ENJOY THIS RESTAURANT. THEY RUN A CLEAN OPERATION. WE ARE PLEASED TO HAVE THEM CONTINUE.

Applicant: attended NA meeting did not attend NA meeting

Sheila M. Chaffin 5/18/2022
President/Officer
SHEILA M 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.

06/24/2022
Mai Li @ 11:30
917-442-1458
sent text

Transfer Application – Retail Beer/Wine (On/Off Premises)

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

Name of Applicant: Remington Investment LLC

Mailing Address: 1909 11th Ave S
Birmingham, AL 35205

Trade Name: Ikko Ramen & Sushi

Location Address: 1909 11th Ave S

Contact Number: (917)442-1458

Contact Person:
Mei Li

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/50CHS

Date Applied: 5/12/22

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) Remington Investment 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] Qi Ming Li	Member	[REDACTED] China	14 Canvasback DR Oxford, AL 36203	13 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 960-140 Page: 1 of 3 Date: 01/05/2022 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Ikko Ramen & Sushi
- 4(a) Location 1909 11th Ave 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: **1909 11th Ave S Birmingham, AL 35205**
- (d) Business Phone **(205)203-4833** Fax: _____ Other Contact: **(917)442-1458**

5. Name, trade name and License number of last or previous licensee: **Noble Investment Group LLP**
Trade name Ikko Ramen & Sushi Year 2018 Type 150L 150M Taxpayer ID 470399
216

- 6 (a) Owner of real estate for which license is desired DM Drennen and Emma Houston Drennen
1910 12th 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 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **12TBS/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 _____
- (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
NO - Applicant				

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 12th day of May, 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:
Retail Beer/Wine (On/Off Premise)
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: Remington Investment LLC
Attention: _____
Address: 1909 11th Ave S
City: Birmingham State: AL Zip Code: 35205
Area Code and Phone Number: (917)442-1458
Area Code and Fax Number: _____
Name of Contact Person: Mei Li
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): Ikko Ramen & Sushi
Attention: _____
Address: 1909 11th Ave S
City: Birmingham State: AL Zip: 35205
Area Code and Phone Number of Business Location: (205)203-4833
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: Noble Investment Group LLP
Trade Name (d/b/a) Ikko Ramen & Sushi
Mailing Address of Former Owner 1909 11th Ave S
Address (es) of Former Location(s) 1909 11th Ave S
Area Code and Phone Number of Former Owner: (917)442-1458

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
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: Restaurant Product: 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 87-4265902 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 LI, QI	TITLE Member	SOCIAL SECURITY NUMBER
		[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: 5/12/22
 Signature of Person Completing This Application

Qi Ming Li Phone Number of Person Completing Application: 917-442-1458
 Print the Name of the Person Completing This Application

CITY OFFICE USE ONLY - Location

ZONING APPROVAL AND COMMENTS:
B3 - Must have City Council Approval first
5/12/2022
 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"/>

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.)
Location

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.)
Location

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"/>

DRIVER LICENSE



ALABAMA

NO. [REDACTED] CLASSED [REDACTED]

LI [REDACTED] EXPIRES [REDACTED]

1st CANVASBACK OR ONE GRID AL 3620313986

ENTIRE [REDACTED] NEXT A [REDACTED]

SEX M HT 5-06 WT 145 HA BRN EYES BLK

Signature: [REDACTED]

Department of Law Enforcement

SOCIAL SECURITY

THIS NUMBER HAS BEEN ESTABLISHED FOR

[REDACTED]

DATE OF BIRTH [REDACTED]

STATE OF ALABAMA

SIGNATURE [REDACTED]

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

I, Noble Investment Group LLC, holding City of Birmingham
(current taxpayer)

License ID# [REDACTED], located at 1909 1st Ave S
(six-digit City ID) (business address)

Birmingham, AL 35205, hereby agree that said License be

transferred to Remington Investment LLC
(applicant)

provided Remington Investment LLC obtains approval
(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 Remington Investment LLC
(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 [Signature]

DATE 5/12/22

APPLICANT [Signature]

DATE 5/12/22

WITNESSES
NOTARY [Signature]

DATE 5/12/22

DRIVER LICENSE



ALABAMA



Secretary of State
Department of Transportation

Mei Ling

D.O.B. [REDACTED] CLASS D
 MEI LING LI
 14 GAYVASSBAG DR
 OXFORD AL 36203-3499
 END [REDACTED]
 ISS [REDACTED] EXPI [REDACTED]
 HT 5'06 WT 105 HAIR BRN EYES BRN

2

**ADMENDMENT #2
COMMERCIAL LEASE AGREEMENT**

THIS ADMENDMENT is entered into March 5, 2018, by and between D.M. Drennen and Emma Houston Drennen Memorial Trust of Saint Mary's Church as Landlord with Watts Realty Co., Inc., as Agent and Broker for the Landlord, and Aly Properties, LLC as Tenant.

WITNESSETH:

WHEREAS, the Landlord and Tenant entered into that certain Commercial Lease ("Lease") dated the 16th day of November 2016, between Landlord and Tenant leasing the premises known as 1909 11th Avenue South, Birmingham, AL 35205; and,

WHEREAS, Tenant has been doing business as Ikko Ramen & Sushi at the leased premises;

WHEREAS, the Tenant desires to continue doing business as Ikko Ramen & Sushi, but establish a new legal entity for the lease and other business purposes;

WHEREAS, the Landlord and Tenant both desire to move forward in good faith and good standing;

NOW THEREFORE, the parties agree that the Lease shall be amended as follows:

1. Tenant Name Change: The Tenant shall now be Noble Investment Group LLP.
2. Guaranty: Aly Properties, LLC will be added as a guaranty in addition to Zhi Yu Yang.
3. All other terms and conditions of this Lease are hereby reaffirmed except as modified herein.

IN WITNESS WHEREOF, the Landlord and Tenant have respectively executed these presents the ___ day of March, 2018.

Noble Investment Group LLP (Tenant)
Melling Li 3/8/18
Melling Li, General Partner Date

Kaitlin Weber
Witness
Print Name: Kaitlin Weber

Aly Properties, LLC (Prior Tenant - New Guarantor)
Lin Z Li 3/8/18
Lin Z Li Date
Its: Member

Kaitlin Weber
Witness
Print Name: Kaitlin Weber

Zhi Yu Yang (Continued Guarantor)
Zhi Yu Yang 3/8/18
Zhi Yu Yang Date
Its: Member

Kaitlin Weber
Witness
Print Name: Kaitlin Weber

D.M. Drennen and Emma Houston Drennen
Memorial Trust of Saint Mary's Church (Landlord)
By: WATTS REALTY CO., INC. As Agent

David Watts 3/8/18
David Watts, CPM Date

**AMENDMENT #3
COMMERCIAL LEASE AGREEMENT**

THIS AMENDMENT is entered into April 13, 2022, by and between D.M Drennen and Emma Houston Drennen Memorial Trust of Saint Mary's Church as Landlord with Watts Realty Co., Inc., as Agent and Broker for the Landlord, and Noble Investment Group, LLP as tenant.

WITNESSETH:

WHEREAS, the Landlord and Tenant entered into that certain Commercial Lease ("Lease") dated the 16th day of November 2016, between Landlord and Tenant leasing the premises know as 1909 11th Avenue South, Birmingham, AL 35205; and,

WHEREAS, Tenant has been doing business as Ikko Ramen & Sushi at the leased premises;

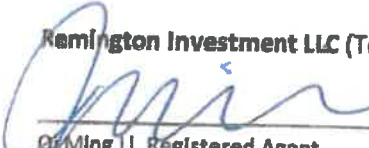


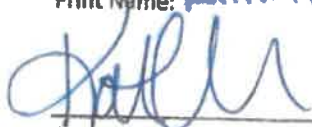



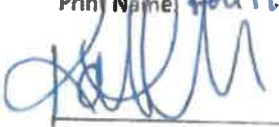

WHEREAS, the Tenant desires to continue doing business as Ikko Ramen & Sushi, but establish a new legal entity for the lease and other business purposes;

NOW THEREFORE, the parties agree that the Lease shall be amended as follows:

1. **Tenant Name Change:** The Tenant shall now be Remington Investment LLC.

All other terms and conditions of this Lease are hereby reaffirmed except as modified herein.

IN WITNESS WHEREOF, the Landlord and Tenant have respectively executed these presents the ____ day of April, 2022.

<p>Remington Investment LLC (Tenant)  4/26/22 Mei Ling Li, Registered Agent Date</p>	<p> Witness Print Name: Kaitlin Weber</p>
<p>Noble Investment Group LLP (Prior Tenant)  4/14/22 Mei Ling Li, Member Date</p>	<p> Witness Print Name: Kaitlin Weber</p>
<p>Aly Properties, LLC (Continued Guarantor)  4/14/22 Lin Z Li, Member Date</p>	<p> Witness Print Name: Kaitlin Weber</p>
<p>Zhi Yu Yang (Continued Guarantor)  4/14/22 Zhi Yu Yang Date</p>	<p> Witness Print Name: Kaitlin Weber</p>
<p>D.M. Drennen and Emma Houston Drennen Memorial Trust of Saint Mary's Church (Landlord) By: Watts Realty Co., Inc. as Agent  5/3/2022 David Watts, CPM Date</p>	



STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

1. THE NAME OF THE LIMITED LIABILITY COMPANY

Remington Investment LLC

2. THIS FORM WAS PREPARED BY:

Ellie Yu

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

Qi Ming Li
1909 11th Avenue S
Birmingham, AL 35205
JEFFERSON

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

14 Canvasback Drive
Oxford, AL 36203
TALLADEGA

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
960-140 DLL

Date	01/05/2022
Time	15:37:00
File	\$100.00
County	\$100.00
Exp	\$0.00
Total	\$200.00

6. THE UNDERSIGNED SPECIFY 01/05/2022 15:37:52 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

01/05/2022
DATE

Qi ming Li Member
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:

Remington Investment LLC

This name reservation is for the exclusive use of Ellie Yu, 3425 Pelham Parkway, Pelham, AL 35124 for a period of one year beginning January 05, 2022 and expiring January 05, 2023



RES994989

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.

January 05, 2022

Date

J. H. Merrill

John H. Merrill

Secretary of State

Date of this notice: 01-05-2022

Employer Identification Number:
87-4265902

Form: SS-4

Number of this notice: CP 575 A

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

REMINGTON INVESTMENT LLC
QI MING LI SOLE MBR
3425 PELHAM PKWY
PELHAM, AL 35124

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 87-4265902. 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.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 941	04/30/2022
Form 940	01/31/2023

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification (corporation, partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S, U.S. Income Tax Return for an S Corporation, must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents or other payroll service providers, are available to assist you. Visit www.irs.gov/efbusproviders for a list of companies that offer IRS e-file for business products and services.

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 REMI. 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.

PARCEL ID: 012900011012001000

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

DATE: Thursday, May 12, 2022 11:22:09 AM

OWNER: DRENNEN D M & EMMA HOUSTON

ADDRESS: 1910 12TH AVE S

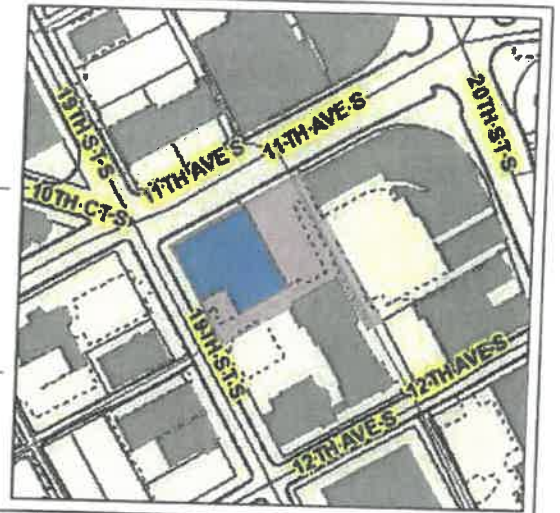
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35205--3804

SITE ADDR: 1901 11TH AVE S

CITY/STATE: BHAM, AL

ZIP: 35205



LAND: \$1,179,400.00

BLDG: \$683,500.00

OTHER: \$0.00

AREA: 31,682.96

ACRES: 0.73

SUBDIVISION INFORMATION:

NAME BLK 770 RESUR NO 3

BLOCK: 770

LOT: 2-B

- Section:** 1-18-3W
- Land Slide Zones:** In Land Slide Zones
- Historic Districts:** Five Points South
- Commercial Revitalization District:** Five Points South
- 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 - 3 (Councilor: Valerie A. Abbott)
- Zoning Outline:** B3; CO&I
- 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:** 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.

Neighborhood Voting Form: Liquor Applications

Date: 6/15/22

Application Type: New – Restaurant Retail Liquor

Subject: Applicant's Entity Name Slice Crestline, LLC
Business Name Slice Pizza & Brew
Business Address 1101 Dunston Ave

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 Crestline Neighborhood Association met on 6-16-22 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)

1 Attendance 0 Oppose 1 Support ___ No Recommendation

Reason for Opposition _____

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

Clerody Miller
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.

6/24/2022

11:35

VM 205-410-8776

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: Slice Crestline LLC

Mailing Address: 725 29th St S
Birmingham, AL 35233

Trade Name: Slice Pizza & Brew

Location Address: 1101 Dunston Ave

Contact Number: (205)410-8776

Contact Person:
Denise Koch

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 8TBS/47CHS

Date Applied: 6/15/22

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

(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Slice Crestline 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] Jason Brian Bajalieh	Member	[REDACTED] Birmingham, AL	3023 Weatherton Dr Birmingham, AL 35223	
ALDL# [REDACTED] Christopher Saleh Bajalieh	Member	[REDACTED] Birmingham, AL	5016 10 th Ct S Birmingham, AL 35222	

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 948-054 Page: 1 of 5 Date: 10/14/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Slice Pizza & Brew
- 4(a) Location 1101 Dunston Ave
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35213 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: 725 29th St S Birmingham, AL 35233
- (d) Business Phone _____ Fax: _____ Other Contact: (205)410-8776

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 The Barber Companies Inc
27 Inverness Center Pkwy Birmingham, AL 35242
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/47CHS

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 **9/9/22** Ending **9/10/22**
(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 15th 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.

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: Slice Crestline, LLC
Attention: _____
Address: 725 29th St S
City: Birmingham State: AL Zip Code: 35233
Area Code and Phone Number: (205)410-8776
Area Code and Fax Number: _____
Name of Contact Person: Denise Koch
E-Mail: dlovoykoch@gmail.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): Slice Pizza & Brew
Attention: _____
Address: 1101 Dunston Ave
City: Birmingham State: AL Zip: 35213
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
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: Restaurant

Product: 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 87-3106753 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.

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

3

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 lodging 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
Bajalieh, Jason	Member	[REDACTED]
Bajalieh, Christopher	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

6/15/2022
 Date


 Print the Name of the Person Completing This Application

205-410-8774
 Phone Number of Person Completing Application

Denise Koch

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
 B-1-OKAY-ANG
 6/15/2022

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.)
Location

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.)
Location

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

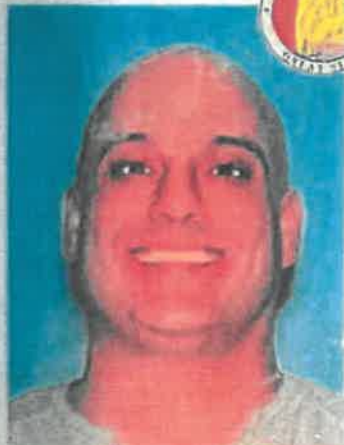
ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

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"/>



DRIVER LICENSE

ALABAMA



NO. 9327356

CLASS DV

D.O.B. 06-29-1980

EXP 03-08-2022

JASON BRIAN
BAJALIEH

3023 WEATHERTON DR
MOUNTAIN BRK AL 35223

ENDORSEMENTS

ISS 02-15-2022

SEX M

HT 6-00

WT 230

EYES BRO

HAIR BLD

J. B.



Secretary Hal Taylor
Secretary of Law Enforcement

DRIVER LICENSE

ALABAMA



NO. 6073771

CLASS D

D.O.B. 08-30-1976

EXP. 01-08-2024

CHRISTOPHER SALEH
BAJALIEH

5016 10TH CT S
BIRMINGHAM AL 35222-8020

ENDORSEMENTS

REST

ISS. 02-28-2020

SEX M

HT 5-11

EYES BRO

WT 195

HAIR BRO

Secretary Hai Taylor



Alabama Secretary of State



Slice Crestline LLC	
Entity ID Number	000 - 948 - 054
Entity Type	Domestic Limited Liability Company
Principal Address	Not Provided
Principal Mailing Address	Not Provided
Status	Exists
Place of Formation	Alabama
Formation Date	10/14/2021
Registered Agent Name	Bajalieh, Chris
Registered Office Street Address	Post Office Box 43649 Vestavia Hills, AL 35243
Registered Office Mailing Address	Post Office Box 43649 Vestavia Hills, AL 35243
Nature of Business	
Organizers	
Organizer Name	Horsley, David L
Organizer Street Address	2320 Highland Ave Ste 175 Birmingham, AL 35205
Organizer Mailing Address	2320 Highland Ave Ste 175 Birmingham, AL 35205
Scanned Documents	
Purchase Document Copies	
Document Date / Type / Pages	10/14/2021 Certificate of Formation 5 pgs.

[Browse Results](#)

[New Search](#)

Date of this notice: 10-14-2021

Employer Identification Number:
87-3106753

Form: SS-4

Number of this notice: CP 575 A

SLICE CRESTLINE LLC
CHRISTOPHER BAJALIEH MBR
POST OFFICE BOX 43649
VESTAVIA HILLS, AL 35243

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 87-3106753. 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.

When filing tax documents, payments, and 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.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941	04/30/2022
Form 940	01/31/2023
Form 1065	03/15/2022

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

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.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at www.irs.gov for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

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.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

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

Thank you for your cooperation.

OPERATING AGREEMENT OF SLICE CRESTLINE LLC

This Operating Agreement of SLICE CRESTLINE LLC (the "Company"), a limited liability company organized pursuant to the Alabama Limited Liability Company Law of 2014, is made and entered into as of the 12th day of May, 2022, with an effective date of October 14, 2021, by and between Christopher Bajalieh, an individual, and Jason Bajalieh, an individual (individually, the "Member" and collectively, the "Members") of the Company.

For and in consideration of the mutual covenants herein contained and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Members hereby agree to the terms and conditions of this Agreement, and any amendments or modifications thereto that may from time to time be adopted in accordance with the terms hereof. The Members hereby agree that each Member and Manager shall be entitled to rely on the provisions of this Agreement, and no Member or Manager shall be liable to the Company or to any Member, Manager or Assignee for any action or refusal to act taken in good faith reliance on the terms of this Agreement. Except as provided to the contrary in this Agreement, the rights and obligations of the Managers, Members and any Assignees with respect to the Company, and the administration of the Company, shall be governed by the Alabama Limited Liability Company Law of 2014.

ARTICLE 1 - DEFINITIONS

The definitions set forth in this Article shall apply throughout this Agreement unless the context clearly indicates otherwise. Certain other terms are defined elsewhere in this Agreement for convenience.

Affiliate means with respect to a specified person (i) any other Person, directly or indirectly, controlling, controlled by, or under common control with the Person, (ii) any Person owning or controlling fifty percent (50%) or more of the outstanding voting interests of the specified Person, (iii) any member, manager, officer, director or general partner of such Person, or (iv) any Person who is a member, manager, officer, director, general partner, trustee or a holder of fifty percent (50%) or more of the voting interests of any Person described in clauses (i) through (iii) of this sentence. For purposes of this definition, the term "control," "controlling," "is controlled by," or "is under common control with" shall mean the possession of the power, directly or indirectly, to direct or cause the direction of the management and policies of such Person, whether through the ownership of voting securities, by contract or otherwise.

Agreement means this Operating Agreement as originally executed and as amended, modified, supplemented or restated from time to time, as the context requires.

Alabama LLC Law means the Alabama Limited Liability Company Law of 2014 and all amendments thereto.

Approved Debts means those liabilities of the Company that need not be paid in cash upon liquidation of the Company, as described in Section 10.4.

Assign means to make an Assignment.

Assigned Interest means the interest in the Company that is transferred as a result of an Assignment. An Assigned Interest is an Economic Interest only.

Assignee means the owner of an Assigned Interest who is not a Member.

Assignment means any method whatsoever, whether direct or indirect and whether voluntary or involuntary, by which the legal or beneficial ownership of any interest in the Company is transferred or

LEASE

**CRESTLINE PARK SHOPPING CENTER
JEFFERSON COUNTY, ALABAMA**

This Indenture of Lease, made and entered into as of the _____ day of _____, 2022, by and between **THE BARBER COMPANIES, INC.**, an Alabama corporation ("**Landlord**"), having a mailing address of 27 Inverness Center Parkway, Birmingham, Alabama 35242, and **SLICE, LLC**, an Alabama limited liability company, d/b/a **SLICE PIZZA** ("**Tenant**"), having a mailing address of _____

WITNESSETH:

ARTICLE 1
DEFINITIONS

1.1 **Landlord** and **Tenant** agree that the following definitions shall apply to the various provisions of this lease which refer to them.

1.1.1 "**ADA**": the Americans with Disabilities Act of 1990, as it may be amended from time to time.

1.1.2 "**Additional Rent**": all sums, other than **Fixed Minimum Rent**, payable by **Tenant** to **Landlord** pursuant to the terms of this lease.

1.1.3 "**Applicable Environmental Law**": defined in Section 5.7.

1.1.4 "**Building**": that certain building in which the **Premises** are located.

1.1.5 "**CAM Charge**": a charge to help offset **Landlord's** expenses incurred in maintaining the **Shopping Center**, which shall be an amount equal to the product of **Tenant's Pro Rata Share** times the **Common Area Costs**. The **CAM Charge** may be an estimate based upon the **Common Area Costs** for the prior **CAM Year** or **Landlord's** reasonable estimate of **Common Area Costs** for the then current **CAM Year**. The **CAM Charge** may be billed, at **Landlord's** election, in monthly, quarterly, semi-annual, or annual installments.

1.1.6 "**CAM Year**": any fiscal year, calendar year, or other period as reasonably determined by **Landlord**, or, in the event **Landlord** shall change from a fiscal year to a calendar year, or vice versa, or to another period, such shorter period as may be reasonably required by such change.

1.1.7 "**Claims and Costs**": defined in Section 13.1.

1.1.8 "**Common Areas**": defined in Section 4.3.2.

1.1.9 "**Common Area Costs**": defined in Section 4.3.1.

1.1.10 "**Default Rate**": the lesser of: (i) the maximum interest rate allowed by applicable law; or (ii) twenty percent (20%) per annum.

1.1.11 "**Expiration Date**": The last day of the one hundred twentieth (120th) full calendar month following the Rental Commencement Date, unless extended as provided in this lease; provided, however, that if this lease is canceled or terminated prior to said date, then the **Expiration Date** shall be the date upon which this lease is so canceled or terminated; provided, further, however, that if this lease is canceled or terminated prior to the originally fixed **Expiration Date** by reason of **Tenant's** default under this lease, **Tenant's** liability under the provisions of this lease shall continue until the date this lease would have expired had the cancellation or termination not occurred.

EXHIBIT A
PLAN

"Premises": that certain space located in the Shopping Center (without basement, balcony, or mezzanine) as shown by cross-hatched lines on Exhibit A.

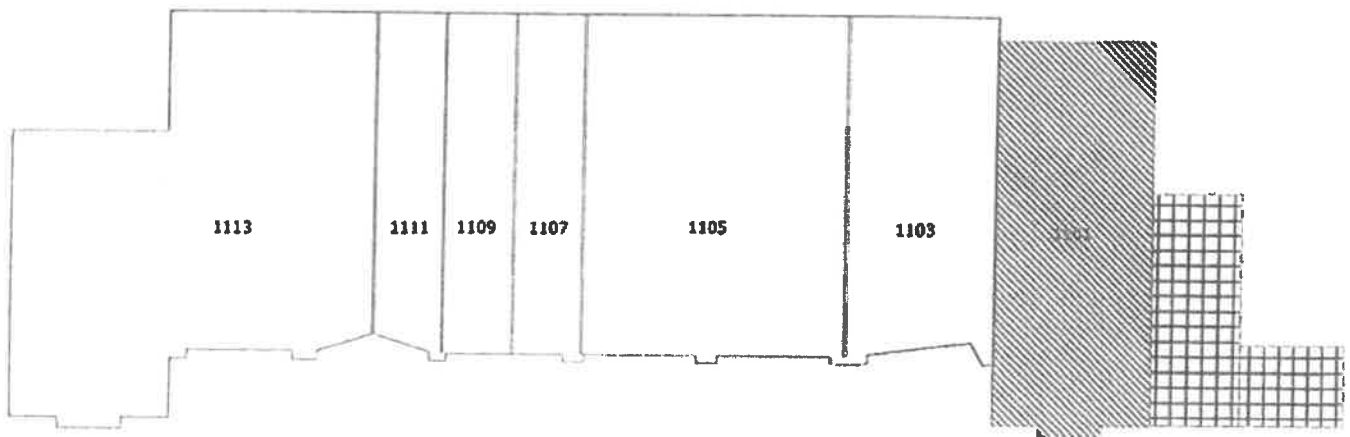
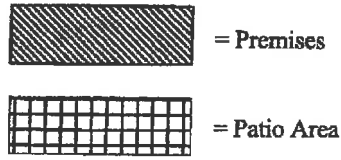
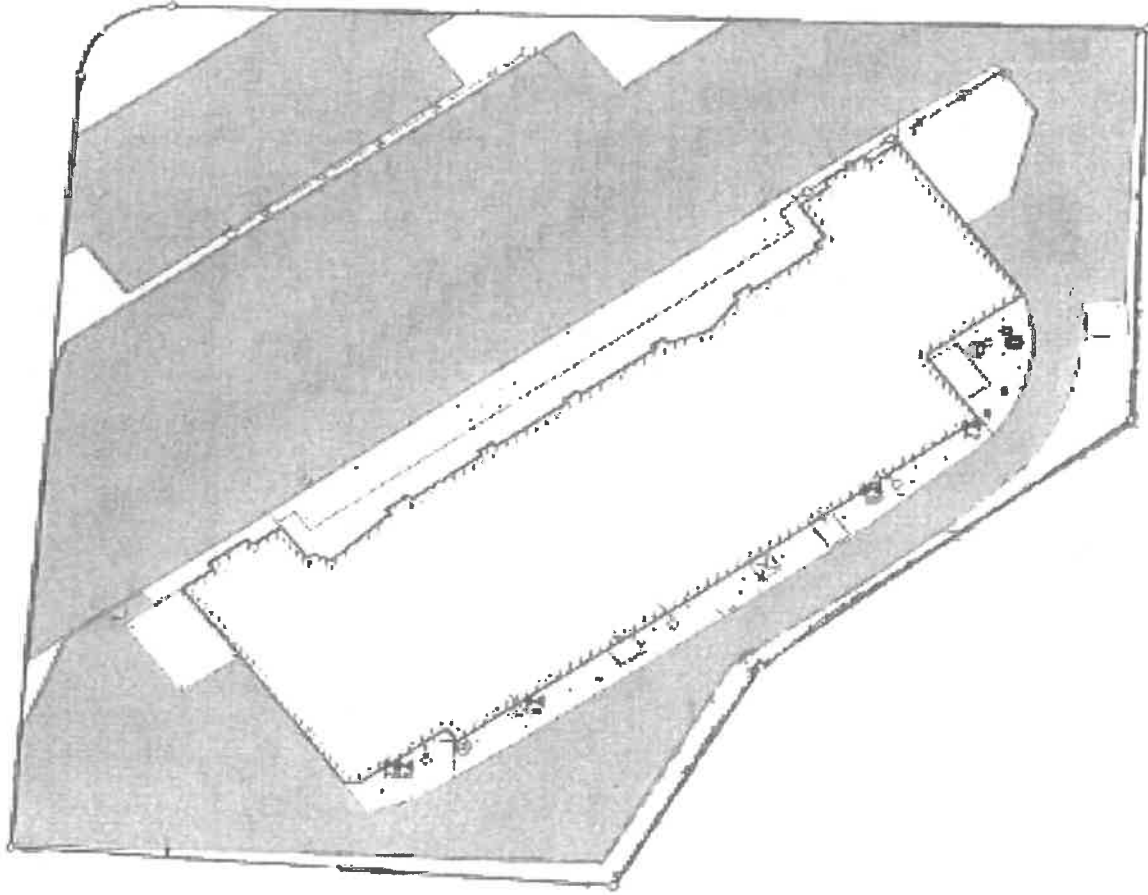


EXHIBIT B
SITE PLAN

That certain shopping center site presently known as Crestline Park Shopping Center located in the City of Birmingham, County of Jefferson, State of Alabama, as shown on the site plan.



PARCEL ID: 012300342006003000

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

DATE: Wednesday, June 15, 2022 2:47:43 PM

OWNER: THE BARBER COMPANIES INC

ADDRESS: 27 INVERNESS CENTER PKWY

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35242

SITE ADDR: 1109 DUNSTON AVE

CITY/STATE: BHAM, AL

ZIP: 35213



LAND: \$269,900.00

BLDG: \$1,065,300.00

OTHER: \$0.00

AREA: 49,373.57

ACRES: 1.13

SUBDIVISION INFORMATION:

NAME CRESTLINE PARK

BLOCK: 8

LOT: 3

:

Section: 34-17-2W

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: Crestline (301)

Communities: Crestline (3)

Council Districts: District - 2 (Councilor: Hunter Williams)

Zoning Outline: CB1

Demolition Quadrants: DEM Quadrant - 4

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 Events Retail – Type 140/7 Days: Event Date 8/27/22 – 1 Day

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

Name of Applicant: Urban Impact Inc

Mailing Address: 1721 4th Ave N
Birmingham, AL 35203

Trade Name: Taste of 4th Avenue Jazz Festival

Location Address: 4th Ave N Between 16th and 18th St N

Contact Number: (205)243-7913

Contact Person:
Carla Youngblood

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: 6/21/22

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

SPECIAL EVENTS RETAIL-TYPE 140/7 DAYS

(Enter Type of License Applied For)

By: **GS**
(Revenue Official)

1. Name of Applicant (s) Urban Impact Inc
(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>[REDACTED]</u> Ivan Wesley Holloway	Executive Director	<u>[REDACTED]</u> Birmingham, AL	809 Northcrest Dr Birmingham, AL 35235	18 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 291-435 Page: 1 of 1 Date: 11/18/2013 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Taste of 4th Avenue Jazz Festival
- 4(a) Location 4th Ave N Between 16th and 18th St N
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: 1721 4th Ave N Birmingham, AL 35203
- (d) Business Phone _____ Fax: _____ Other Contact: (205)243-7913
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 City of Birmingham
710 N 20th St Birmingham, AL 35203
Address _____
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Street Festival
- (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 _____ 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 **8/27/22** Ending **8/27/22**
(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
NO - Applicants				

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 June, 2022

Cash Yorkland
Signature of Affiant

Greg Stanley
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 Events Retail-Type 140/7 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: Urban Impact Inc
Attention: _____
Address: 1721 4th Ave N
City: Birmingham State: AL Zip Code: 35203
Area Code and Phone Number: (205)243-7913
Area Code and Fax Number: _____
Name of Contact Person: Carla Youngblood
E-Mail: cyoungblood@urbanimpactbirmingham.org 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): Taste of 4th Avenue Jazz Festival
Attention: _____
Address: 4th Ave N Between 16th and 18th St N
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: Taste of 4th Avenue Jazz Festival
Date(s) of the Event: 8/27/22
Event Location: 4th Ave N Between 16th and 18th St N

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: Music Festival/Alcohol/Vendors

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 63-0795551 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.

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

NAME	TITLE	SOCIAL SECURITY NUMBER
Holloway, Ivan	Executive Director	[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: Carla Youngblood Date 6-21-22
 Signature of Person Completing This Application Date

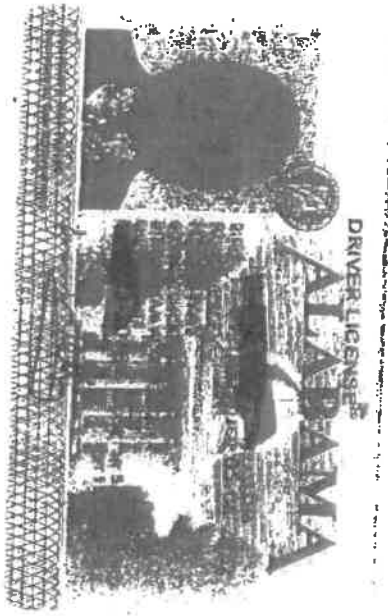
Carla Youngblood 205-565-5688
 Print the Name of the Person Completing This Application Phone Number of Person Completing Application

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





Alabama Secretary of State



URBAN IMPACT, INCORPORATED	
Entity ID Number	291 - 435
Entity Type	Domestic Non-Profit Corporation
Principal Address	Not Provided
Principal Mailing Address	Not Provided
Status	Exists
Place of Formation	Jefferson County
Formation Date	11-4-2013
Registered Agent Name	NOT PROVIDED
Registered Office Street Address	Not Provided
Registered Office Mailing Address	Not Provided
Nature of Business	NOT PROVIDED
Capital Authorized	
Capital Paid In	
Incorporators	
Incorporator Name	NOT PROVIDED
Incorporator Street Address	Not Provided
Incorporator Mailing Address	Not Provided
Directors	
Director Name	NOT PROVIDED
Director Street Address	Not Provided
Director Mailing Address	Not Provided
Scanned Documents	
Document Date / Type / Pages	11-18-2013 Certificate of Formation 10 pgs.
Document Date / Type / Pages	2-17-2017 Other Documents 16 pgs.

[Browse Results](#)
[New Search](#)

An error has occurred while processing your request.

<http://arc-sos.state.al.us/cgi/corpdetail.mbr/detail?corp=291435&page=name&file=&type=ALL&status=ALL&place=ALL&city=>

Central Business District Street Blockage Permit

Section 12-5 General City Code, 2017

Purpose

A registered non-profit or merchants' association requesting a street blockage on a low-traffic street in the Central Business District.

Timeline

1. Submit application: 15 business days prior to event
2. Application processing at City Hall: up to 10 business days
 - a. Application must be approved by BDOT, BPD, and BFRS
3. Pay fees: 5 business days prior to event
4. Receive permit

Fees

Fees		
Length of event (set up to take down)	Application Fee	Additional Costs
8 hours or less	\$100.00	Organizer may have to pay a policing cost as deemed necessary by BPD.
More than 8 hours	\$25.00	Organizer is required to pay a policing cost to be provided by BPD.

General Information

1. The applicant is required to include a Street Blockage Consent Letter with the application.
 - a. This is a written statement that all merchants, etc. in the area that is requested to be blocked have been notified of the proposed blockage and consent to it.
2. The permit will only be valid for the time and date listed on the permit.
3. Only two permits will be issued per year to any organization requesting a street blockage.
4. Any activity not listed in the application will not be allowed.
5. If the event will have amplified sound, a noise permit will be required as well.
6. The sponsoring organization could be denied future permits if...
 - a. There are complaints by merchants and/or citizens about the event
 - b. The organization conducts or allows illegal activities
7. The application will NOT be approved if the blockage is...
 - a. During weekday peak traffic hours
 - b. Outside of daylight hours
 - c. If the requested location, date, or time conflict with any other approved events
 - d. On a major roadway
 - e. On any street where traffic flow would be negatively affected
 - f. On any street where land access would be negatively affected
8. Barricades are required for this permit, and it is the responsibility of the organizer to obtain them.
9. If the event must be rescheduled for bad weather, the new date must be approved by BDOT to make sure there is no conflict with other events.
 - a. A "rain date" cannot be reserved in advance unless a separate application is filed.

Payment of Fees

1. The applicant should wait to receive fee estimates and approval from BDOT before paying any fees.
2. All fees should be paid to the Cashier on the 1st Floor of City Hall.
3. Once you have paid, bring the receipt to the Department of Transportation (9th Floor) to process the permit.
 - a. The permit can be issued the next business day; or
 - b. You can schedule an appointment beforehand to ensure that your permit will be issued at that time.



APPLICATION DATE:

RECEIPT NO.

CITY OF BIRMINGHAM
REQUEST FOR CENTRAL BUSINESS DISTRICT STREET BLOCKAGE PERMIT

Name of Event: Taste of 4th Avenue Jazz Festival

Organization: Taste of 4th Avenue Jazz Festival Inc./Urban Impact

Person in Charge of Event: Rashada LeRoy

Day / Date of Function: Saturday, August 27, 2022

Time: From: 12pm To: 10pm

Purpose of Closing: To construct stage and other items for a Jazz Festival

Streets to be Closed: 4th Avenue North - Black Business District

From Intersection of: 4th Avenue North

To Intersection of: Between 16th and 18th Street North

Types of Activities: Jazz Festival, Food Trucks, Stage, Entertainment

Special Restrictions: N/A

Barricades will be provided by: Alabama Barricades

Name: Rashada LeRoy on behalf of Taste of 4th Avenue Jazz Festival

Address: 1500 1st Avenue North #C132

Phone: 205-243-7913

Email: rleroy@lrymediagroup.com

Clear All

HOLD HARMLESS AGREEMENT to comply with GCC 12-5-27 (b)

STATE OF ALABAMA)
)
JEFFERSON COUNTY)

Taste of 4th Avenue Jazz Festival

For the sole consideration of being allowed to organize, sponsor, or hold the _____
(Name of Event)

_____ in Birmingham, Alabama, the undersigned agrees to release, indemnify and hold harmless the City of Birmingham, its agents, servants and employees from any and all claims, demands, damages, actions, causes of actions or suits of any kind or nature
Taste of 4th Avenue Inc.

whatsoever, attributable to the act or omissions of _____
(Sponsoring Organization)

_____, its officers, agents or employees, particularly on account of all injuries, known and unknown, both to persons and property, which may result or may in the future develop from the
Taste of 4th Avenue Jazz Festival

(Name of Event)

Saturday, August 27, 2022

on or about the _____, at or near Birmingham, Alabama to the extent
(Date(s) of Event)
allowed by Alabama Law.

The undersigned hereby declares that the terms of the Agreement have been completely read and are fully understood and voluntarily accepted.

Taste of 4th Avenue Jazz Festival

(Sponsoring Organization)

Carla Youngblood

By: _____
(Applicant's Name)

Its: _____
(Applicant's Title)

(Signature)

March 16, 2022

Date: _____
(Date of Signature)

BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT

SPECIAL EVENT EMS PLAN

Music/Jazz Festival

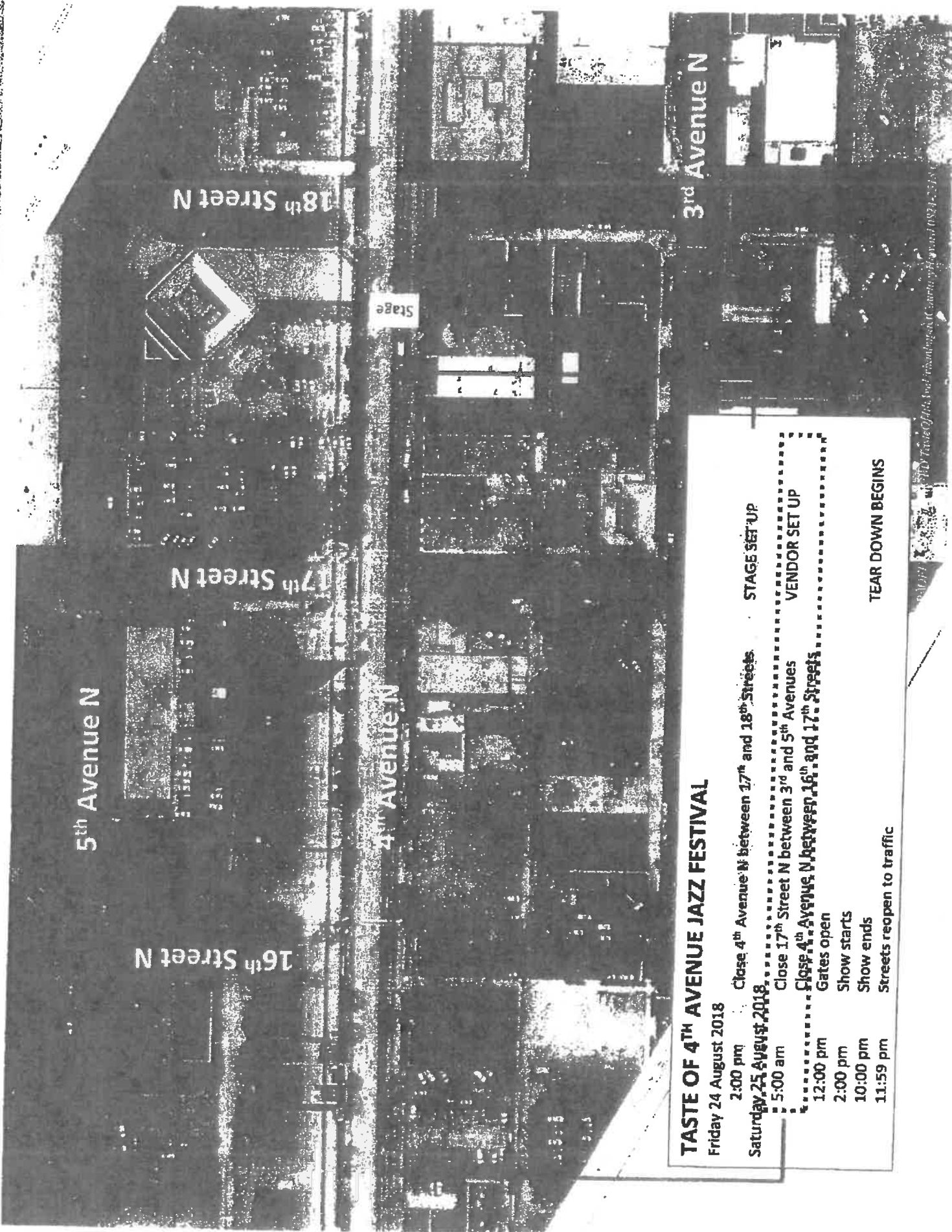
- I. Type of Event: _____
- II. Location of Event: **4th Avenue Historic Business District**

2500-3000
A. Anticipated Attendance: _____
12-10pm
B. Length of Event: _____
C. Date(s) of Event: _____
- III. Sponsoring Agency: **Taste of 4th Avenue Jazz Festival**

A. Address: _____
205-243-7913
B. Telephone Contact: _____
- IV. Medical Direction Provided By: _____
- V. Emergency Medical Personnel: (Attach additional sheet to list names and qualifications of personnel)

- VI. Plot Plan: Attachment with description of facilities.
- VII. Deployment Map: Attachment with description of area of involvement.
- VIII. Describe Emergency Communications System: **Text messages and loud speakers**

- IX. Method of Announcing Notification for Location of Emergency: **Loud speakers**



TASTE OF 4TH AVENUE JAZZ FESTIVAL

Friday 24 August 2018

2:00 pm

Close 4th Avenue N between 17th and 18th Streets

STAGE SET UP

5:00 am

Close 17th Street N between 3rd and 5th Avenues

VENDOR SET UP

12:00 pm

Close 4th Avenue N between 16th and 17th Streets

Gates open

2:00 pm

Show starts

10:00 pm

Show ends

11:59 pm

Streets reopen to traffic

TEAR DOWN BEGINS

Special Events Retail – Type 140/7 Days – Event Date: 9/9-9/10/22 – 2 Days

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

Name of Applicant: Slice, LLC

Mailing Address: 213 Richard Arrington Jr Blvd S
Birmingham, AL 35233

Trade Name: Birmingham Artwalk

Location Address: 20th St N from 1st Ave N to 4th Ave N & Forstall Parking Lot

Contact Number: (205)410-8776

Contact Person:
Denise Koch

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 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 Multiple

Date Applied: 6/15/22

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 EVENTS RETAIL-TYPE 140/7 DAYS

(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Slice, 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] Jason Brian Bajalieh	Member	[REDACTED] Birmingham, AL	4342 Clairmont Ave S Birmingham, AL 35222	
ALDL# [REDACTED] Christopher Saleh Bajalieh	Member	[REDACTED] Birmingham, AL	5016 10 th Ct S Birmingham, AL 35222	

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 LR201007 Page: 1962 Date: 08/20/2010 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Birmingham Artwalk
- 4(a) Location 20th St N from 1st Ave N to 4th Ave N & Forstall Parking Lot
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: 213 Richard Arrington Jr Blvd S Birmingham, AL 35233
- (d) Business Phone _____ Fax: _____ Other Contact: (205)410-8776

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 City of Birmingham
710 20th St N Birmingham, AL 35203
Address

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

(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 _____ 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 **9/9/22** Ending **9/10/22**
(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 15th day of June, 2022

 Signature of Affiant
Mary Stanley

 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 Events Retail-Type 140/7 Days

Sept. 9-10, 2022

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: Slice, LLC
 Attention: _____
 Address: 213 Richard Arrington Jr Blvd S
 City: Birmingham State: AL Zip Code: 35233
 Area Code and Phone Number: (205)410-8776
 Area Code and Fax Number: _____
 Name of Contact Person: Denise Koch
 E-Mail: dlovoykoch@gmail.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): Birmingham Artwalk
 Attention: _____
 Address: 20th St N from 1st Ave N to 4th Ave N & Forstall Parking Lot
 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: Birmingham Artwalk
Date(s) of the Event: 9/9-9/10/22
Event Location: 20th St N from 1st Ave N to 4th Ave N & Forstall Parking Lot

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: Art Festival/Alcohol/Vendors

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
- 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 _____

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)

3

Lodgings Tax

State of Alabama Lodgings Tax Number _____

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
Bajalleh, Jason	Member	
Bajalleh, Christopher	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

June 15, 2022
 Date

Denise Koch
 Print the Name of the Person Completing This Application

205-410-8776
 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





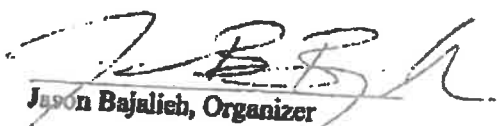
201002000010260 1/1
 BK: LR201007 Pg: 1952
 Jefferson County, Alabama
 I certify this instrument filed on:
 08/20/2010 11:19:53 AM INC
 Judge of Probate- Alan L. King

**ARTICLES OF ORGANIZATION OF
 SLICE, LLC
 A LIMITED LIABILITY COMPANY**

The undersigned, acting as the organizer of a limited liability company under the Alabama Limited Liability Company Act (the "Act") hereby adopts the following Articles of Organization for Slice, LLC (the "Company").

1. The name of the company shall be Slice, LLC.
2. The Company shall continue in existence until it is dissolved in accordance with the provisions of the operating agreement or, if there is no operating agreement; or no provision in the operating agreement governing the duration of the company, then in accordance with the Act or other applicable laws.
3. The Company is organized for the purpose of engaging in the business of restaurant.
4. The mailing address of the Company's initial registered office is 725 29th Street South, Birmingham, Alabama, 35233 and the name of the Company's initial registered agent is Jason Bajalieh.
5. The name and address of the initial members of the Company are: Jeffrey S. Bajalieh, Jason Bajalieh and Christopher Bajalieh, 725 29th Street South, Birmingham, Alabama, 35233.
6. Jason Bajalieh, 725 29th Street South, Birmingham, Alabama, 35233, shall serve as manager of the Company.

IN WITNESS THEREOF, the undersigned organizer executed these Articles of Organization for Slice, LLC, on this the 2nd day of August, 2010.


 Jason Bajalieh, Organizer

This instrument prepared by:
 G. Chance Turner, Esq.
 2 North Twentieth Street
 Suite 1150
 Birmingham, AL 35203

201002000010260 1/1
 BK: LR201007 Pg: 1952
 Jefferson County, Alabama
 08/20/2010 11:19:53 AM INC
 Fee - \$51.00

Total of Fees and Taxes-\$51.00
 HATCHERK

DRIVER LICENSE

ALABAMA



No. [REDACTED] CLASS D
D.O.B. [REDACTED]
SEX [REDACTED]
HAIR [REDACTED]
EYES [REDACTED]
HEIGHT [REDACTED]
WEIGHT [REDACTED]
SIGNATURE [REDACTED]

Colonel Mark W. McCall
Governor of Alabama

BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT
SPECIAL EVENT EMS PLAN

- I. Type of Event: Birmingham Artwalk
- II. Location of Event: 20th Street North
- A. Anticipated Attendance: 5000
- B. Length of Event: 13 Total Hour
- C. Date(s) of Event: Fri. Sep 9th from 6pm-10pm and Sat. Sep 10th
- III. Sponsoring Agency: Slice LLC
- A. Address: 20th Street between 1st Ave N and 4th Ave N
- B. Telephone Contact: 205-410-8776
- IV. Medical Direction Provided By: City of Birmingham Fire and Rescue
- V. Emergency Medical Personnel: (Attach additional sheet to list names and qualifications of personnel)
- VI. Plot Plan: Attachment with description of facilities.
- VII. Deployment Map: Attachment with description of area of involvement.
- VIII. Describe Emergency Communications System: PA System/Radio/Cell Phone
- IX. Method of Announcing Notification for Location of Emergency: Public Address System and Social Media

APPLICATION DATE: 6/14/2022

RECEIPT NO.

CITY OF BIRMINGHAM
REQUEST FOR CENTRAL BUSINESS DISTRICT STREET BLOCKAGE PERMIT

Name of Event: Birmingham Artwalk

Organization: Birmingham Artwalk

Person in Charge of Event: Slice LLC

Day / Date of Function: Friday, Sep 9 and Saturday, Sep 10

Time: From: September 9, 5pm-10pm

To: September 10, 8am-6pm

Purpose of Closing: Art Festival

Streets to be Closed: 20th Street

From Intersection of: 1st Ave North

To Intersection of: 4th Ave North

Types of Activities: Art Show and Music

Special Restrictions: Road Closing from 8am Friday, Sep 9 to Saturday, Sep 10 at 10pm

Barricades will be provided by: City of Birmingham

Name: Slice LLC/GoPro Event Solutions

Address: 213 Richard Arrington JR Blvd S
Birmingham, AL 35233

Phone: 205-410-8776

Email: www.denisekochevents.com

Clear All

Central Business District Street Blockage Permit

Section 12-5 General City Code, 2017

Purpose

A registered non-profit or merchants' association requesting a street blockage on a low-traffic street in the Central Business District.

Timeline

1. Submit application: 15 business days prior to event
2. Application processing at City Hall: up to 10 business days
 - a. Application must be approved by BDOT, BPD, and BFRS
3. Pay fees: 5 business days prior to event
4. Receive permit

Fees

Fees		
Length of event (set up to take down)	Application Fee	Additional Costs
8 hours or less	\$100.00	Organizer may have to pay a policing cost as deemed necessary by BPD.
More than 8 hours	\$25.00	Organizer is required to pay a policing cost to be provided by BPD.

General Information

1. The applicant is required to include a Street Blockage Consent Letter with the application.
 - a. This is a written statement that all merchants, etc. in the area that is requested to be blocked have been notified of the proposed blockage and consent to it.
2. The permit will only be valid for the time and date listed on the permit.
3. Only two permits will be issued per year to any organization requesting a street blockage.
4. Any activity not listed in the application will not be allowed.
5. If the event will have amplified sound, a noise permit will be required as well.
6. The sponsoring organization could be denied future permits if...
 - a. There are complaints by merchants and/or citizens about the event
 - b. The organization conducts or allows illegal activities
7. The application will NOT be approved if the blockage is...
 - a. During weekday peak traffic hours
 - b. Outside of daylight hours
 - c. If the requested location, date, or time conflict with any other approved events
 - d. On a major roadway
 - e. On any street where traffic flow would be negatively affected
 - f. On any street where land access would be negatively affected
8. Barricades are required for this permit, and it is the responsibility of the organizer to obtain them.
9. If the event must be rescheduled for bad weather, the new date must be approved by BDOT to make sure there is no conflict with other events.
 - a. A "rain date" cannot be reserved in advance unless a separate application is filed.

Payment of Fees

1. The applicant should wait to receive fee estimates and approval from BDOT before paying any fees.
2. All fees should be paid to the Cashier on the 1st Floor of City Hall.
3. Once you have paid, bring the receipt to the Department of Transportation (9th Floor) to process the permit.
 - a. The permit can be issued the next business day; or
 - b. You can schedule an appointment beforehand to ensure that your permit will be issued at that time.



James Fowler P.E, City Traffic Engineer
Traffic Engineering Dept.
City Hall 9th Floor
710 North 20th St.
Birmingham, AL 35203

Date: _____

Receipt No.: _____

REQUEST FOR NOISE PERMIT

Organization Name: Birmingham Artwalk

Person in Charge of Event: Denise Koch

Day / Date of Event: Saturday, Sep 10th Time of Event: 6pm-10pm

Location of Event: Forstall Parking Lot

Approximate distance from the nearest residence, school, Hospital or courthouse: _____

Zoning Classification: _____

Does Applicant own or lease site? No

Is Applicant and individual, profit, or non-profit entity? Non-Profit

Estimated Number of Attendees: 500

Reason for Amplification: Live Music

Amplification Device: PA Sound System

Other Permits Applied for Relating to Event: _____

Applicant's Name: Slice LLC

Address: 213 Richard Arrington Jr. Blvd S.

Birmingham, AL 35233

Phone Number: 205-410-8776

Applicant's Signature: _____

Approved by: 

Date: _____

City Traffic Engineer

Special Restrictions: Police may require amplification to be reduced if necessary.



INSTRUCTIONS FOR NOISE PERMIT APPLICATIONS

WHO NEEDS A NOISE PERMIT?

A Noise Permit is required if you will be having amplified sound or if your event or activity will generate noise that can be heard over a block away. These are the general criteria for the permit, but there may be other situations when a permit would be required.

FILING DATE: Minimum fifteen (15) working days prior to the event.

FEE: \$25.00 (paid by the person applying for the permit at the time of the filing of the application). **THIS IS IN ADDITION TO ANY OTHER REQUIRED PERMITTING FEES.**

NOTE:

Check with the Traffic Engineering Department prior to paying the fee to insure the requested date and time is available. Permits cannot be issued if they conflict with other events (see City Code Section 12-5-25).

After completing the application, pay this fee to the Cashier in the Finance Department, located on the 1st Floor of City Hall. Bring the receipt to the Traffic Engineering Department (9th Floor) so the receipt number can be included on the application and permit. The City is not responsible for any check mailed to the Traffic Engineering Department. All payments must be made in person.

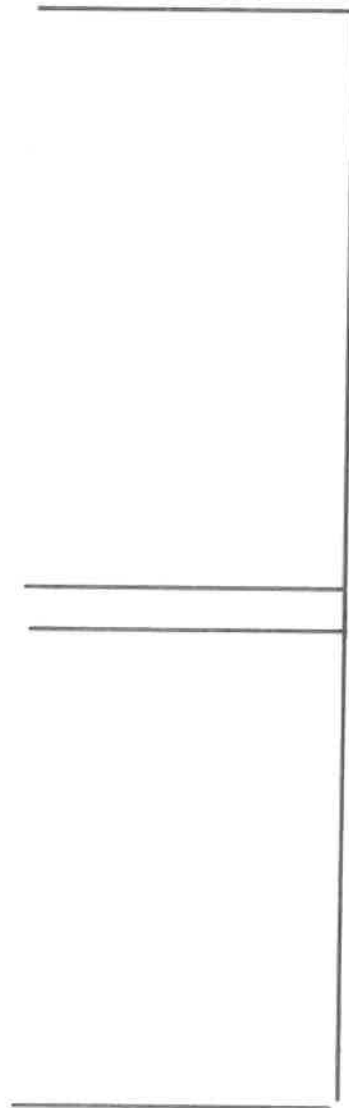
If approved, a copy of the permit will be mailed to you prior to the event.

The permit will only be valid for the time period specified, not to exceed 24 hours. It will be necessary to contact the Traffic Engineering Department in the event that you plan to reschedule a special event due to rain. A new permit will be required in the event of cancellation, postponement or rainout. A "rain date" cannot be reserved in advance unless a separate application has been filed.

The original Noise Permit must be kept at the event location for inspection purposes.

ARTWALK 2

4TH AVE NORTH



1-9



3RD AVE NORTH



**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) The Birmingham Urban League, Incorporated
(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# <u>[REDACTED]</u> William Antoine Barnes	CEO	<u>[REDACTED]</u> Birmingham, AL	473 37 th Ct W Birmingham, AL 35207	17 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 817-002 Page: 1 of 5 Date: 11/09/2001 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Civil Rights District Marketplace
- 4(a) Location Corner of 16th St and 5th Ave N - Kelly Ingram Park
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: 2101 6th Ave N, Ste 700 Birmingham, AL 35203
- (d) Business Phone (205)326-0162 Fax: _____ Other Contact: (205)602-0012

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 City of Birmingham
710 20th St N Birmingham, AL 35203
Address

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Marketplace for World Games
- (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 _____ 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 7/7/22 Ending 7/17/22
(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 June day of 24, 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
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: The Birmingham Urban League, Incorporated

Attention: _____

Address: 2101 6th Ave N, Ste 700

City: Birmingham State: AL Zip Code: 35203

Area Code and Phone Number: (205)602-0012

Area Code and Fax Number: _____

Name of Contact Person: Kelli Solomon

E-Mail: ksolomon@birminghamul.org 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): Civil Rights District Marketplace

Attention: _____

Address: Corner of 16th St and 5th Ave N - Kelly Ingram Park

City: Birmingham State: AL Zip: 35203

Area Code and Phone Number of Business Location: (205)326-0162

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: Civil Rights District Marketplace
Date(s) of the Event: 7/7-7/17/22
Event Location: Corner of 16th St and 5th Ave N – Kelly Ingram 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: Marketplace Festival/Alcohol/Vendors

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 _____

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)

3

Lodgings Tax

State of Alabama Lodgings Tax Number _____

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
Barnes, William	CEO	[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 1.3- 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: Kelli Solomon Date 6/24/2022
 Signature of Person Completing This Application Date
Kelli Solomon Phone Number of Person Completing Application 205-326-0163
 Print the Name of the Person Completing This 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. [REDACTED] CLASS D
D.O.B. [REDACTED] EXP. [REDACTED]

WILLIAM ANTOINE
BARNES
473 37TH CT W
BIRMINGHAM AL 35207

ENDORSEMENTS [REDACTED] REST A
ISS [REDACTED] SEX M HT 5-11 EYES BRO
WT 295 HAIR BLK

Edgar M. Taylor
Commissioner of Transportation
William Barnes

Birmingham Urban League

CEO:

William A. Barnes

SSN:

[REDACTED]

Number of years at residence:

17 years

DOB:

January 14, 1978

Place:

Birmingham AL

STATE OF ALABAMA
JEFFERSON COUNTY

293 REC 412

DECLARATION OF INCORPORATION
OF
THE BIRMINGHAM URBAN LEAGUE, INCORPORATED.

817-002
CIS

TO THE HONORABLE JUDGE OF PROBATE OF SAID COUNTY

The undersigned, desiring to form a Corporation under Chapter 10, of Alabama Code of 1940, and amendments thereto, do certify as follows:

1. The name chosen for the Corporation is, "THE BIRMINGHAM URBAN LEAGUE, INCORPORATED".
2. The duration of this Corporation shall be perpetual.
3. That said corporation is not being organized for pecuniary gain, but solely for the purpose of accomplishing the following objectives:
 - a. To encourage, assist and engage in such activities and kinds of work, which will lead toward the improvement of underprivileged persons and families in Metropolitan Birmingham.
 - b. To discover unmet community needs in education, employment, housing, health and welfare; to encourage and develop such types of programs for meeting these needs.
 - c. To promote the improvement of interracial understanding and cooperation.
 - d. To employ the techniques of effective community organization in the discovery, the correction and the prevention of conditions out of which racial tension, poverty and disorder arise.
4. That said corporation shall be governed by a Board of Directors of not less than fifteen, nor more than thirty-five, it having power and authority to change the number from time to time within said limitations; that said corporation, through its Board of Directors, shall have power and authority to adopt a constitution and by-law as shall be deemed suitable and proper for the government of said corporation, including the manner and method by which its said charter shall be amended.

RECEIVED

NOV 09 2001

SECRETARY
OF STATE

FILED
293
MAY 4 1937

5. Said corporation shall have the right to provide for such classes and types of membership which it shall deem necessary, fit and helpful in effectively accomplishing its objectives and to prescribe the rights and privileges of such members.

6. That no member or officer shall have any pecuniary interest in the corporation.

7. That in the event of the dissolution of said corporation, its assets shall be transferred to the National Urban League, with which it shall be affiliated, such assets to be used and devoted to the achievement of the objectives of the Birmingham Urban League, Incorporated, as set out in this petition.

8. That said corporation shall be clothed with all the rights, powers, immunities, privileges, and subject to all restrictions applicable to corporations of similar character, according to existing laws, as well as those hereinafter enacting affecting similar corporations.

9. Names and addresses of incorporators are:

<u>V. W. TAYLOR</u>	<u>160 - 4th Ave., No., City</u>
<u>Arthur D. Shores</u>	<u>1527-4th Ave., North, City</u>
<u>John J. Drew</u>	<u>421 - North 16th Street, City</u>
<u>Emory O. Jackson</u>	<u>112 - 17th St., North, City</u>
<u>J. L. Ware</u>	<u>512 - 10th Ave., West, City</u>
<u>Amos Ryce, II</u>	<u>Miles College, Birmingham, Ala.</u>
<u>J. E. Lower</u>	<u>1500 - 6th Ave., North, City</u>
<u>Jesse L. Lewis</u>	<u>505-17th St., North, City</u>
<u>L. H. Pitts</u>	<u>5500 Avenue G., Vinesville, City</u>
<u>A. G. Gaston</u>	<u>1527-5th Avenue, North, City</u>
<u>Clarence L. Price</u>	<u>19-2nd Avenue, South, City</u>
<u>James O. Prewitt</u>	<u>24-5th Ave., North, City</u>
<u>Philander L. Butler</u>	<u>1527-5th Ave., North, City</u>
<u>Herold D. Long</u>	<u>102, North Center Street, City</u>
<u>Samuel O'Neal</u>	<u>152105th Avenue, City</u>

10. The name and address of the initial registered office and the initial registered agent are as follows:

ARTHUR D. SHORES 1527-5th Ave. North, City
Name Address

11. The number, names and addresses of the directors constituting the initial Board of Directors are as subscribed below:

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 18th day of January, 1967;

- E. L. ... 1670 - 4th Avenue, North, City
- W. H. ... 1527-5th Avenue, North, City
- J. O. ... 124 North 16th Street, City
- W. H. ... 312 - 17th Street, North, City
- H. L. ... 112-10th Avenue, West, City
- H. L. ... Miles College, Birmingham, Ala.
- J. O. ... 100 - 6th Avenue, North, City
- W. H. ... 105-North 17th Street, City
- H. L. ... 500 Avenue G, Vinesville, City
- W. H. ... 1527-5th Avenue, North, City
- W. H. ... 69 - 2nd Avenue, South, City
- W. H. ... 424 - North 16th Street, City
- W. H. ... 1527-5th Avenue, North, City
- W. H. ... 1024 North Center Street, City
- W. H. ... 1529 - 5th Avenue, North, City

203

STATE OF ALABAMA
JEFFERSON COUNTY

293 REC 415

I, AGNES N. STUDEMIRE, a Notary Public in and for said County, in said State, hereby certify that E. W. Taggart, Arthur D. Shores, John J. Drew, Emory O. Jackson, J. L. Ware, Amos Ryce, II, J. E. Lowery, Jesse J. Lewis, L. H. Pitts, A. G. Gaston, Clarence L. Price, James O. Prewitt, Philander L. Butler, Harold W. Long & Samuel J. Neal whose names are signed to the foregoing Declaration of Incorporation, and who are known to me, acknowledged before me on this day, that being informed of the contents of the said Declaration of Incorporation, that they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal, this the 18th day of January, 1967.

Agnes N. Studemire
NOTARY PUBLIC

STATE OF ALA. JEFFERSON CO.
I CERTIFY THIS INSTRUMENT
WAS FILED ON

REAL 293 REC 412
JAN 20 10 10 AM '67

RECORDED AND INDEXED
BY S. L. NEED TAKING FEE
PAID ON THIS INSTRUMENT

Glenn Meade
CLERK OF COURSE

State of Alabama
Jefferson County

I, the Undersigned, as Judge of Probate in and for said County, in said State, hereby certify that the foregoing is a full, true and correct copy of the instrument with the filing of same as appears of record in this office in vol. 293 page 412.

Given under my hand and official seal, this the 8th day of NOVEMBER, 2001.

Michael F. Bohm
Judge of Probate



BIRMINGHAM PARK AND RECREATION

Director

Shonae' Eddins-Bennett

Board Members

Montal Morton, President
Carly Miller, Vice-President

Carol Clarke
Larry D. Cockrell
Ronald D. Mitchell

June 23, 2022

Tabi Gaines
Birmingham Urban League
2101 6th Avenue North
Suite 700
Birmingham, Alabama 35203

Dear Ms. Gaines:

The Birmingham Park and Recreation Board approved your request for Birmingham Urban League, to sell and serve alcoholic beverages during the 2022 Civil Rights District Marketplace event in Kelly Ingram Park on July 8th – 10th, 2022 and July 15th – 16th, 2022.

To begin the preliminary alcohol application process, please contact Gregory Stanley at (205) 297-8155 or Titania Brown at (205) 254-2497 to schedule an appointment.

Should you have any questions, please let me know.

Working Together – Park and Recreation Strong!

Shonae' Eddins-Bennett
Director

SEB/asw

CC: Sharonda Gary
Reservations
Charles Brundidge

Legion Field Stadium
400 Graymont Avenue West, Birmingham, Alabama 35204 @ (205) 254-2391 @ (205) 254-2515 Fax

CITY OF BIRMINGHAM
BIRMINGHAM PARK & RECREATION BOARD
500 Government Avenue West
Birmingham, AL 35204

To Sell Alcohol Permission Form

If alcohol will be sold and served at any Birmingham Park and Recreation Board facility where tickets are sold to enter or if a cash bar is to be set up, then this form will need to be completed and approval granted.

FACILITY REQUESTED Kelly Ingram Park

Name (Please Print) Bob Dickerson Phone 205-218-1003

Street Address 1500 1st Ave No. City Bham State AL Zip Code 35203

Date of event July 27, 10, 15 & 16 Type of event Marketplace

Expected attendance: 500 Organization Responsible for Serving Alcohol Tobias Games - Birmingham Urban League

Liquor License # _____ Contact Person Jasmine Allen Phone 205-919-9019

- THE SELLING OF ALCOHOL and/or the possession of alcohol at a Birmingham Park and Recreation Board facility without the expressed written permission of the Birmingham Park & Recreation Board is prohibited.
- THE SELLING OF TICKETS is permitted if organizations' events meet the qualifications set by the Birmingham Park and Recreation Board.
- NO ALCOHOL MAY BE SOLD OR SERVED TO ANYONE UNDER 21 YEARS OF AGE (Any use of alcoholic beverages by any person under 21 years of age in a Birmingham Park and Recreation Board building, or on park grounds, is prohibited and may result in the arrest and prosecution of the minor and the responsible adult).
- The applicant and the applicant's group hereby assume responsibility to ensure adherence to all laws, regulations and policies regarding the selling and/or serving of alcoholic beverages for the event scheduled at a Birmingham Park & Recreation facility.
- Any event in violation of the laws, regulations and policies will be terminated with NO REFUND OR RECOURSE.

SECURITY: One off-duty uniformed Birmingham Police Officer per and up to each 100 persons in attendance will be required, at the renter's expense, for the duration of the event. All security arrangements must be finalized within 72 hours of the event.

The applicant and the applicant's group, shall indemnify, defend and hold Birmingham Park & Recreation Board and the City, its elected and appointed officials, agents, employees and volunteers harmless from all liabilities, claims, judgments, demands and costs arising out of or resulting from the applicant's group or their invitees' use of Birmingham Park & Recreation facilities and adherence to all rules included in the alcohol policy.

- In making this application, I have read and fully understand the rules and regulations of the Birmingham Park and Recreation Board and will abide by all rules and assume the financial responsibility for any damage. I verify that this information is correct and understand that the Park Board has the right to cancel this reservation if failure to comply with any rule is found or suspected. I sign this document with no questions or reservations.

Applicant - Print Name: Bob Dickerson

Date: 6/17/22

Applicant's Signature: Bob Dickerson

CITY OF BIRMINGHAM
BIRMINGHAM PARK & RECREATION BOARD
400 University Avenue West
Birmingham, AL 35202

ALCOHOL PERMITS

If alcohol will be served at any Birmingham Park and Recreation Board facility where licensed persons are served alcohol free of charge, where [X] before any vote to enter or [X] such bar is to be set up, then this form will need to be completed and approved.

FACILITY REQUESTED Kelly Ingram Park

Name (Please Print) Bob Dickerson Phone 205-218-1003

Home Address 1500 1st Ave. No. in Bham State AL Zip Code 35203

Date of event July 9-10 & 15-16 Type of event Market place

Expected attendance 500 Organization Responsible for Serving Alcohol Bham Urban League

Contact Person Jasmine Allen Phone 205-719-9019

- THE SERVING OF ALCOHOL and/or the possession of alcohol at a Birmingham Park and Recreation Board facility without the expressed written permission of the Birmingham Park & Recreation Board is prohibited.
- This must be a private event not open to the public. NO SELLING OF TICKETS is permitted.
- NO ALCOHOL MAY BE SOLD OR SERVED TO ANYONE UNDER 21 YEARS OF AGE (Any use of alcoholic beverages by any person under 21 years of age in a Birmingham Park and Recreation Board building, or on park grounds, is prohibited and may result in the arrest and prosecution of the minor and the responsible adult).
- The applicant and the applicant's group hereby assume responsibility to ensure adherence to all laws, regulations and policies regarding the serving of alcoholic beverages for the event scheduled at a Birmingham Park & Recreation facility.
- ANY event in violation of the laws, regulations and policies will be terminated with NO REFUND OR RECOURSE.

SECURITY: One off-duty uniformed Birmingham Police Officer per and up to each 100 persons in attendance will be required, at the reactor's expense, for the duration of the event. All security arrangements must be finished within 72 hours of the event.

The applicant and the applicant's group, shall indemnify, defend and hold Birmingham Park & Recreation Board and the City, its elected and appointed officials, agents, employees and volunteers harmless from all liabilities, claims, judgments, demands and costs arising out of or resulting from the applicant's group or their invitees' use of Birmingham Park & Recreation facilities and adherence to all rules included in the alcohol policy.

- In making this application, I have read and fully understand the rules and regulations of the Birmingham Park and Recreation Board and will abide by all rules and assume the financial responsibility for any damage. I verify that this information is correct and understand that the Park Board has the right to cancel this reservation if failure to comply with any rule is found or suspected. I sign this document with no questions or reservations.

Applicant - Print Name: Bob Dickerson Date: 6/17/82

Applicant's Signature: Bob Dickerson

BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT

SPECIAL EVENT EMS PLAN

- I. Type of Event: Civil Rights District Marketplace
- II. Location of Event: Corner of 16th Street and 5th Ave. North
- III. Sponsoring Agency: Birmingham Urban League
 - A. Address: 2101 6th Ave. N. Ste 700 Birmingham, AL 35203
 - B. Telephone Contact: 205-326-0162
- IV. Medical Direction Provided By: BFRS
- V. Emergency Medical Personnel: (Attach additional sheet to list names and qualifications of personnel) _____
- VI. Plot Plan: Attachment with description of facilities.
- VII. Deployment Map: Attachment with description of area of involvement.
- VIII. Describe Emergency Communications System: Cellular Devices
- IX. Method of Announcing Notification for Location of Emergency: 911



2101 6th Avenue North, Birmingham, AL 35203 | Phone: 205.326.0162

Civil Right District Marketplace has secured two officers for the day event and two officers for the overnight event. All provisions have been made in accordance with the street blockage and noise permit guidelines.

Event Location and dates:

July 7-17th, 2022; exact dates are July 8,9,10,15 and 16

Kelly Ingram Park

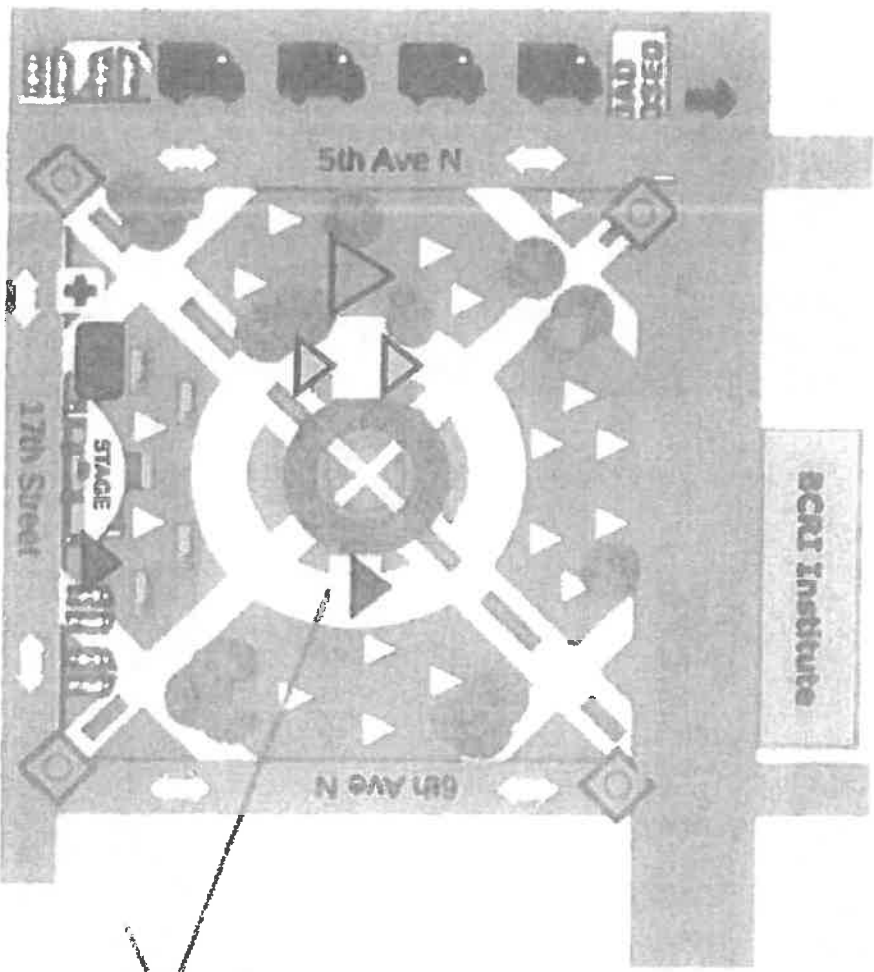
16th and 5th AVE north

Park and Rec Board- approved

Noise permit- approved

Street Blockage- approved

CIVIL RIGHTS DISTRICT MARKET



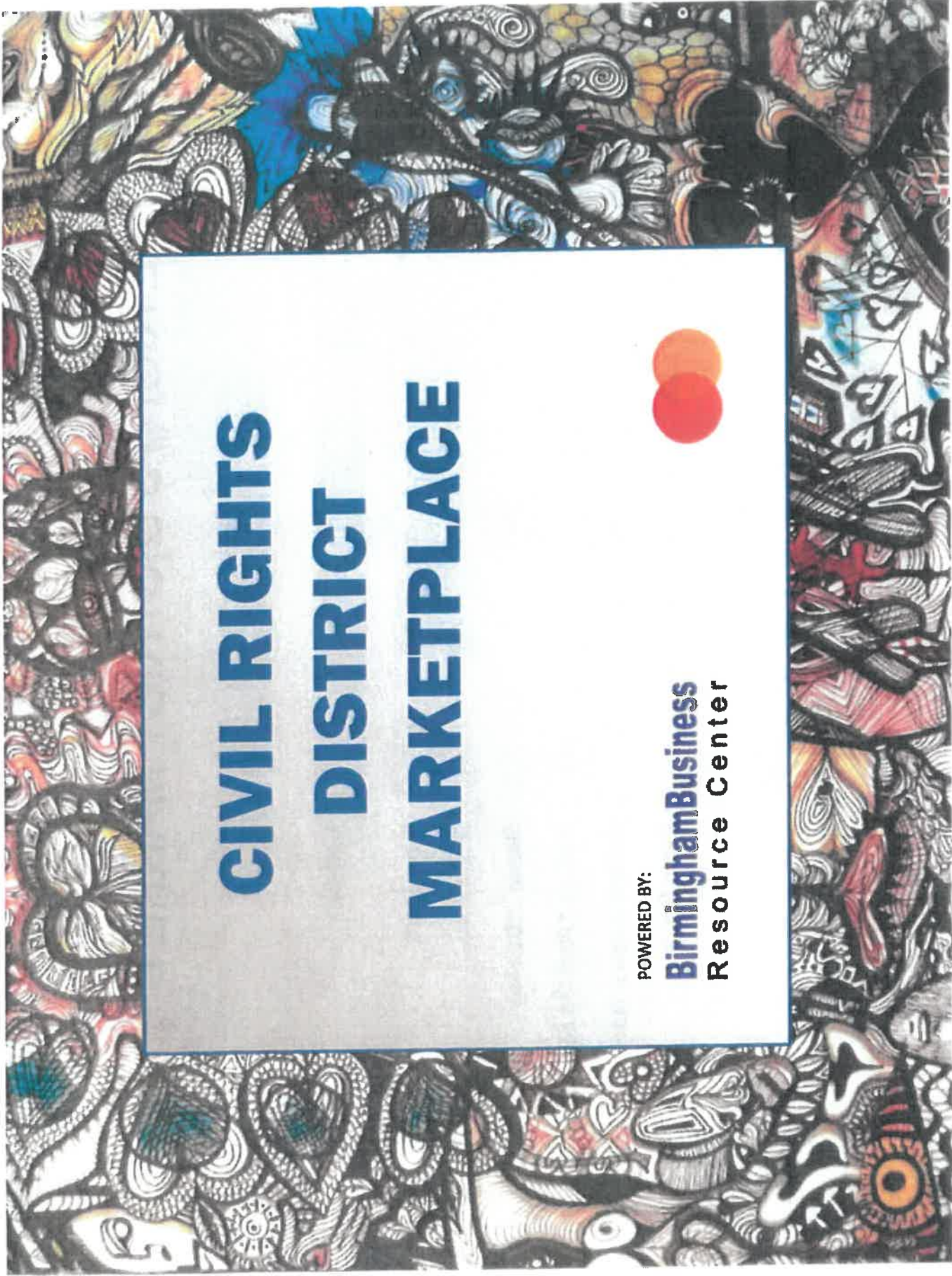
LEGEND

-  Food Truck
-  Restrooms
-  Benches/Seating
-  Medical / First Aid Tent
-  Art and Culture Tents
-  Event Signs
-  Royal Tea in the Garden

CIVIL RIGHTS DISTRICT MARKETPLACE

POWERED BY:

BirminghamBusiness
Resource Center



Welcome to the

Civil Rights District Marketplace!

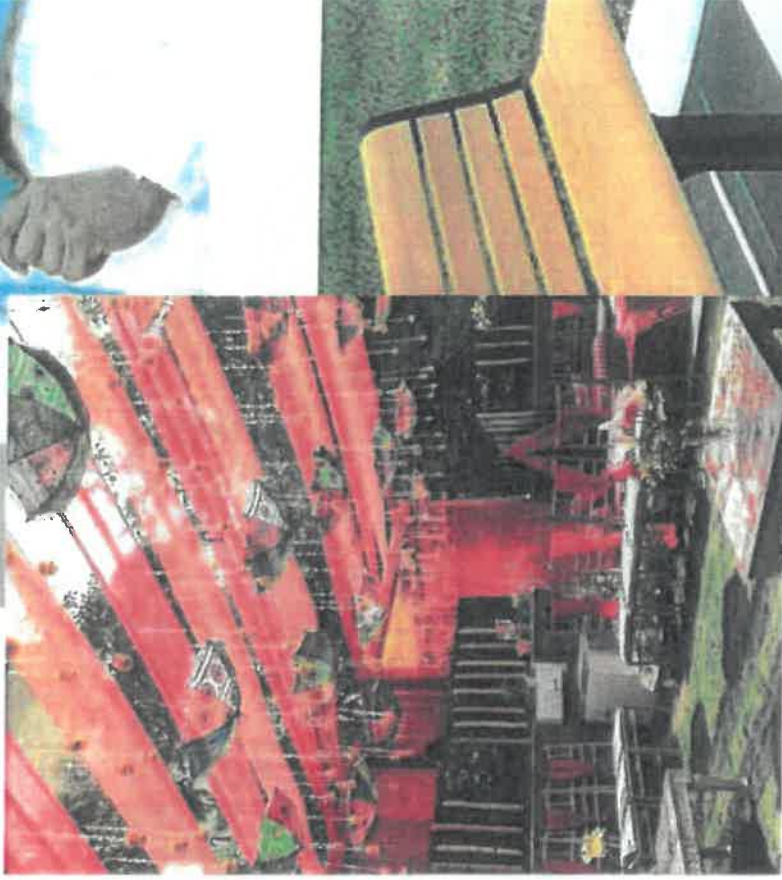
powered by the Birmingham Business Resource Center (BBRC) and Mastercard. This five-day festival during The World Games 2022 will feature an eclectic experience in the beautiful Birmingham Civil Rights National Monument - Kelly Ingram Park.

Event Dates: July 8, 9, 10, 15 and 16

**Fridays and Saturdays
12:00 pm - 8:00 pm**

**Sunday
12:00 pm - 5:00 pm**

The marketplace showcases local historically marginalized businesses and artisans. The event includes live music, white tents and flags, and a beautiful fountain design as a centerpiece set to offer an unforgettable experience for the *world* to see.



Civil Rights District Marketplace is in collaboration with
The World Games 2022 Birmingham, World of Opportunity - Vendor Program

COMMUNITY PARTNERS

Birmingham Civil Rights Institute

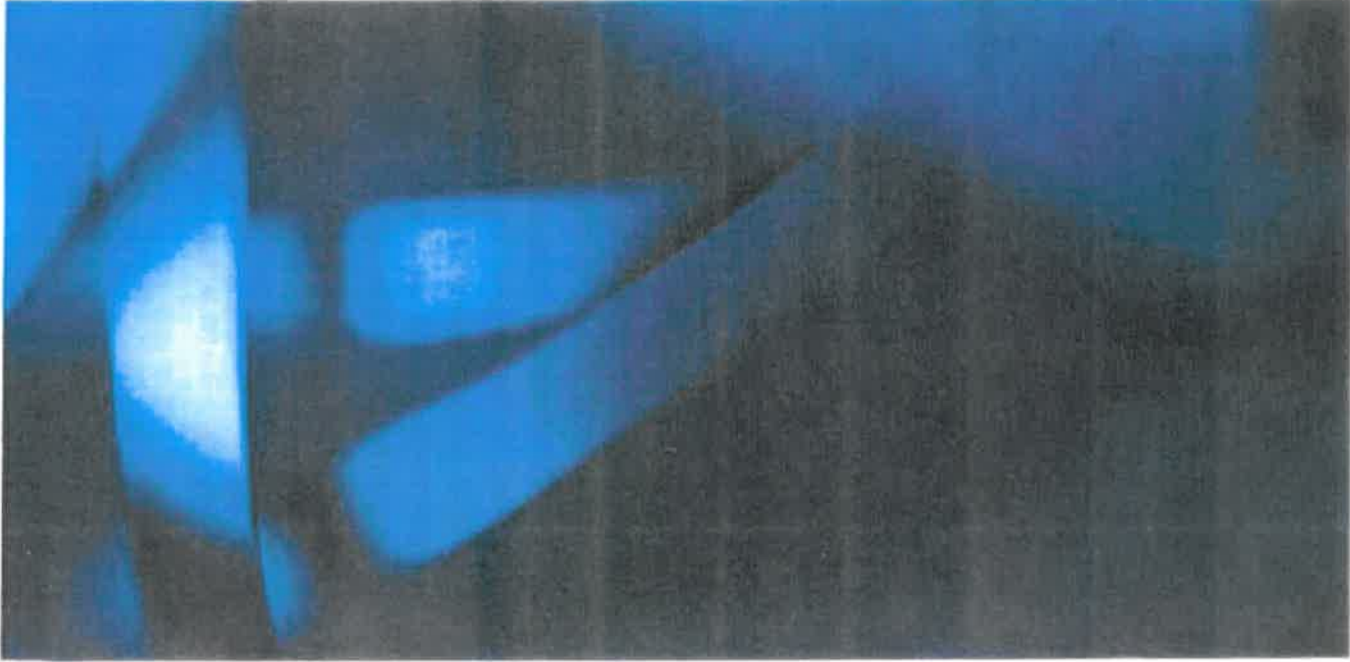
Urban Impact

16th Street Baptist Church

4th Avenue Merchants

CREED63

Walker's Legacy



EVENT DESIGN & VENDORS

One of the first things guests will experience is the beautiful Garden area; the centerpiece of the event. A large beautifully decorated white tent will serve as the Pavilion in the Garden.

Merchandise vendors will be showcased in beautiful high-pitched white, canopied tents placed throughout the park. Food vendors will offer a variety of delicious food from trucks that frame the Food Court. The Food Court is located adjacent to the park on 5th Ave N.

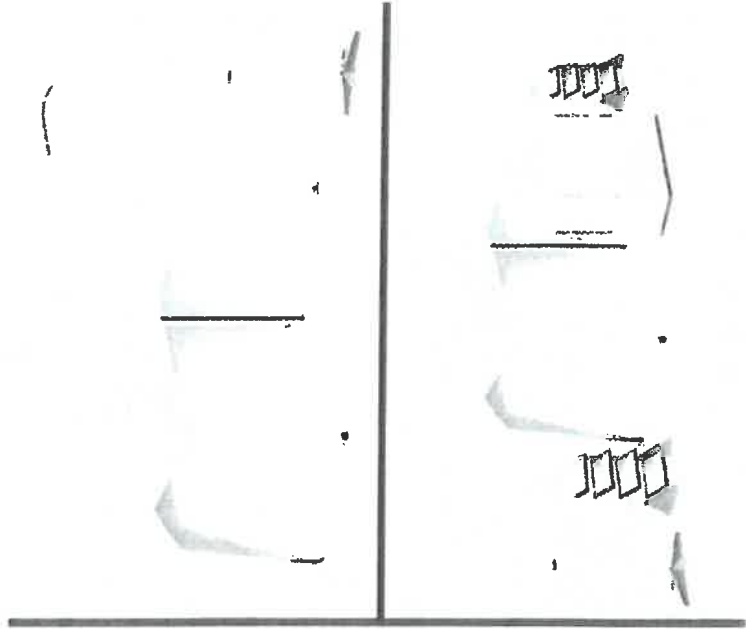


LEGEND

	Food Truck
	Restrooms
	Benches/Seating
	Medical / First Aid Tent
	Art and Culture Tents
	Event Signs

Happy Hour in the Garden 4-8 pm with Royaltea*

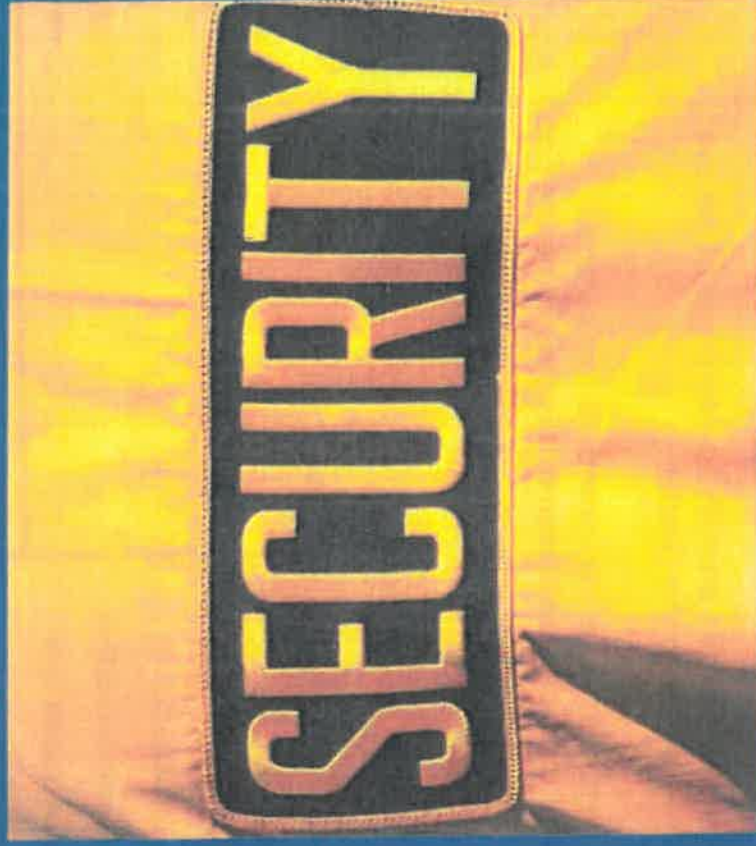
**Non-alcoholic Beverage Company*



24HR SECURITY PLAN

Kelly Ingram Park

- (2) Birmingham Police Officers will secure the premises in the park from 11:30 am - 9:30 pm
- (2) Private Security Officers will secure the premises in the park during the overnight shift from 9:30 pm - 9:30 am
- Marketplace Staff will arrive every morning at 9:00 am



EXPERIENCES

Civil Rights
District Tours

Pavilion

featuring Nationally-Renowned
Artists from Birmingham
(Ronald Mc Dowell & Larry Allen)

(10) Food Trucks

(20) Merchant
Vendors

Vocalists
Entertainment
Live DJ

Interactives

THANK YOU



BirminghamBusiness
Resource Center