

## 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. 12<sup>th</sup> 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

1. 1102 301 Rev Abraham Woods Jr Blvd N Kariba Bush  2. 12th Ave Chevron	Lounge Retail Liquor Class I  NEW APPLICATION  Beer Off Premise	☐ Approved Consent Agenda ☐ Approved pending NA ZONING ☐ No Recommendation ☐ DO NOT RECOMMEND ☐ Date: ☐ Delayed: ☐ Approved Consent Agenda
3013 12 <sup>th</sup> Ave North Nagib Saleh	Wine Off Premise  NEW APPLICATION	☐ Approved pending  NAZONING  ☐ No Recommendation  ☐ DO NOT RECOMMEND  ☐ Date:  ☐ Delayed:
3. Avenue D Events 3008 4 <sup>th</sup> Ave South Jonathan Meador	Special Retail License (over 30 days)  NEW APPLICATION	□ Approved Consent Agenda     □ Approved pending     NA ZONING     □ No Recommendation     □ DO NOT RECOMMEND     □ Date:     □ Delayed:
4. Bar La Fete 2212 Morris Ave Suite 201 Victor King	Restaurant Retail Liquor  NEW APPLICATION	□ Approved Consent Agenda     □ Approved pending     NA ZONING     □ No Recommendation     □ DO NOT RECOMMEND     □ Date:     □ Delayed:
5. Bosses Private Lounge 201 Richard Arrington Jr. Blvd S Angela Gooden	Club Liquor Class II  NEW APPLICATION	□ Approved Consent Agenda     □ Approved pending     NA ZONING     □ No Recommendation     □ DO NOT RECOMMEND     □ Date:     □ Delayed:
6. Crab Barrack 1108 20 <sup>th</sup> Street South LaSandra Hall	Restaurant Retail Liquor  NEW APPLICATION	□ Approved Consent Agenda     □ Approved pending     NA ZONING     □ No Recommendation     □ DO NOT RECOMMEND     □ Date:     □ Delayed:
7. Graymont Food 541 Graymont Ave West Lynette Peters	Beer Off Premise Wine Off Premise TRANSFER	□ Approved Consent Agenda     □ Approved pending     NA ZONING     □ No Recommendation     □ DO NOT RECOMMEND     □ Date:     □ Delayed:

8. Hood Quick Mart	Special Retail License (over 30	☐ Approved Consent Agenda
213 Dugan Ave Pratt City, Suite A	days)	☐ Approved pending
Lynette Peters		NA ZONING
	TRANSFER	☐ No Recommendation
		☐ DO NOT RECOMMEND
		□ Date:
		□Delayed:
9. Ikko Ramen & Sushi	Beer Off Premise	☐ Approved Consent Agenda
1909 11th Avenue South	Wine Off Premise	☐ Approved pending
Mei Lu		NA ZONING
	TRANSFER	☐ No Recommendation
		☐ DO NOT RECOMMEND
		☐ Date:
		□Delayed:
10. Slice Pizza & Brew	Restaurant Retail Liquor	☐ Approved Consent Agenda
1101 Dunston Avenue		☐ Approved pending
Denise Koch	NEW APPLICATION	NA ZONING
		□ No Recommendation
		☐ DO NOT RECOMMEND
		□ Date:
		□Delayed:

## SPECIAL EVENTS

11. Taste of 4th Avenue Jazz	Special Retail Liquor (under 30	☐ Approved Consent Agenda
Festival	days)	☐ Approved pending
4th Ave North between 16th Street		NA ZONING
North and 18th Street North	NEW APPLICATION	☐ No Recommendation
Carla Youngblood		☐ DO NOT RECOMMEND
_		☐ Date:
<b>Event Date: 8/27/22</b>		□Delayed:
12. Birmingham Artwalk	Special Retail Liquor (under 30	☐ Approved Consent Agenda
20th Street North from 1st Ave North	days)	☐ Approved pending
to 4th Ave North & Forstall Parking		NA ZONING
Lot	NEW APPLICATION	□ No Recommendation
Denise Koch		☐ DO NOT RECOMMEND
		□ Date:
Event Date: 9/9 – 9/10/22		□Delayed:
13. Civil Rights District Marketplace	Special Retail Liquor (under 30	☐ Approved Consent Agenda
16th Street N/5th Ave North - Kelly	days)	☐ Approved pending
Ingram Park		NA ZONING
Kellie Solomon	NEW APPLICATION	☐ No Recommendation
		☐ DO NOT RECOMMEND
Event Date: 7/7 - 7/17/22		□ Date:
		□Delayed:



## 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, COMMITTE 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 4<sup>th</sup> 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

JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING TUESDAY, JUNE 14, 2022 | 1:00 P.M. **COUNCIL CHAMBERS** 

#### 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 22<sup>nd</sup> 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.

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## JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING TUESDAY, JUNE 14, 2022 | 1:00 P.M. COUNCIL CHAMBERS

#### **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 5<sup>th</sup> Ave South

Contact: Joi

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

JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING TUESDAY, JUNE 14, 2022 | 1:00 P.M. COUNCIL CHAMBERS

#### 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).

JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING TUESDAY, JUNE 14, 2022  $\mid$  1:00 P.M. COUNCIL CHAMBERS

#### 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**

Application	n Type:	
Subject:	Applicant's Entity Name	KJB Group LLC
Business Name Business Address	301 Rev Abraham Woods Jr Blvd N	
Lounge R Club Liqu Beer Off Wine Off Restaura Special R Division I	Premise nt Retail Liquor etail License (under 30 dar Dance Permit (customers	Gub Liquor Class II (Private)  Beer On & Off Premise  Wine On & Off Premise  Special Retail License (over 30 days)  Pool Table Permit  Division II Dance Permit
regarding t	t the above-named licer the granting of this licen endanceOp	Neighborhood Association met on 6-9-22 and use application. The concerns of the Neighborhood use are indicated as follows: (Please check one)  Support No Recommendation
16 Att	t the above-named licen he granting of this licen	nse application. The concerns use are indicated as follows: (Please check one)  No Recommendation
16 Att	the above-named licer he granting of this licen endanceOp Opposition	nse application. The concerns use are indicated as follows: (Please check one)  No Recommendation

Neighborhood Officers: (Please return this form to the of attention Latonya Tate /Public Safety; City of Birmingham; 710 North 20<sup>th</sup> Street, Birmingham, AL 35203; City Council Chambers; 3<sup>rd</sup> 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 dance or pool table license		of Birmingham for an alcohol,
Name of Applicant: KJB Gi	oup LLC	
Mailing Address: 6001 Encl Trussville,	ave PL AL 35173	
Trade Name: 1102		
Location Address: 301 Rev	Abraham Woods Jr	Bivd N
Contact Number:	(404)702-1064	Contact Person: Kariba Bush
⊠ New	Application	☐ Transfer
	Type of Licens	se
Lounge Retail Liquor Class I     Club Liquor Class I (Fraternal)     Beer Off Premise     Wine Off Premise     Restaurant Retail Liquor     Special Retail Liquor (over 30)	)	nge Retail Liquor Class II (Package Store) Liquor Class II (Private) On & Off Premise On & Off Premise Cial Retail Liquor (7 days or less) Cial Retail Liquor (under 30 days)
Division I Dance Permit (custo	omer) 🔲 Divis	sion II Dance Permit (entertainers)
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	Health De Communit Operation Melanie G	Fire Prevention epartment by Development New Birmingham enkin (pool tables) nomas (PEP)

	A	City of Birmin Application coholic Beverag	for	
New Application 🖂				
Transfer	OUNGE RE	TAIL LIQ-CLASS (Enter Type of Lice	I ON/OFF PREM TYPE 0	
		(criter Type of Lice	nse applied For)	(Revenue Official)
	Group LLC			
Name and address of individual applicant	t or all partners	ether Individual, P and members if partnot separate sheet if	Partnership, Corporation, LLC ership or assoc., or all officers and	C, LLP, etc) directors, if corporation
Social Security Number	(rictae)	Date of Birth	Present Residence	Length of
Drivers License Number	Title	Place of Birth	Address	Residence at
Name of Owner, Officer or Partner		Rismann I and a second		Place Named
ALDL# Kariba Jomoa Bush	Member	Atlanta, GA	6001 Enclave PL Trussville, AL 35173	4 years
Note: If a corporation, LLC or LLP, give place  Book 019-314 Page: 1 of 2  Foreign Corporation: certificate of Author	Date:	5/11/2022	County: Jeffers	
	only Date:	(get copy of or	iginal papers)	
3. Trade Name 1102				
4(a) Location 301 Rev Abraham	Woods Jr Blvd	i N		
Exact Street Birmingham, Alabama Zip Code	t Number, or <b>35204</b>	if on Highway, give of County	details as to Location son Shelby	
(b) Length of time at this location				
(c) Mailing Address: <b>6001 Enclay</b>	e PL Trussy	ille, AL 35173		
(d) Business Phone	Fax:	<del></del>	Other Contact: (404)7	02-1064
<ol> <li>Name, trade name and License nun Trade name</li> </ol>	nber of last or Year	previous licensee:	Taxpayer ID	
6 (a) Owner of real estate for whic 6001 Enclave PL Trussville, AL 35173	ch license is d	esired Kariba Bush		
(b) Give a full description of the pre-	micae for whi	Address	d. N. O. I. II. []	_
<ul> <li>(b) Give a full description of the preduction Description           ☐ 1 Story Bldg</li> <li>(c) Is establishment equipped with the standard of the preduction of the preductio</li></ul>				
7. Has a liquor, malt or brewed beverage If "Yes", explain fully				
3 (a) Pool Tables? Yes ☐ No ☒ Co (b) Video Games? Yes ☐ No ☒ (c) Vending Machines (Snacks/Sodas)?	Juke Box o	PYes □ No ☑ r Slot Musical Equipn ☑ Cigarettes or T	Standard Provider: nent? Yes  No  No  No	☑ Other?
(a) Will you allow dancing? Yes 🛛 No (b) Independent Contract Employees (E	☐ If "Yes Disc Jockey, B	": Customer/Patron and, Bartenders, Ser	? ☑ <b>Div I</b> Exhibition/Performativers)? Yes ☐ No ☑	ance? 🔲 <b>Div II</b>

10	0 (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 \( \square\) No \( \square\)
	(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
4,	(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 (1)
	(b) (c) (d) (e) (f)	Obes the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes \_ No \_ If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  Or what purpose is the club organized and operated? Social \_ Patriotic \_ Political \_ Athletic \_ Other \_
11101	441119	elow the court records for law violations in the last ten (10) years, if any, of each person interested in this application, he manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except reckless driving. If no record, state "None".)
Nar	ne   -	Violation Charged Name of Court Date Disposition of Case
the o	only p	or the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has pplication and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is erson interested in the business for which said license is requested.  Subscribed before me this
Thie	anni	Signature of Afficial  Signature of Afficial

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

For Loning Purposes Only: Lounge Retail Lia - 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: AI. 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.) ☐ Commercial Establishment Please select: ■Private Residence ☐ No Physical Birmingham Location Trade Name (d/b/a): 1102 Attention: Address: 301 Rev Abraham Woods Jr Blvd N 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 Tax Certificate Form" instruction sheet for a listing of supple	o the accompanying "General Information for Preparing an Application for mental 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	
T 4 Manufactures	8. Home Occupation/Home Office (Please Specify the type of occupation or office)
1. Manufacturer	-
2. Contractor (Please	O State Cortified State Regulated as Shake II
Specify)	<ul> <li>9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)</li> </ul>
☐ 3. Wholesaler	10. Transient Vendors/Special Events:
4. Retailer	Date(s) of the Event Event Location
6. Food/Eating Establishment	
7. Day Care Center	
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR	ODUCT
You should indicate the one business activity that accounts business activity as well as the product or service. For example, the product of services are the product of services are the product of services.	for the largest percentage of gross income. State the broad field of mple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
Activity: Lounge/Bar	Product: Alcohol/Div I Dance
	EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required)
Section 9 - COMMENCEMENT OF BUSINESS ACTIVIT	
Enter Date Business Activity Will Begin in Birmingham Enter Date City of Birmingham Taxpayer ID Applied F	o: Month Day Year Day Year
Section 10 – Tax Liabilities Check the taxes for which	you are liable.
Sales Tax TAX IDENTIFICATION NUMBER	ERS 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
Constitution of the same to th	

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.

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 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 Bush, Kariba Member Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER Name: Address of Residence: 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: Print the Name of the Person Completing This Application Phone Number of Person Completing Application CITY OFFICE USE ONLY - Location ZONING APPROVAL AND COMMENTS: SIC OR NAICS BLIC Ba 06/06/22 **TERRITORY** Must Be Approved by ANNEX Council HEALTH DEPT PERMIT HOME OCCUPATION CERTIFICATE EXECUTED OTHER REQUIRED PERMIT ☐ YES ☐ NO ☐ NOT APPLICABLE ARTICLES OF INCORPORATION CERTIFICATE OF AUTHORITY TAX FORMS ORDERED NBL ORDERED |

### SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office section. Attach additional sheets if necessary. (Location	in Birmingham. If you are registering more than one location, please use this (Important Note: All business locations are subject to zoning approval.)
Please select:	ent Private Residence No Physical Birmingham Location
Trade Name (d/b/a):	
Attention:	
Address:	
City: Star	
Area Code and Phone Number of Business L	
Area Code and Fax Number of Business Loc	
Name of Contact Person at Business Location E-Mail:	
L-Iridii.	Website Address:
CITY OFFICE USE ONLY - Location	
ZONING APPROVAL AND COMMENTS:	SIC OR NAICS
	BLIC
	TERRITORY
	ANNEX HEALTH DEPT PERMIT
HOME OCCUPATION CERTIFICATE EXECUTED	OTHER REQUIRED PERMIT
☐ YES ☐ NO ☐ NOT APPLICABLE	ARTICLES OF INCORPORATION
	CERTIFICATE OF AUTHORITY
	TAX FORMS ORDERED  NBL ORDERED
Section. Attach additional sheets if necessary. (I Location  Please select: Commercial Establishmen	
Address:	
City: State	
Area Code and Phone Number of Business Loca Area Code and Fax Number of Business Loca Name of Contact Person at Business Location	ocation:tion:
E-Mail:	Website Address:
CITY OFFICE USE ONLY - Location	
ZONING APPROVAL AND COMMENTS:	SIC OR NAICS
	BLIC
	TERRITORY
	ANNEX HEALTH DEPT PERMIT
HOME OCCUPATION CERTIFICATE EXECUTED	OTHER REQUIRED PERMIT
☐ YES ☐ NO ☐ NOT APPLICABLE	ARTICLES OF INCORPORATION
	CERTIFICATE OF AUTHORITY
	TAX FORMS ORDERED NBL ORDERED

## 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)	(D.O.B.)	B (Race)			
respectfully represent that I am a resident citizer	n of Alabama, resid	ding 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	404-70	2-1064			
(Street Address)	Telepho				
in the City of Birmingham, Alabama, request that	I be granted to al	low			
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 presently hold a Applying for Lounge Retail Liqu	reverse side of thi	s application I			
(Type of Alabama A At this place of business in the name of	A.B.C. Board Licens	,			
(Person, The name of the person in control of the premises dancing will be conducted is Kariba Bush	, Firm or Corp. Hol s and under whose	ding License) e supervision			

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



Kariba Bush Goot Enclave Pl. Trussville, Al 35173 (4 years)

Place of Broth. 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)

5

#### WARRANTY DEED

STATE OF ALABAMA	)
COUNTY OF JEFFERSON	í

16

#### 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, convenant 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.

Attorney in Fact Tholas Alm Munhall

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

# STATE OF ALABAMA COUNTY OF SHELBY

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

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

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

MY COMMISSION AND THE PARTY OF THE PARTY OF

Grantors' Mailing Address:

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

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 01-13-2021 )

EMPLOYER IDENTIFICATION NUMBER: 86-1423610

FORM: SS-4

INTERNAL RÉVENUE SERVICE CINCINNATI OH 45999-0023 Idealahda da kala da k

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 <u>Code of Alabama 1975</u>, 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 <u>Code of Alabama</u> , 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		
	COUNTEY 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: O Series LLC complying with Title 10A, Chapter 5A, Article 11 O 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 / 2022 as the effective date (must be on or after the date filed in the / 12 office of the Secretary of State shift no later than the 90th day after the date this instrument was signed) and the time of filing to be 0 :0 OAM or OPM. (campal be noon of midnight - 12-06) Attached are any other matters the members determine to include herein (if this item is checked there must be attachments with the filing). Kariba Bush 5 / 11 / 2022

**Owner** 

Signature as required by 10A-5A-2.04

Typed title (organizer or attorney-in-fact)

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

Date (MM/DD/YYYY)

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.

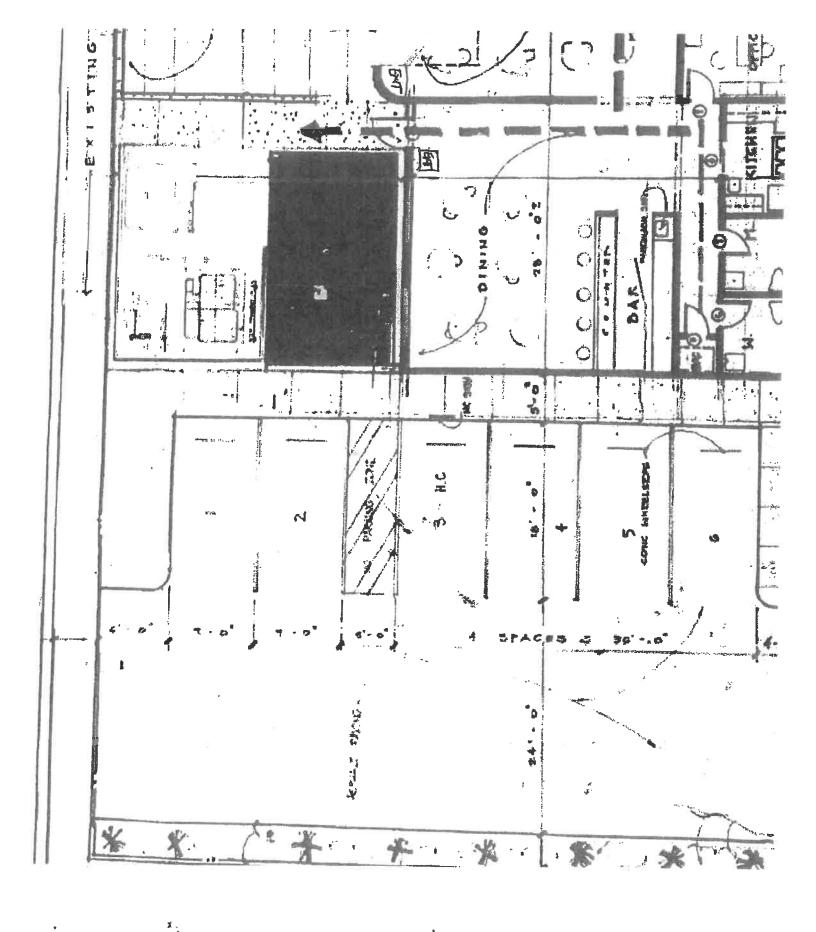
May 11, 2022

Date

J. W. Merill

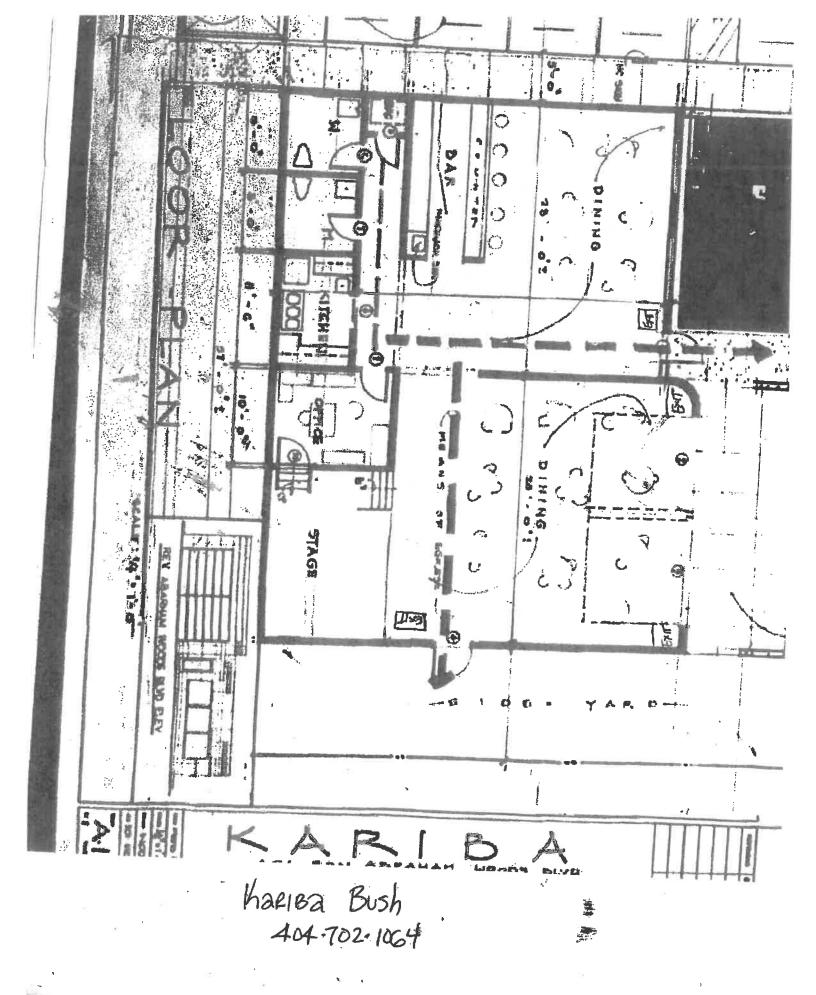
John H. Merrill

Secretary of State



4

10 mm



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

**AREA:** 7,885.81

**ACRES: 0.18** 

SUBDIVISION INFORMATION:

NAME SMITHFIELD (SOUTH)

BLOCK: 27

LOT:

288

227

20 614

612

**OTHER: \$0.00** 

7.29·

3RD'ST

7&8

623

910

309

312

322

**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: 82

**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 Trussville, Al				
Trade Name: 1102				
Location Address: 301 Rev Ab	raham Woods Jr Blvd N			
Contact Number: (40	4)702-1064 Contact Person: Kariba Bush			
⊠ New Ap	olication			
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 day)	Lounge Retail Liquor Class II (Package 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 (custome	Division II Dance Permit (entertainer)	s)		
Pool Table Permit (send copy of a	pplication)			
Kitchen equipped: yes ☐ no ☒	Number of table and chairs: 15TBS/600	CHS		
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 Date of Birth Present Residence Length of **Drivers License Number** Title Place of Birth Address Residence at Name of Owner, Officer or Partner Place Named ALDL#5775037 Member 6001 Enclave PL 4 years Kariba Jomoa Bush Atlanta, GA Trussville, AL 35173 Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama: 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 Sefferson (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 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 Give a full description of the premises for which a license is desired: New Construction Existing Structure (b) Description 1 Story Bldg Is establishment equipped with tables and chairs? Yes No I If "Yes", how many? 15TBS/60CHS (c) If "Yes", explain fully 8 (a) Pool Tables? Yes \( \subseteq \) No \( \subseteq \) Coin Operated? Yes No Standard Provider: (b) Video Games? Yes \(\overline{\omega}\) No \(\overline{\omega}\) Juke Box or Slot Musical Equipment? Yes ☐ No ☒ (c) Vending Machines (Snacks/Sodas)? Yes ☐ No ☒ Cigarettes or Tobacco Products? Yes ☐ No ☒

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 

No

Are these premises kitchen equipped? Yes   No   Not Applicable
Is kitchen apart from but convenient to the dining room? Yes \( \square\) No \( \square\)
Is place of business habitually and principally used for providing food to the public? Yes 🗌 No 🗵
If not kitchen equipped, is any type of food served? Yes  No  If "Yes", explain
Are these premises equipped for an premises consumption of liquor? Yes ⊠ No □
Will this business be operating primarily as a package store? Yes □ No ☒
Seating Capacity:
For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date Ending Date
For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date Ending Dec. 31,
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)
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 (5) No (6)
Does the club charge and collect dues from elected members?  How many pald-up members are there in the club?  Are regular meetings held? Yes  No  If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political Athletic Other  elow the court records for law violations in the last ten (10) years, if any, of each person interested in this application, the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except reckless driving. If no record, state "None".)
Violation Charged Name of Court Date Disposition of Case
for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is erson interested in the business for which said license is requested.  Subscribed before me this

For boning Purposes Only: Lounge Retail Lia - 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: ΔI 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 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 Tax Certificate Form <sup>n</sup> instruction sheet for a listing of supplet	o the accompanying "General Information for Preparing an Application for mental 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)	and the components (also sponded in middle)
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 catego	ry.  8. Home Occupation/Home Office
☐ 1. Manufacturer	(Please Specify the type of occupation or office)
2. Contractor (Please	
Specify)	9. State Certified, State Regulated, or State Licensed
	Occupations, (Please Specify)
3. Wholesaler	10. Transient Vendors/Special Events:     Date(s) of the Event
4. Retailer	Event Location
5. Other (Please Specify) Lounge/Bar	
6. Food/Eating Establishment	
7. Day Care Center	
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRO You should indicate the one business activity that accounts husiness activity as well as the product or conics. For one	for the largest percentage of groce income. State the broad Sald of
Manufacturing / Product: Automobiles. Note: This informa Revenue Service on Schedule c of Form 1040 for Sole Propr	nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: rition should be the same information as required by the Internal ietorships.
Activity: Lounge/Bar	Product: Alcohol/Div I Dance
<b>-</b>	I 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	1
Enter Date Business Activity Will Begin in Birmingham Enter Date City of Birmingham Taxpayer ID Applied Fo	: Month Day Year
Section 10 – Tax Liabilities Check the taxes for which	
	RS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- H	State of Alabama Sales Tax Number
<b>-</b>	State of Alabama Sellers Use Tax Number
<b>-</b>	State of Alabama Consumers Use Tax Number
	State of Alabama Lease Tax Number
The defence to	State of Alabama Lodgings Tax Number
	The state of the s

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.

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 Bush, Kariba Member Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER Name: Address of Residence: City: 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: Print the Name of the Person Completing This Application Phone Number of Person Completing Application CITY OFFICE USE ONLY - Location ZONING APPROVAL AND COMMENTS: SIC OR NAICS BLIC Ba 06/06/22 TERRITORY Be Approved Dy ANNEX Council HEALTH DEPT PERMIT HOME OCCUPATION CERTIFICATE EXECUTED OTHER REQUIRED PERMIT ☐ YES ☐ NO ☐ NOT APPLICABLE ARTICLES OF INCORPORATION

> CERTIFICATE OF AUTHORITY TAX FORMS ORDERED

NBL ORDERED

### SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office section. Attach additional sheets if necessary. Location	in Birmingh (Importan	am. If you are registering mathematic in the second in the	ore than one location, please use the clons are subject to zoning appro	is <b>oval.)</b>
Please select: Commercial Establishm	ent	Private Residence	No Physical Birmingham Loc	ation
Trade Name (d/b/a):				
/ (CC) IDOII.				
Address:				
City: State Area Code and Phone Number of Business	ate:		Zip:	
Area Code and Fax Number of Business Lo				
Name of Contact Person at Business Locati				
E-Mail:		Website Address:		
CITY OFFICE USE ONLY – Location				
ZONING APPROVAL AND COMMENTS:	SIC O	R NAICS		
	BLIC			
	TERRI			
	ANNE)	H DEPT PERMIT		
HOME OCCUPATION CERTIFICATE EXECUTED		R REQUIRED PERMIT		
☐ YES ☐ NO ☐ NOT APPLICABLE	ARTIC	LES OF INCORPORATION		
	CERTI	ICATE OF AUTHORITY		
	TAX FC	DRMS ORDERED NBL	ORDERED []	
Trade Name and Location Address of office in section. Attach additional sheets if necessary. (I Location  Please select: Commercial Establishment  Trade Name (d/b/a): Attention: Address: City: State	<b>mportant</b> nt	Note: All business location  Private Residence	ons are subject to zoning approv  No Physical Birmingham Locat	al.)
City: Stat	e:		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:	ocation:	Website Address:		
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
CITY OFFICE USE ONLY – Location				
ZONING APPROVAL AND COMMENTS:  HOME OCCUPATION CERTIFICATE EXECUTED		DRY DEPT PERMIT		
☐ YES ☐ NO ☐ NOT APPLICABLE		REQUIRED PERMIT S OF INCORPORATION		
		CATE OF AUTHORITY		
	TAX FOR	RMS ORDERED 🔲 NBL (	ORDERED	

## 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	В
(Name of Applicant)	(D.O.B.)	(Race)
respectfully represent that I am a resident	citizen of Alahama, re	siding at
	ordinary 10	olding at
6001 Enclave PL	Trussville	404-702-1
(Street Address)	(City)	(Telephone)
•	(=//	(Telephone)
and as operator of 1102		
(Name of Business)		
(**************************************		
301 Rev Abraham Woods Jr Blvd N	404-7	702-1064
(Street Address)	Telepl	
•	rolopi	ioney
in the City of Birmingham, Alabama, reques	t that I be granted to	allow
, 5 .,	- share a bo granted to	CIIOVY
Division I		
(Division I) (Division II)	(Divisio	n III)
	(2.7.0.0	
dancing at such place of business under and	in accordance with the	ne provisions of (Title
12, Article B, Vol. Ii of the General code of t	he City of Birmingham	Alahama 1980) as
amended, regulating the same. I have paid	the fee of	to cover the
	(\$25 or	
cost of investigation. The size of the dance	area is 20x10 so	uare feet
3	2.04.15 20/10 30	dare reet
and is located as described in the drawing o	n the reverse side of t	his application. I
presently hold a Applying for Lounge Reta	il Liquor	ins application 1
	ama A.B.C. Board Lice	nco)
At this place of business in the name of	and Albici bodiu Lice	HSE)
	ercon Firm or Corn U	olding Liennes
The name of the person in control of the pre	erson, Firm or Corp. H	olumy License)
dancing will be conducted is Kariba Bush	amaca and under WNO	se supervision
TOTION DUST		

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



Kariba Bush Gooi Enclave Pl. Trussville, Al 35173 (4 years)

Place of Broth Stlanta, 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)

S. Marie

#### WARRANTY DEED

STATE OF ALABAMA	)
	•
COUNTY OF JEFFERSON	)

160

#### 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, convenant 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.

Attorney in Fact Robbut alon Mysthall

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

## STATE OF ALABAMA COUNTY OF SHELBY

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

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:
13.1042 Ale we Wast
blingapan, AL 35304

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

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 01-13-2021 ) (

EMPLOYER IDENTIFICATION NUMBER: 86-1423610

FORM: SS-4

NOBOD

INTERNAL RÉVENUE SERVICE CINCINNATI OH 45999-0023 hindalahdadahahlajimilaandahabdaji

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 <u>Code of Alabama 1975</u>, 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 <u>Code of Alabama</u> , 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 DL1

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; O 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 / 2022 as the effective date (must be on or after the date filed in the / 12 Offices of the Specificary of State, and no later than the 90th day after the date this instrument was signed) and the time O AM or O PM. (cannot be moon or midnight 12:00) of filing to be 0 Attached are any other matters the members determine to include herein (if this item is checked there must be attachments with the filing). Kariba Bush 5 / 11 / 2022

Owner

Signature as required by 10A-5A-2.04

Typed title (organizer or attorney-in-fact)

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

Date (MM/DD/YYYY)

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.

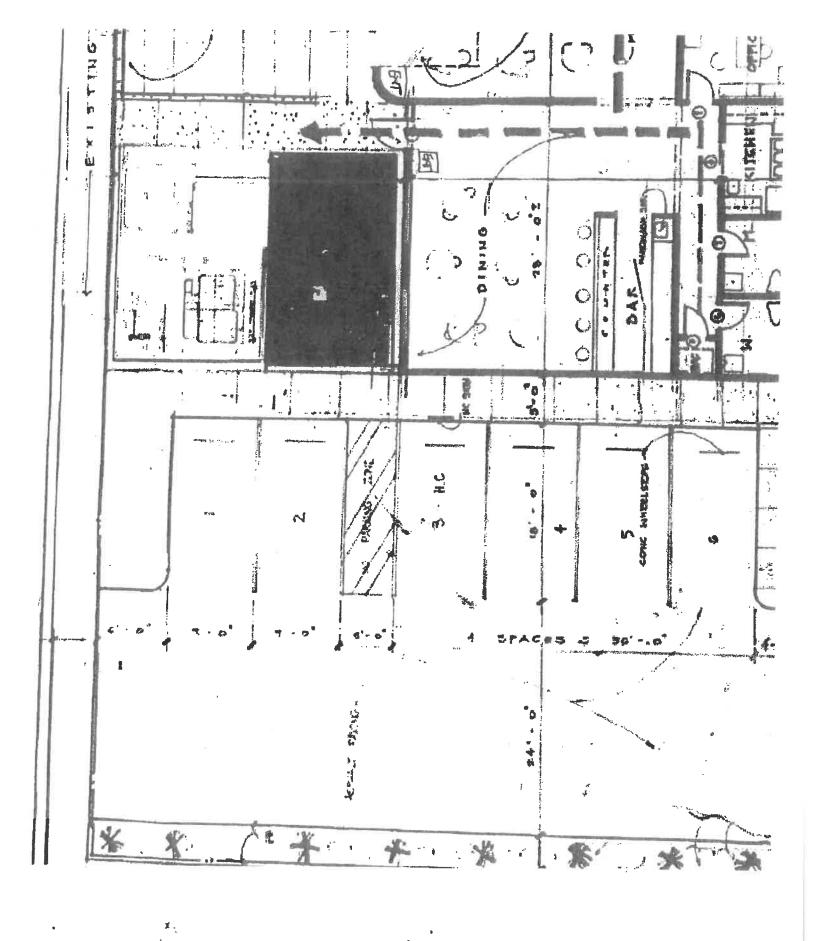
May 11, 2022

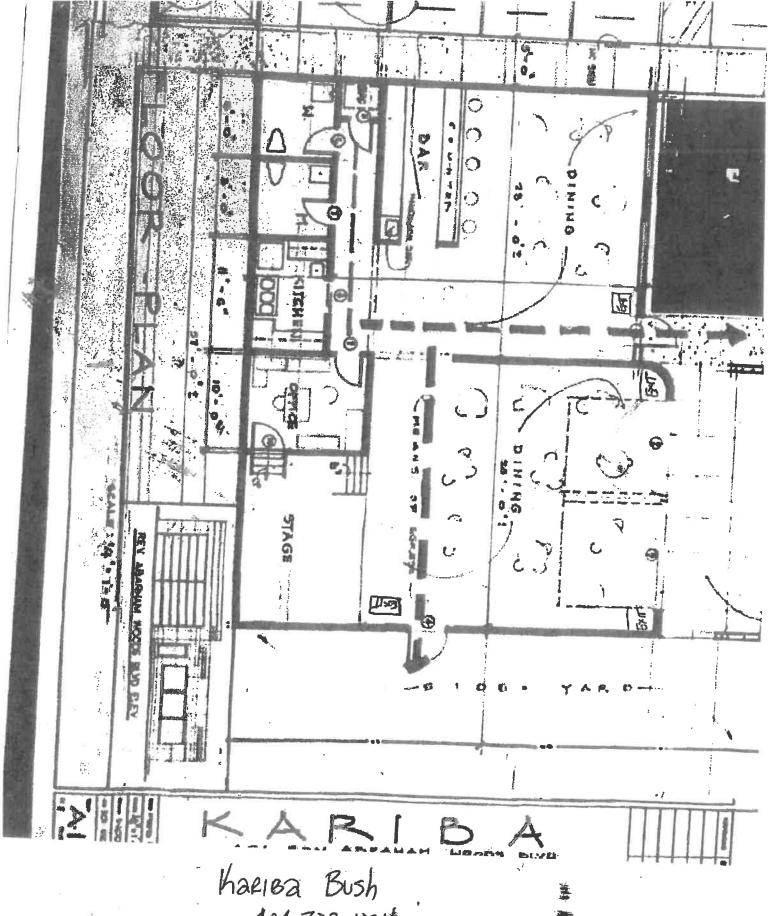
Date

J. W. Marill

John H. Merrill

**Secretary of State** 





hariba 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

**AREA:** 7,885.81

**ACRES: 0.18** 

SUBDIVISION INFORMATION:

NAME SMITHFIELD (SOUTH)

**BLOCK: 27** 

LOT:

675

7&8

910

309

312

318

322

288

227

**OTHER: \$0.00** 

223

220 614

218

40

**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 David, LLC Name **Business Name** 12th Ave Chevron **Business Address** 3013 12th Ave N Type of License/Permit Applying For: Lounge Retail Liquor Class 1 Lounge Retail Liquor Class II (Package Store Club Liquor Class I ☐ Club Liquor Class II (Private) Beer Off Premise Beer On & Off Premise Wine Off Premise Wine On & Off Premise Restaurant Retail Liquor Special Retail License (over 30 days) Special Retail License (under 30 days) Pool Table Permit Division I Dance Permit (customers) Division II Dance Permit The Neighborhood Association met on ar 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) // Support Oppose Attendance \_\_\_\_ No Recommendation Reason for Opposition attended NA meeting Applicant: did not attend NA meeting

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

6/24/2022 Mr. Salem 20 10:56 205-567-5706

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

The following applicant had dance or pool table licens	as applied to the City e:	of Birmingham for an alcohol,
Name of Applicant:	David, LLC	
Mailing Address:	3013 12 <sup>th</sup> Ave N Birmingham, AL 352	34
Trade Name:	12th Ave Chevron	
Location Address:	3013 12 <sup>th</sup> Ave N	
Contact Number:	(205)567-5706	Contact Person: Nagib Saleh
⊠ 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)	) Club L  Beer C  Wine C  Specia	e Retail Liquor Class II (Package Store) iquor Class II (Private) in & Off Premise in & Off Premise I Retail Liquor (7 days or less) I Retail Liquor (under 30 days)
☐ Division I Dance Permit (custo	_	n II Dance Permit (entertainers)
☐ 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	Health Depa Community Operation Ne	Development w Birmingham din (pool tables)

		A	City of Birmin Application Icoholic Beverag	for	
	w Application		050/WINE-TYP	E 070(OFF PREMISE ONLY)	By: GS
			(Enter Type of Lice	nse Applied For) (	Revenue Official)
1. N	lame of Applicant (s) Da	vid, LLC			
2	Da		ether Individual E	Partnership, Corporation, LLC, L	10 -4-1
2. Na	ame and address of individual applic	ant or all partners	and members if partn separate sheet if	ership or assoc., or all officers and dire	ctors, if corporation
	ocial Security Number		Date of Birth	Present Residence	Length of
	rivers License Number	Title	Place of Birth	Address	Residence at
Nam	e of Owner, Officer or Partne	er	4		Place Named
ALDI Nagi	# Faisal N Saleh	Member	Yemen	2442 Huntington Glen DR Birmingham, AL 35226	16years
Book Foreig		Date: thority Date:  n eet Number, or de 35234	10/27/2017  (get copy of or	details as to Location	ess in Alabama:
(c)	Mailing Address: 3013 12th		gham. AL 35234		
(d)	Business Phone	Fax		Other Contact: (205)567	<u>-5706</u>
5. N	dame, trade name and License r	number of last o	r previous licensee.		
7	rade name	Year	Type	Taxpayer ID	
6 (a) 180	Owner of real estate for w O Center Point Pkwy Birminghai	/hich license is d			
			Address		
(b)	nescribation N 1 2001A RIGIT			d: New Construction   Existing	Structure
(c)	Is establishment equipped wit	n tables and cha	nrs? Yes 🗆 No 🖂	If "Yes", how many?	
7. Has	s a liquor, malt or brewed bever fes", explain fully	age license for p	remises ever been o	denied, suspended or revoked? [	☐ Yes   ☑No
(b) Vi (c) V	ool Tables? Yes No X deo Games? Yes No X ending Machines (Snacks/Sodas	s)? Yes 🗌 No [	r Slot Musical Equipr  Cigarettes or 1	Standard Provider: ment? Yes  No  No  No  No  No  No  No  No  No  N	
(b) I	ndependent Contract Employees	NO MI IT "Yes 5 (Disc Jockey, B	and, Bartenders, Se	n? ☐ <b>Div I</b> Exhibition/Performand rvers)? Yes ☐ No ☑	e? 🔲 Div II

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 \(\Boxed{\omega}\) No \(\Bigin{align*}\Boxed{\omega}\)
(d)	
(e)	Are these premises equipped for on premises consumption of liquor? Yes \(\subseteq\) No \(\sigma\)
<b>(f)</b>	Will this business be operating primarily as a package store? Yes □ No ☑
<b>(</b> g)	Seating Capacity:
(h)	For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date Ending Date
∌ (f)##	For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date Ending Dec. 31,
<b>(1)</b>	For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting Ending Ending (Note: Application must be filed 120 days in advance of event for which license is applied for)
	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 (5) No (6)
(c) (d) (e) (f) 12. List b	Does the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes  No  If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political Athletic Other elow the court records for law violations in the last ten (10) years, if any, of each person interested in this application, the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except largest processing the solution of the last ten (10) years, if any of each person interested in this application, and ballot?
Name M) - A	Violation Charged Name of Court Date Disposition of Case
the only pe	for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is subscribed before me this
appit	cation will not be processed until all fees due at the time of application are paid and receipts are on file

# For loning l'urposes; Beer l'Wine LOff 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.

Continue de la latera de la constante de la co			
Section 1 – WHAT WOULD YOU LIKE TO DO?			
Register a new business (Please complete all se			
Add a New Location or Tax Type to your curren	nt registration (Please com	plete Sections 2 ,3, 5-10,12,13, and	14)
☐ Change Business Ownership of your current reg	istration (Please complete	e all sections)	,
Change the Malling Address only for your current	nt registration (Please com	oplete Sections 2, 8-10, 12, 13 and	141
Change the Location Address of your current re	gistration (Please complete	P Sections 2 3 5-13 and 14)	-7)
☐ Change in Corporate Officers, Members, or Part	ners (Please complete Sec	tions 2 5 7-0 11-12 and 14)	
☐ Provide a general "update" of your current regis	tration information (Please	a complete all coctions)	
	(I ICOS)	e complete all sections)	
Section 2 – LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the s	o which tax forms are to b treet address of the busin	be sent: ness must also be indicated.)	
Full Legal Name: David, LLC Attention:			
Address: 3013 12th Ave N			
City: BirmIngham State:	AL Zip G	Code: 35234	_
Area Code and Phone Number: (205)567-5706 Area Code and Fax Number:			
Name of Contact Person: Nagib Saleh			
E-Mail:	Website Address:		
Section 3 — TRADE NAME AND LOCATION ADDRESS please see reverse side of this form. (Important Note: A Please select: Commercial Establishment  Trade Name (d/b/a): 12th Ave Chevron	of office in Birmingham. If you is the second of the secon	ou are registering more than one location in the control of the co	
Attention: Address: 3013 12th Ave N			
City: Birmingham State: Al		Zip: 35234	
Area Code and Phone Number of Business Location:		ыр	
Area Code and Fax Number of Business Location: Name of Contact Person at Business Location:			
E-Mail:	Website Address:		
Coding 4 Charles of Charles			_
Section 4 – CHANGE OF OWNERSHIP resulting from r if applicable, this section MUST be completed.	merger, purchase or acquis	sition of an existing business.	
ormer Owner:			
rade Name (d/b/a)			_
failing Address of Former Owner			
ddress (es) of Former Location(s)			
rea Code and Phone Number of Former Owner:			
The state of the s			

	(TITE OF BITCHING TIAN, ALABAMA)
Section 5 - TYPE OF OWNERSHIP Please indicate the form of organization. NOTE: Please refe Tax Certificate Form" instruction sheet for a lighting of organization.	er to the accompanying "General Information for Preparing an Application for plemental documentation to be included with this application.
1. Alabama Corporation (Incorporated in Alabama	to be included with this application.
Partnership (two or more owners)	<ul> <li>a)</li></ul>
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	70%
Property Categories	8. Home Occupation/Home Office
1. Manufacturer	(Please Specify the type of occupation or office)
2. Contractor (Please Specify)	9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
3. Wholesaler	10. Transient Vendors/Special Events:
☑ 4. Retailer	Date(s) of the Event Event Location
5. Other (Please Specify)	FACILIC FOCATION
6. Food/Eating Establishment	
7. Day Care Center	
7. Day Care Center	
7. Day Care Center  Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or parties.	s for the largest percentage of gross income. State the broad field of
7. Day Care Center  Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles Network Tribers of Product of Services (Network)	s for the largest percentage of gross income. State the broad field of ample-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
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you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business location requires a

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

NAME Saleh, Nagib	TITLE Member	SOCIAL SECURITY NUMBER
Section 12 – CORPORATE RESIDENT AGE Name:	INT OR LOCAL MANAGER	
Address of Residence:		
City: S	tate	Zip Code
Area Code and Phone Number of Residen	ce:	
Section 13- STATEMENT OF ACKNOWLED sign.	GEMENT AND ACCEPTANCE	OF CONDITIONS -Please read carefully, then
of Birmingham Laws, Ordinances, Rules a ordinances, rules and regulations may result also understand that disclosure of any fall issued pursuant to this application, or in that it is unlawful for any person to common to otherwise exempt therefrom under (Ordinance No. 97-183), without first havicontinue in any business, vocation, occuwithout obtaining a new license. I further any business, vocation, or profivithout approval from the City of Birminghams.	and Regulations, and that are suft in the revocation of any lise or misleading information he revocation of the license is ence or engage in any busing the provisions of the Citying procured a license thereignation, or profession after a runderstand that it is unlaw it	and complete statements, made in good ratin, is my compliance with all applicable City of anditions set forth in any and all applicable City of providing the provided in the said laws, alicense issued pursuant to this application. It is will result in automatic denial of any license if such has already been issued. I understand ess, vocation, occupation or profession, who is of Birmingham Business License Tax Code fore, and that it is unlawful for any person to the expiration of a license previously issued ful for any person to engage in or continue in the corporate limits of the City of Birmingham Engineering, and Permits (Zoning Division).
Signature of Person Completing This Applic	ation	Date
Print the Name of the Person Completing This A	pplication Phone Num	ber of Person Completing Application
TTY OFFICE USE ONLY Location		
ZONING APPROVAL AND COMMENTS:  K C B A CONTROL OF THE CONTROL OF T	SIC OR NAICS BLIC TERRITORY ANNEX HEALTH DEPT PERMIT OTHER REQUIRED PERMIT	
YES NO NOT APPLICABLE	ARTICLES OF INCORPORAT	TON

Please select: Commercial Establishm		☐ Private Residence	No Physical Birmir	igham Location	
Trade Name (d/b/a):			**************************************	. <b>€</b> -₹	
Address:					
City: 5	State: ode and Phone Number of Business Location:		Zip:		
Area Code and Frione Number of Business Li	s Location:				
Name of Contact Person at Business Local	tion:				
E-Mail:		Website Address:			
CITY OFFICE USE ONLY - Location					
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OME OCCUPATION CERTIFICATE EXECUTED	OTHER	REQUIRED PERMIT			
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### 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**

- L TERM: The term of this Agreement shall be for 2 year(s), commencing on the 1<sup>st</sup> day of May, 2022 and expiring on the 30<sup>th</sup> 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 <u>Code of Alabama 1975</u> 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

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)

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).

- 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 <u>Code of Alabama</u>, 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)
Nagib Saleh
2486 Huntington Glen Drive
Birmingham, AL 35226

(For SOS Office Use Only)

LLC Cert of Formation - 3/2017

Page 1 of 2

Nagib Saleh	cated at the Registered Office (only one agent):
Street (No PO Boxes) address of Reg	gistered Office (must be located in Alabama):
3181 Green Valley Rd Vestavia, AL 3524	
Mailing address in Alabama of Regist	tered Office (if different from street address):
2021 Shady Crest Drive Hoover, AL 3521	
4. The undersigned certify that there is at	t least one member of the limited liability company.
	imited Liability Company being formed:
Series LLC complying with Title 1	
Professional LLC complying with	Title 10A, Chapter 5A, Article 8
Non-Profit LLC complying with 10	0A-5A-1.04(c)
<ol> <li>The filing of the limited liability compa or at the delayed filing date (cannot be p</li> </ol>	any is effective immediately on the date filed by the Judge of Probate prior to the filing date) specified in this filing. 10A-1-4.12
The undersigned specify 10/24 the office of the county ludge of Probe	/2017 as the effective date (must be on or after the date filed in ite, but no later than the 90th day after the date this instrument was  OAM or OPM. (cannot be noon or midnight - 12:00)
()	members determine to include herein ( if this item is checked there
10 / 24 /2017 Date (MM/DD/YYYY)	Signature a required by 10A-5A-2.04
	Nagib 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).
LC Cert of Formation - 3/2017	Page 2 of 2

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



**RES775218** 

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

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

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

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 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

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,

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). Certain tax classification elections can be requested by filing Form 8832, Entity Classification Flection. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 6832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. 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 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 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

AREA: 19,689,78 **ACRES: 0.45** 

SUBDIVISION INFORMATION:

NAME MCDONALDS SURVEY 22-25-1

**BLOCK:** 642

**OTHER: \$0.00** 

1B

LOT:

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 Greenawalt Hospitality, LLC Name Business Name Avenue D Events Business Address 3008 4th Ave S Type of License/Permit Applying For: Lounge Retail Liquor Class I Lounge Retail Liquor Class II (Package Store Club Liquor Class I Club Liquor Class II (Private) Beer Off Premise Beer On & Off Premise Wine Off Premise Wine On & Off Premise Restaurant Retail Liquor Special Retail License (over 30 days) Special Retail License (under 30 days) **Pool Table Permit** Division I Dance Permit (customers) Division II Dance Permit Neighborhood Association met on voted about the above-named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one) Attendance Oppose Support \_\_\_ No Recommendation Reason for Opposition Applicant: attended NA meeting \_\_\_\_\_ did not attend NA meeting 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 Wiby 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 Hos	spitality, 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     New Application	n 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)	<ul> <li>□ Lounge Retail Liquor Class II (Package Store)</li> <li>□ Club Liquor Class II (Private)</li> <li>□ Beer On &amp; Off Premise</li> <li>□ Wine On &amp; Off Premise</li> <li>□ Special Retail Liquor (7 days or less)</li> <li>□ Special Retail Liquor (under 30 days)</li> </ul>				
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)				

	ΙΔ	City of Birmin Application coholic Beverag	for	
New Application				
Transfer S	PECIAL RE		L60/MORE 30 DAYS	By: GS
		(Enter Type of Lice	nse Applied For)	(Revenue Official
Name and address of individual applicant	or all partners	ether Individual, P and members if partno separate sheet if	necessary)	.C, LLP, etc) d directors, if corporation
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 a Place Named
ALDL# Bobby Thelin Greenawalt	Member	Indiana	4157 Creekview Ct Auburn, AL 36832	7 years
Book 2019071 Page: 1 of 3 214  Foreign Corporation: certificate of Author  3. Trade Name Avenue D Events  4(a) Location 3008 4th Ave S Exact Street	t Number, or		details as to Location	rson
Birmingham, Alabama Zip Code  (b) Length of time at this location	35233	County	son Shelby	
(c) Mailing Address: 209 Alabam	a St Auburn	, AL 36832		
(d) Business Phone	Fax	:	Other Contact: (334)	734-2468
5. Name, trade name and License nun Trade name	nber of last o	r previous licensee:	Taxpayer ID	
5 (a) Owner of real estate for which 4508 6 <sup>th</sup> Ave S Birmingham, AL 35233	ch license is d	lesired E Hughes Er	nterprises LLC	
<ul> <li>(b) Give a full description of the predescription  ☐ 1 Story Bldg</li> <li>(c) Is establishment equipped with the story of the predescription  ☐ 1 Story Bldg</li> </ul>				•
7. Has a liquor, malt or brewed beverage If "Yes", explain fully				
(a) Pool Tables? Yes ☐ No ☒ C (b) Video Games? Yes ☐ No ☒ (c) Vending Machines (Snacks/Sodas)?	Juke Box o	? Yes  No  or Slot Musical Equipo	ment? Yes \( \sum \) No \( \subseteq \)	o ⊠ Other?

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

(b) 10 (a)	Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes ☒ No ☐ Are these premises kitchen equipped? Yes ☐ No ☒ Not Applicable ☐				
(b)					
(c)					
(d)	If not kitchen equipped, is any type of food served? Yes  No  If "Yes", explain  Catered				
(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:				
· (ħ)	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,				
(i)	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 (5)				
(c) (d) (e) (f) 12. List including	Does the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes  No  If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political Athletic Other  below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except directless driving. If no record state "None")				
Name	Violation Charged  Name of Court  Date  Disposition of Case				
Applicant read said the only p Sworn and	for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is erson interested in the business for which said license is requested.  disubscribed before me this				
his appl	ication will not be processed until all fees due at the time of application are paid and receipts are sufficient				

T le at the time of application are paid and receipts are on file.

# For loning Purposes Only: special Retail Lig Type 160/More than 30 days

TAXPAYER IDENTIFICATION NUMBER

### 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 ser	ctions)	
☐ Add a New Location or Tax Type to your current	•	Sections 2 .3. 5-10 12 13 and 14)
☐ Change Business Ownership of your current regi		
Change the Mailing Address only for your curren	•	•
☐ Change the Location Address of your current reg		
		•
Change in Corporate Officers, Members, or Partr		
Provide a general "update" of your current regist	tration information (Please com	piete all sections)
Section 2 - LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the st	o which tax forms are to be sen treet address of the business m	t: ust also be indicated.)
Full Legal Name: Greenawalt Hospitality, LLC Attention:		
Address: 209 Alabama St		
	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: ionathan@beveragemomt.com	N. 1	
E-Mail: jonathan@beveragemgmt.com	Website Address:	
Section 3 - TRADE NAME AND LOCATION ADDRESS please see reverse side of this form. (Important Note: A Please select:   Commercial Establishment  Trade Name (d/b/a): Avenue D Events	II business locations are subjec	registering more than one location, to zoning approval.)  No Physical Birmingham Location
Attention:		
Address: 3008 4th Ave S		
City: Birmingham State: AL	Zip:	35233
Area Code and Phone Number of Business Location:	Zip:	35233
, , , , , , , , , , , , , , , , , , , ,	Zip:	35233
Area Code and Phone Number of Business Location: Area Code and Fax Number of Business Location:	Zip: Website Address:	35233
Area Code and Phone Number of Business Location: Area Code and Fax Number of Business Location: Name of Contact Person at Business Location:	Website Address:	
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:  Section 4 CHANGE OF OWNERSHIP resulting from n	Website Address:	
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: Section 4 - CHANGE OF OWNERSHIP resulting from Inf applicable, this section MUST be completed.	Website Address:	
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:  Section 4 - CHANGE OF OWNERSHIP resulting from refrapplicable, this section MUST be completed. Former Owner:	Website Address:	
Area Code and Phone Number of Business Location: Area Code and Fax Number of Business Location: Area Code and Fax Number of Business Location: Name of Contact Person at Business Location: E-Mail:  Section 4 - CHANGE OF OWNERSHIP resulting from more of applicable, this section MUST be completed.  Former Owner:  Trade Name (d/b/a)	Website Address:	
Area Code and Phone Number of Business Location: Area Code and Fax Number of Business Location: Area Code and Fax Number of Business Location: Name of Contact Person at Business Location: E-Mail:  Section 4 - CHANGE OF OWNERSHIP resulting from many process of the completed.  Former Owner:  Frade Name (d/b/a)  Mailing Address of Former Owner	Website Address:	

Section Please in Tax Cer	dicate the form of organization. NOTE: Please refer to the form of instruction sheet for a listing of suppler	the accompanyin	ng "General Information for tion to be included with this a	r Preparing an Application for application.
□ 1. A	alabama Corporation (Incorporated in Alabama)	Г	1. Foreign Corporation	(Incorporated in another state)
2. P	Partnership (two or more owners)		<b>01</b>	( State)
☐ 3. S	ole Proprietor (one owner)			
☐ 4. U	Inincorporated Association (i.e., PA)			
☐ 5. C	Other			
☐ 6. L	imited Liability Partnership (LLP)			
🛛 7. L	imited Liability Company (LLC)			
Please in	6 - TYPE OF BUSINESS  Indicate the principal business activity categor  Idanufacturer  Contractor (Please Specify)	8. Hom	e Occupation/Home Off Specify the type of occupation or o	office)
	ontractor (Flease Specify)	Occu	pations, (Please Specify)	)
☐ 3. V	Vholesaler	LJ 10. Trai	nsient Vendors/Special E e(s) of the Event	Events:
☐ 4. R	etailer		nt Location	
_	Event			
	ther (Please Specify) Center			
	ood/Eating Establishment			
☐ 7. D	ay Care Center			
You shouk business a Manufactu	PRINCIPAL BUSINESS ACTIVITY AND PRO d indicate the one business activity that accounts for ctivity as well as the product or service. For exam- ring / Product: Automobiles. Note: This informative fervice on Schedule c of Form 1040 for Sole Propri	for the largest p	holocalo Caloc / Droduck, I	Non-many and and an in-
Activity:	Event Center	Product	: Alcohol/Special Ever	nts/ Catered Food
Section 8	- FEDERAL TAX ID NUMBER / NUMBER OF	EMPLOYEES		
Enter Fed	eral Identification Number (REQUIRED) and	the number of	of employees that will be	working in Birmingham.
Federal II	O Tax Number Number of E	Employees in I	Birmingham (Required)	
Section 9	- COMMENCEMENT OF BUSINESS ACTIVITY	,		
	Business Activity Will Begin in Birmingham:		Day	Voor
Enter Date	e City of Birmingham Taxpayer ID Applied Fo	r: Month	Day	Year Year
Section 10	- Tax Liabilities Check the taxes for which	you are liable.		
Sales      Sa	TAX IDENTIFICATION NUMBER	RS NOW ASSIGN	IED TO YOU: (Write "None	e" if no number assigned)
☐ Sellers			ma Sales Tax Number_	
Consu	mers Use Tax	State of Alaba	ma Sellers Use Tax Num	ber
Lease			ma Consumers Use Tax	
○ Occup			ma Lease Tax Number_	
_	gs Tax	State of Alabai	ma Lodgings Tax Numbe	er
If you have	more than one business location, it is assumed the	at you will file	consolidated returns for ea	ich 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 DIDMINISTRANCE AT ADARCH.
The state of the s	CILLOF BIRWINGHAM ALARAMAL

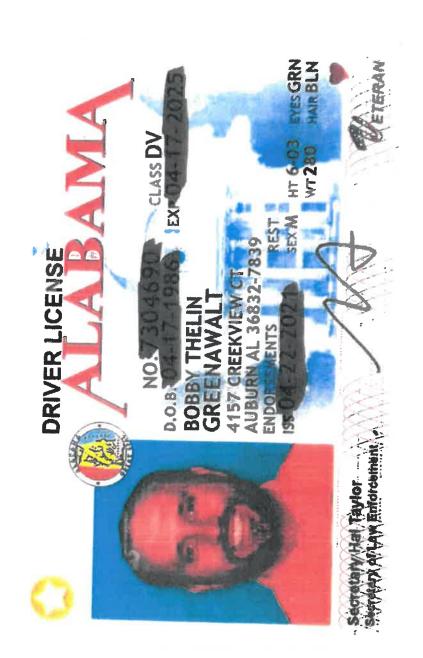
3

Business License Tax

State of Alabama Unemployment Tax Number\_

It 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

4 Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS This information REQUIRED. (Attach additional sheets if necessary.) NAME TITLE Greenawalt, Bobby SOCIAL SECURITY NUMBER Member Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER Address of Residence: City: Area Code and Phone Number of Residence: Zip Code Section 13- STATEMENT OF ACKNOWLEDGEMENT AND ACCEPTANCE OF CONDITIONS --Please read carefully, then 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 Print the Name of the Person Completing This Application Phone Number of Person Completing Application CITY OFFICE USE ONLY Location SIC OR NAICS OK-M1-ADS-5-27-202 Must be approved BLIC TERRITORY ANNEX HEALTH DEPT PERMIT HOME OCCUPATION PRIFICATE EXECUTED OTHER REQUIRED PERMIT ☐ YES ☐ NO NOT APPLICABLE ARTICLES OF INCORPORATION CERTIFICATE OF AUTHORITY TAX FORMS ORDERED

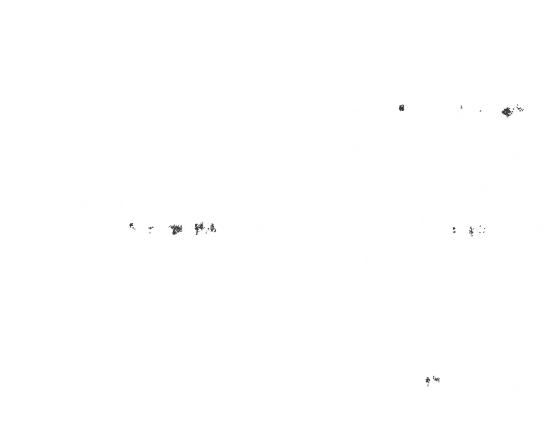


### ELKHART COUNTY HEALTH DEPARTMENT CERTIFICATE OF BIRTH

THE	IS TO CERTIFY, that our records		helin Nome	Greenaw	alt	
	Goshen Place	, Elkhart County, Indiana	Month	Day	Year	
Chik	Indiana Shiplace of Father	walt and Kimberly M. A		ichigan		ues .
Date	Record was filed Signed		lly			
au.		/ Hestin Office	. 3.3		9	:
100	(SEAL)	Date Issued	1 2 A	1986		<i>a</i>

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

- Bobby Greenawalt
  - o 4157 Creekview Ct., Auburn, AL 36832 7yrs
  - SSN



### **ALABAMA LIMITED POWER OF ATTORNEY**

BE IT ACKNOWLEDGED that I, Bobby Greenawalt				
(CARTERIA)	Full Name he "Principal", do hereby grant a limited			
social security number and specific power of attorney to	athan Meador of			
938 SW 56th Ter., Gainesville, FL 3260	Full Name 7 863-557-3198			
as my "Attorney-in-Fact".	Phone			
Said Attorney-in-Fact shall have perform only the following acts on my b	full power and authority to undertake and ehalf:			
1. Preparation and submit	al of licensing applications			
2. Payment of licensing	fees and taxes			
3				
The authority herein shall include such in to carry out and perform the specific auth agrees to accept this appointment subject perform in said fiduciary capacity consistent. Fact in its discretion deems advisable, execution.	orities granted herein. My Attorney-in-Fact to its terms, and agrees to act and ent with my best interest, as my Attorney-			
This power of attorney may be revoked by	y any of the following:			
	ne Box if Applicable)			
X - By the Principal at anytime by	authorizing a Revocation.			
• • When the above stated one (completed,	1) time power or responsibility has been			
- On the day of	, 20			
This power of attorney form shall automatincapacitation, provided any person relying rights to accept and reply upon the author of actual notice of revocation.	g on this power of attorney shall have full			

State Law. This Power of Attorney is	governed by the laws of the State of
Alabama .	
Signed this 12th day of May	Bobby Greenawalt Print Name
ACCEPTANCE	OF APPOINTMENT
Jonathan Meador the appointment as attorney-in-fact in accordant accordant and accordant accorda	e attorney-in-fact named above, hereby accept nce with the foregoing instrument.
ACKNOWLEDGMEN	NT OF NOTARY PUBLIC
STATE OF Alabama  Lee County, ss.	
government issued photo identification to b	, 20 22, before me appeared is Power of Attomey who proved to me through e the above-named person, in my presence ledged that he executed the same as his free Notary Public

### **ALABAMA LIMITED POWER OF ATTORNEY**

BE IT ACKNOWLEDGED that I, Bobby Greenawalt
Full Name
, the "Principal", do hereby grant a limited
and specific power of attorney to Lance Ledbetter
Full Name
2901 4th Ave. S, Apt 314, Birmingham, AL 35233
Address
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:
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 ncapacitation, provided any person relying on this power of attorney shall have full ights 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 go	verned by the laws of the State of
Alabama .	
Signed this 24th day of May	1, 20 22
	Bobby Greenawalt
ACCEPTANCE OF	Print Name  APPOINTMENT
I, Lance Ledbetter , the attorney-in-fact in accordance  Attorney-in-Fact's Signature  Lance Ledbetter Attorney-in-Fact's Printed Name	mey-in-fact named above, hereby accept with the foregoing instrument.
STATE OF Alabama County, ss.	OF NOTARY PUBLIC
government issued photo identification to be the executed foregoing instrument and acknowledg act and deed.	e above-named person, in my presence
	_

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

County Division Code: AL040 Inst. # 2019071214 Pages: 1 of 3 I certify this instrument filed on 7/16/2019 10:58 AM Doc: PAMEND Alan L, King, Judge of Probate Jefferson County, AL. Rec: \$38.00

Clerk: WORTHYV

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 14<sup>th</sup> 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 15<sup>th</sup> 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: NARCH 01, ZOZI

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

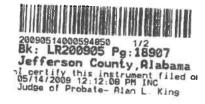
Date

J. H. Merill

John H. Merrill

**Secretary of State** 

### STATE OF ALABAMA JEFFERSON COUNTY



# 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.
  - 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** 65/14/2009 12:12:08 PM INC Fee - \$51.00

Total of Fees and Taxes-\$51.00 HATCHERK

ROBRYA CREENAWALT

#### **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 <u>Limitation on Exclusive Rights</u>. 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 herin.

### ARTICLE 3 FINANCIAL CONSIDERATION

3.1 <u>Financial Consideration</u>. 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 20<sup>th</sup> 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 <u>Time of Operation</u>. 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 <u>Safety</u>. 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 <u>Utilities</u>. 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 <u>Inventory of Alcoholic Beverages</u>. The Concessionaire shall maintain an inventory of all Alcoholic Beverages stored at the Facility.
- 6.3 <u>Taxes</u>. 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 <u>Dram Shop Liquor Law Liability Insurance</u>. 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 <u>Inspection of Insurance</u>. 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 <u>Modification</u>. 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.
- 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

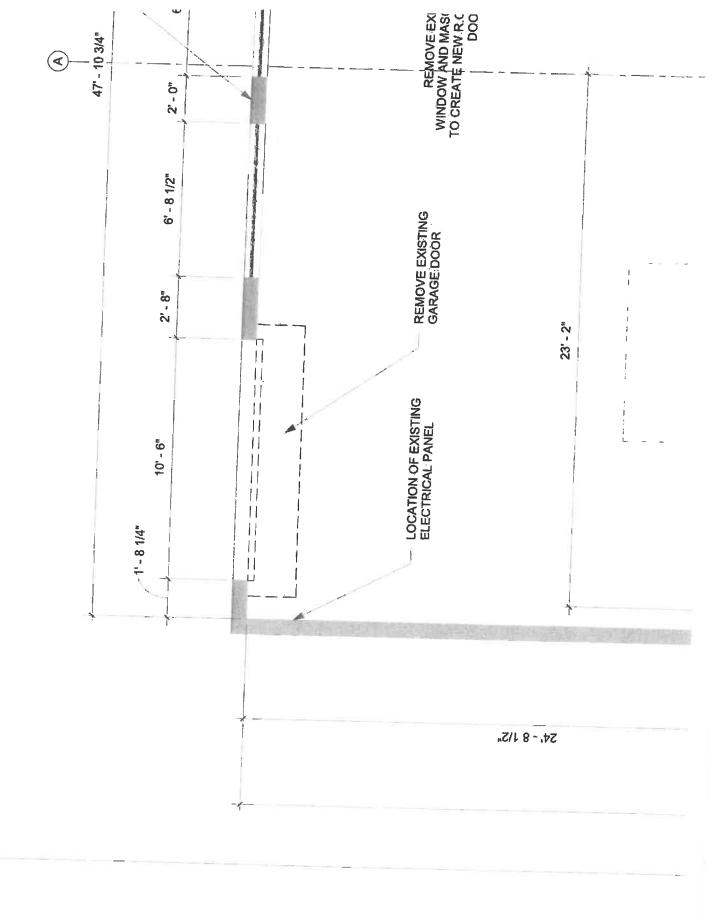
By: Laura Turner

its owner

Greenawalt Hospitality, LLC

by: Bobby T. Greenawalt

its President



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

**AREA:** 7,148.15 **ACRES: 0.16** 

SUBDIVISION INFORMATION:

NAME BIRMINGHAM BLOCKS

BLOCK: 447

LOT:

3017

3000

3010 3022 SRO AVES

OTHER: \$0.00

14

3029

3005

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:  Lounge Retail Liquor Class I						
Applicant:	VES attended NA m	neeting did not attend NA meeting    Line   Line				
Tate /Public 9 AL 35203; Cit	Safety; City of Birmi by Council Chambers	eturn this form to the of attention Latonya ngham; 710 North 20 <sup>th</sup> Street, Birmingham, s; 3 <sup>rd</sup> Floor) od meeting may result in a delay in the liquor				

06/24/2022 Brander Will email

### New Application: Restaurant Retail Liquor - Type 020

The following applicant had dance or pool table licens	es applied to the City of Birmingham for an alcohol,
Name of Applicant: Mailing Address:	Bar La Fete, LLC 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
	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	Beer On & Off Premise Wine On & Off Premise Special Petail Liquor (7 down on leas)
Division I Dance Permit (custo	
Pool Table Permit (send copy	•
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 Icoholic Beverag	for	
New Application  Transfer				
Transier	CESTAUKA	NT RETAIL LIQO	UR-TYPE 020	By: GS
		(Enter Type of Lice	nse Applied For)	(Revenue Official)
Name of Applicant (s)     Bar L	a Fete, LLC			
2 Name and address as in this task as a	(Indicate wh	nether Individual, F	Partnership, Corporation, LL	C. LI.P. etc)
Name and address of Individual applicant	r or an parmen	s and members if partn 1 separate sheet if	eishid or assoc., or all officers and	directors, if corporation
Social Security Number	(Actaci	Date of Birth	Present Residence	
Drivers License Number	Title	Place of Birth	Address	Length of Residence at
Name of Owner, Officer or Partner			/ waress	Place Named
ALDL#		CHIEF TO STATE OF STA		T MOC HOMEG
Victor Buchanan King	Member	E 11	2412 2nd Ave N Spt 28	5 years
VICEOF BUCHANATI KING	-	Franklin, TN	Birmingham, AL 35203	
ALDL#	Member	CONTRACTOR OF THE PARTY OF THE	F00 Daws DD	
Kristen Farmer Hall	I ICITIDE!	Dalton GA	508 Devon DR Homewood, AL 35209	1 year
			110/11eW0001, AL 33209	
Note: If a corporation, LLC or LLP give place	and date of i-			
Note: If a corporation, LLC or LLP, give place	and date of it	icorporation or issuance	e of certificate of authority to do bu	usiness in Alabama:
Foreign Corporation: certificate of Authors.  3. Trade Name Bar La Fete	ority Date:	(get copy of or	County: <u>Jeffers</u> iginal papers)	OII
4(a) Location 2212 Morris Ave St	e 201			
Exact Street Birmingham, Alabama Zip Code	Number, or <b>35203</b>	If on Highway, give of County ☑Jeffers	details as to Location Shelby	
(b) Length of time at this location				
(c) Mailing Address: 2018 Morris	Ave Unit 1/	A Birmingham, AL	35203	
(d) Business Phone	Fax:		Other Contact: (615)4	76-8094
5. Name, trade name and License num	ber of last o	r previous licensee:		
Trade name	Year	Туре	Taxpayer ID	
Owner of real estate for whice 1830 3rd Ave N Unit 301 Birmingham,	th license is d	esired 2208-2214 M	forris Avenue LLC	
		Address		
(b) Give a full description of the prer	nises for whic	ch a license is desire	d: New Construction   Fyisti	na Structure 🕅
Accompanie 57 I DIDIA DIDIA				
(c) Is establishment equipped with to	ables and cha	nirs? Yes 🛛 No 🗌	If "Yes", how many? 8TBS/1	BCHS
. Has a liquor, malt or brewed beverage If "Yes", explain fully	license for p	remises ever been d	enied, suspended or revoked?	☐ Yes   ☑No
(a) Pool Tables? Yes No 🖂 🕜				
(a) Pool Tables? Yes ☐ No ☒ Co (b) Video Games? Yes ☐ No ☒	DIN Operated?	Yes No 🛇	Standard Provider:	
(c) Vending Machines (Snacks/Sodas)?	Yes No I	Cinarettes or T	nent? Yes No 🛛	<b>⊠</b> •: •
<ul><li>(a) Will you allow dancing? Yes  No</li><li>(b) Independent Contract Employees (D</li></ul>	If "Yes isc Jockev. B	": Customer/Patron'	? Div I Exhibition/Performa	ance? Div II

		8

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 🔲
<b>(f)</b>	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
(1)*	For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date Ending Dec. 31,
(i)	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 (5) No (6)
(d) (e) (f) 12. List	How many paid-up members are there in the club?  Are regular meetings held? Yes No If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political Athletic Other  below the court records for law violations in the last ten (10) years, if any of each person interested in this application
D.U.I. a	the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except nd reckless driving. If no record, state "None".)
Name	Violation Charged Name of Court Date Disposition of Case
the only	t for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is person interested in the business for which said license is requested.  In the statements therein are true and correct, and that the applicant is person interested in the business for which said license is requested.
	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.

# tor Zoning Parposes 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 se	ections)		
Add a New Location or Tax Type to your currer	nt registration (Please on	malata C	odiena 3 S E 46 45 45
Change Business Ownership of your current rec	idention (Disease secolo	inpiete Si	ecuons 2 ,3, 5-10,12,13, and 14
Change the Mailing Address only for your	Jisu audii (Please comple	te all sec	tions)
Change the Mailing Address only for your current	nt registration (Please co	mplete S	Sections 2, 8-10, 12, 13 and 14)
Change the Location Address of your current re	gistration (Please comple	ete Sectio	ons 2, 3, 5-13, and 14)
LI Change in Corporate Officers, Members, or Part	ners (Please complete Se	ections 2.	. 5. 7-9. 11-13 and 14)
Provide a general "update" of your current regis	stration information (Plea	se comp	lete all sections)
Section 2 – LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the second Legal Name:  Bar La Fete, LLC	to which tax forms are to treet address of the business.	be sent: iness mu	st also be Indicated.)
Attention:			
Address: 2018 Morris Ave . U + 14 Dity: Birmingham State			
Area Code and Phone Number: (615)476-8094	AL Zip	Code:	<b>35</b> 203
Area Code and Fax Number:			
lame of Contact Person: Victor King			
-Mail:	Website Address		
	AACDDIDE MUDI 622	:	
ection 3 - TRADE NAME AND LOCATION ADDRESS			
ection 3 — TRADE NAME AND LOCATION ADDRESS lease see reverse side of this form. (Important Note: A lease select: Commercial Establishment rade Name (d/b/a): Bar La Fete ttention: ddress: 2212 Morris Ave Ste 201 ty: Birmingham State: AL rea Code and Phone Number of Business Location:		you are re	egistering more than one location, to zoning approval.) o Physical Birmingham Location 35203
lease select: Commercial Establishment  rade Name (d/b/a): Bar La Fete  ttention: ddress: 2212 Morris Ave Ste 201 ty: Birmingham State: AL rea Code and Phone Number of Business Location: rea Code and Fax Number of Business Location:	of office in Birmingham. If ili business locations are	you are re subject (	to zoning approval.)  o Physical Birmingham Location
lease select: Commercial Establishment  rade Name (d/b/a): Bar La Fete  ttention: ddress: 2212 Morris Ave Ste 201 ty: Birmingham State: AL rea Code and Phone Number of Business I ocation:	of office in Birmingham. If Il business locations are □Private Residence	you are re subject (	to zoning approval.)  o Physical Birmingham Location
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lease select: Commercial Establishment rade Name (d/b/a): Bar La Fete ttention: ddress: 2212 Morris Ave Ste 201 ty: Birmingham State: AL rea Code and Phone Number of Business Location: rea Code and Fax Number of Business Location: ame of Contact Person at Business Location:	of office in Birmingham. If III business locations are Private Residence  Website Address:	you are re subject (	to zoning approval.) o Physical Birmingham Location 35203
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lease select: Commercial Establishment  rade Name (d/b/a): Bar La Fete  ttention: ddress: 2212 Morris Ave Ste 201 ty: Birmingham State: AL rea Code and Phone Number of Business Location: rea Code and Fax Number of Business Location:	of office in Birmingham. If III business locations are Private Residence  Website Address:	you are re subject (	to zoning approval.) o Physical Birmingham Location 35203
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lease select: Commercial Establishment  rade Name (d/b/a): Bar La Fete  ttention: ddress: 2212 Morris Ave Ste 201  ty: Birmingham State: AL  rea Code and Phone Number of Business Location: rea Code and Fax Number of Business Location:	of office in Birmingham. If III business locations are Private Residence  Website Address:	you are re subject (	to zoning approval.) o Physical Birmingham Location 35203

	The state of the s
Section 5 - TYPE OF OWNERSHIP Please indicate the form of organization NOTE: Please and	
Tax Certificate Form" instruction sheet for a listing of supp	τ to the accompanying "General Information for Preparing an Application for blemental documentation to be included with this confication and Application for
☐ 1. Alabama Corporation (Incorporated in Alabama	
2. Partnership (two or more owners)	1. Foreign Corporation (Incorporated in another state
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 categ	
T 1 Manufacture	8. Home Occupation/Home Office (Please Specify the type of occupation or office)
1. Manufacturer	(Freeza specify the type of occupation or office)
2. Contractor (Please Specify)	9. State Certified, State Regulated, or State Licensed
☐ 3. Wholesaler	Occupations, (Please Specify)  10. Transient Vendors/Special Events:
4. Retailer	Date(s) of the Event
5. Other (Please Specify)	Event Location
6. Food/Eating Establishment	
7. Day Care Center	
business activity as well as the product or service. For exa Manufacturing / Product: Automobiles. Note: This inform Revenue Service on Schedule c of Form 1040 for Sole Prop Activity:	is for the largest percentage of gross income. State the broad field of simple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal referensi
ection 8 - FEDERAL TAX ID NUMBER / NUMBER OF	EMPLOYEES
and reserve Assistance (Manufer (REQUIRED) and	d the number of employees that will be working in Birmingham.
ederal ID Tax Number Number of	Employees in Birmingham (Required)
ection 9 – COMMENCEMENT OF BUSINESS ACTIVIT	
nter Date Business Activity Will Begin in Birmingham nter Date City of Birmingham Taxpayer ID Applied F	, Tear
ection 10 – Tax Liabilities Check the taxes for which  Sales Tax  TAX IDENTIFICATION AND TO THE CATTON AND THE CAT	
College Has Tour	RS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
Consumous May To	State of Alabama Sales Tax Number
Lanes Trus	State of Alabama Sellers Use Tax Number
Opening the second transfer of the second tra	State of Alabama Consumers Use Tax Number
Occupational Tax- Employers	State of Alabama Lease Tax Number
Lodgings Tax	
	State of Alabama Lodgings Tax Number
Mucinoss Lissans Tax	State of Alabama Linemployment 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

Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER  Name: Address of Residence: City: State Zip Code  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 of my knowledge and belief all questions answered are true, correct, and complete statements, made in good if I understand and agree that the granting of this license requires my compliance with all applicable of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said I of a solid also understand that disclosure of any false or misleading information will result in automatic denial of any license its application of the license if such has already been issued. I understant its fundamental for any person to commence or engage in any business, vocation, occupation, or in the revocation of the license if such has already been issued. I understant to this application, or in the revocation of the license if such has already been issued. I understant of the intense if such has already been issued. I understant of the intense if such has already been issued. I understant of the license if such has already been issued. I understant of the license if such has already been issued. I understant of the license if such has already been issued. I understant is unlawful for any person to commence or engage in any business, vocation, occupation, or profession after the expiration of a license previously issurably business, vocation, occupation, or profession at any location within the corporate limits of the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division) Signate:  Signature of Person Completing This Application  Phone Number of Person Completing Application	This information REQUIRED. (Attach add  NAME  King, Victor	TITLE Member	SOCIAL SECURITION LIMBER
Address of Residence:  City:  State  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 of my knowledge and belief all questions answered are true, correct, and complete statements, made in good of my knowledge and belief all questions answered are true, correct, and complete statements, made in good if understand and agree that the granting of this license requires my compliance with all applicable City of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said I ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application or any license in automatic denial of any license in automatic denial of any license in automatic denial of any license in a number of the license of such has already been issued. I understoned that it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, whotherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Continue in any business, vocation, occupation, or profession after the expiration of a license previously is 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 after the expiration of a license previously is 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 after the expiration of a license previously is suffluent approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division) in the composition of the Person Completing This Application  Signature of Person Completing This Application  Phone Number of Person Completing Appl	Hall, Kristen		45.0 3.77
Address of Residence:  City:  State  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 of my knowledge and belief all questions answered are true, correct, and complete statements, made in good of my knowledge and belief all questions answered are true, correct, and complete statements, made in good of my knowledge and belief all questions answered are by complete statements, made in good of my knowledge and belief all questions answered are by complete statements, made in good of my knowledge and belief all questions answered are by complete statements, made in good of my knowledge and belief all questions, and that any conditions set forth in any and all applicable of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said I ordinances, rules and regulations may result in the revocation of any failure or refusal to comply with said portionances, rules and regulations, or in the revocation of the license if such has already been issued. I understowate it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, who or otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax Combinue in any business, vocation, occupation, occupation, or profession after the expiration of a license previously is without obtaining a new license. I further understand that it is unlawful for any person to engage in or continue by business, vocation, occupation, or profession after the expiration of a license previously is suffluent approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division) in the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division)  Signature of Person Completing This Application  Phone Number of Person	Section 12 CORPORATE PERSON		
City: State 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 formy knowledge and belief all questions answered are true, correct, and complete statements, made in good of my knowledge and belief all questions answered are true, correct, and complete statements, made in good it 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 or dinances, rules and regulations may result in the revocation of any license issued pursuant to this application or any large or misleading information will result in automatic denial of any license in the summan of the complete in the revocation of the license if such has already been issued. I understoned the interest of the summan of the complete in the provision of the city of Birmingham Business License Tax Continue in any business, vocation, without first having procured a license therefore, and that it is unlawful for any person to complete in any business, vocation, occupation, or profession after the expiration of a license previously is inthout 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 after the expiration of a license previously is inthout 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 after the expiration of a license previously is find the city of Birmingham Department of Planning, Engineering, and Permits (Zoning Division) in the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division)  Signature of Person Completing This Application  Phone Num	name:	ENT OR LOCAL MANAGER	
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 of my knowledge and belief all questions answered are true, correct, and complete statements, made in good if understand and agree that the granting of this license requires my compliance with all applicable Cit of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said I oslice understand that disclosure of any false or misleading information will result in automatic denial of any license and regulations may result in the revocation of the license if such has already been issued. I underst hat it is unlawful for any person to commence or engage in any business, vocation, occupation or profession, without otherwise exempt therefrom under the provisions of the City of Birmingham Business License Tax C Ordinance No. 97-183), without first having procured a license therefore, and that it is unlawful for any person to engage in or continue in any business, vocation, occupation, or profession after the expiration of a license previously is inthout approval from the City of Birmingham Department of Planning, Engineering, and Permits (Zoning Division) igned:  **Algorithms**  **Alg	Cit		
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 of my knowledge and belief all questions answered are true, correct, and complete statements, made in good for my knowledge and belief all questions answered are true, correct, and complete statements, made in good for my knowledge and agree that the granting of this license requires my compliance with all applicable of Birmingham Tax Code provisions, and state laws, as well as with all conditions set forth in any and all applicable of Birmingham Laws, Ordinances, Rules and Regulations, and that any failure or refusal to comply with said I ordinances, rules and regulations may result in the revocation of any license issued pursuant to this application 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 of the City of Birmingham Business License Tax Continue in any business, vocation, occupation, or profession after the expiration of a license previously is 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 Department of Planning, Engineering, and Permits (Zoning Division) into the continue of the Person Completing This Application  Signature of Person Completing This Application  Phone Number of Person Completing Application		itate	Zip Code
Signature of Person Completing This Application  4/22/22  Signature of Person Completing This Application  Date  1. Clarke  This Application  Phone Number of Person Completing Application	Sirmingham Tax Code provisions and state	to laws as well as with all sounds	complete statements, made in good fait by compliance with all applicable City
Wichzel T. Clarke Print the Name of the Person Completing This Application  Phone Number of Person Completing Application	Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules a prdinances, rules and regulations may results ounderstand that disclosure of any falso understand that disclosure of any falso understand that disclosure of any falso understand that it is unlawful for any person to commend the otherwise exempt therefrom under Ordinance No. 97-183), without first having only in any business, vocation, occupitation or person to the provision of the	te laws, as well as with all condi- and Regulations, and that any is- sult in the revocation of any lio- lise or misleading information w- the revocation of the license if si- ence or engage in any business, the provisions of the City of- ing procured a license therefore pation, or profession after the funderstand that it is unlawful	recomplete statements, made in good faith of compliance with all applicable City of tions set forth in any and all applicable City of tions set forth in any and all applicable Citicallure or refusal to comply with said lawsense issued pursuant to this application. Ill result in automatic denial of any licens such has already been issued. I understand vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in
Michael T. Clarke Print the Name of the Person Completing This Application  Phone Number of Person Completing Application	Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules a cordinances, rules and regulations may resolve understand that disclosure of any fall assued pursuant to this application, or in that it is unlawful for any person to communot otherwise exempt therefrom under Ordinance No. 97-183), without first having ontinue in any business, vocation, occupithout obtaining a new license. I further ny business, vocation, or profithout approval from the City of Birmingham in the City of Birmin	te laws, as well as with all condi- and Regulations, and that any is- sult in the revocation of any lio- lise or misleading information w- the revocation of the license if si- ence or engage in any business, the provisions of the City of- ing procured a license therefore pation, or profession after the funderstand that it is unlawful	recomplete statements, made in good faith of compliance with all applicable City of tions set forth in any and all applicable City of tions set forth in any and all applicable Citicallure or refusal to comply with said lawsense issued pursuant to this application. Ill result in automatic denial of any licens such has already been issued. I understand vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in
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DV OFFICE MODE ON W	Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules a prdinances, rules and regulations may results outlets and regulations may results outlets and the disclosure of any fall assued pursuant to this application, or in the that it is unlawful for any person to common ot otherwise exempt therefrom under Ordinance No. 97-183), without first havion on the in any business, vocation, occupithout obtaining a new license. I further my business, vocation, occupation, or profit thout approval from the City of Birmingham igned:  Signature of Person Completing This Application.	te laws, as well as with all condi- te laws, as well as with all condi- and Regulations, and that any it sult in the revocation of any lice lise or misleading information we he revocation of the license if si ence or engage in any business, the provisions of the City of ing procured a license therefore pation, or profession after the understand that it is unlawful ression at any location within the am Department of Planning, Engage attorn	recomplete statements, made in good faith y compliance with all applicable City tions set forth in any and all applicable City tions set forth in any and all applicable Citaliure or refusal to comply with said law ense issued pursuant to this application. Ill result in automatic denial of any licensuch has already been issued. I understant vocation, occupation or profession, who Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issue for any person to engage in or continue is corporate limits of the City of Birmingham inneering, and Permits (Zoning Division).  Date
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Please select: Commercial Establis  Trade Name (d/b/a):  Attention:		Private Residence	No Physical Birmingham Loc
Address:			
City: Area Code and Phone Number of Busine	State:		Zip:
Area Code and Fax Number of Business	Location		
lame of Contact Person at Business Lo	cation:		
-Mail:		Website Address:	
ITY OFFICE USE ONLY - Location			
ZONING APPROVAL AND COMMENTS:	ETC OF	R NAICS	
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ME OCCUPATION CERTIFICATE EXECUTE	OTHER	REQUIRED PERMIT	
YES NO NOT APPLICABLE	ARTICL	ES OF INCORPORATION	
	CERTIF	TICATE OF AUTHORITY	
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ade Name and Location Address of offic tion. Attach additional sheets if necessary. cation			ore than one location, please use this ons are subject to zoning approva
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#### Bar La Fete

Owners - Victor King and Kristen Hall

Victor King

Born I **Franklin TN** 

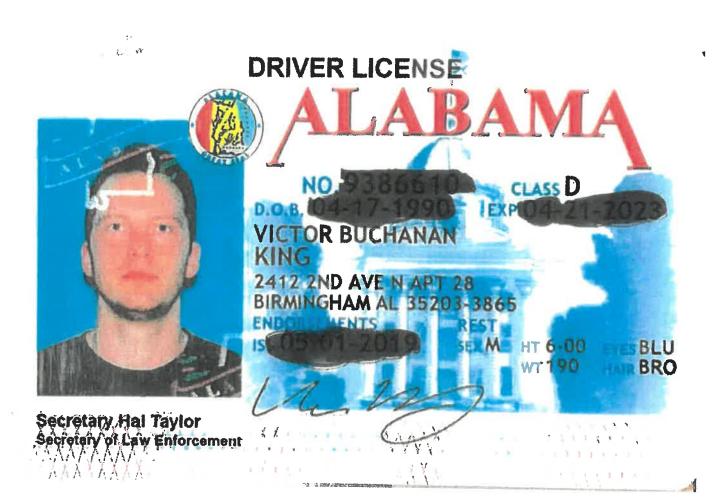
SSN 🚟

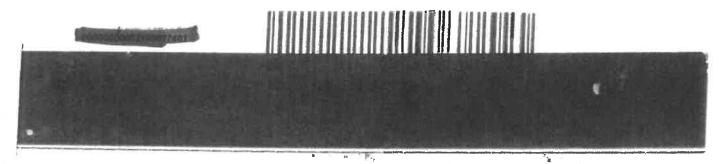
Lives at 2412 2nd Ave. North Apt 28 Birmingham AL 35203 for 5 years

Kristen Hall

Born Dalton GA SSN 2

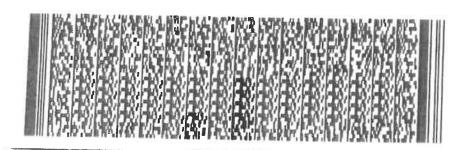
Lives at 508 Devon Drive, Homewood AL 35209 for 1 year



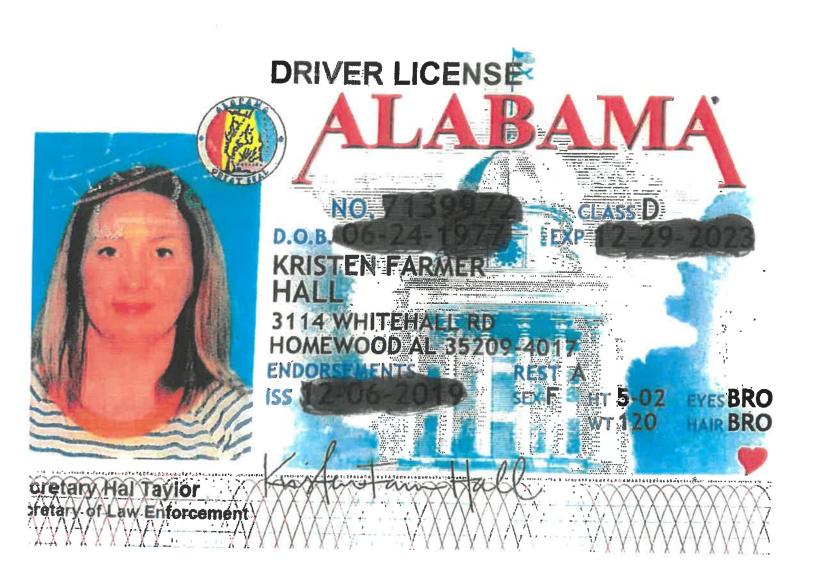


VICTOR BUCHANAN KING CLASS: D-Regular Operators License

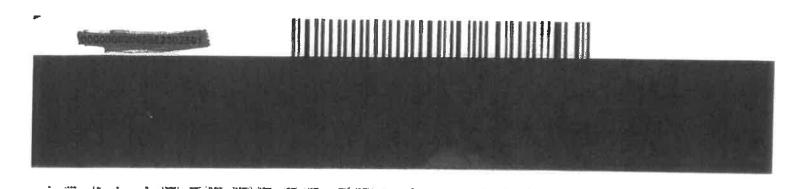
ENDORSEMENTS: RESTRICTIONS:



Rev 11-01-2014



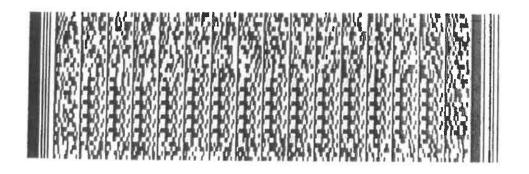




KRISTEN FARMER HALL CLASS: D-Regular Operators License

**ENDORSEMENTS:** 

**RESTRICTIONS:** A-Corrective Lenses





#### LEASE AGREEMENT

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

	<u>w</u>	IINESSETH:
l. <u>Certa</u> meanings hereinafter a	in Definitions . Fo ascribed thereto:	or purposes of this Lease, the following terms shall have the
(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):	Kristin Hall and Victor King
(f)	Guarantor Address(es):	2018 Moses Ave 35203
(g)	Building Address:	2212 Morris Avenue Birmingham, Alabama
(h)	Premises Number:	Suite 201
(i)	Rentable Floor Area of I	Demised Premises: 2,927 rentable square feet.
<b>(j)</b>	Rentable Floor Area of E	Building: 2,655 rentable square feet.
(k)	Commencement Date:	Lease Commencement shall begin upon completion of Landlord's Work.
(1)	the final	od commencing on the Commencement Date and expiring on day of the month in which the 120th month anniversary of the or 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.

Rar	La Fete, LLC	
	FORM WAS PREPARED BY:	
	ond Row Law, LLC	
3. THE N IN ALAB/	AME AND STREET (NO PO BOXES) ADDRESS OF THE REGISTERED AGENT LOCATED AMA):	AT THE REGISTERED OFFICE (MUST BE LOCATED
2018 Birm	or King 3 Morris Avenue, Unit 1A ingham, AL 35203 FERSON	
AAILING	ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFERENT FROM STREET ADD	RESS):
THE UN	IDERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEMBER OF THE LIMITED LIAB	ILITY COMPANY.
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	(FOR SOS OFFICE USE ONLY)
	SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11	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 EF	FECTIVE 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	Michael Clarke Organizer				
DATE	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

J. W. Muill

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: BIRMIGHAM 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

**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

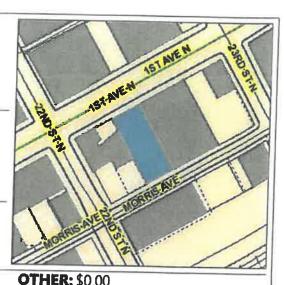
RISE Focus Area: In RISE Focus Area

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 Bosses Private Lounge LLC Name **Business Name Bosses Private Lounge** Business Address 201 Richard Arrington JR Blvd S Type of License/Permit Applying For: Lounge Retail Liquor Class I Lounge Retail Liquor Class II (Package Store Club Liquor Class I Club Liquor Class II (Private) Beer Off Premise Beer On & Off Premise Wine Off Premise Wine On & Off Premise Restaurant Retail Liquor Special Retail License (over 30 days) Special Retail License (under 30 days) **Pool Table Permit** Division I Dance Permit (customers) Division II Dance Permit The FIVE POINTS SAMTH Neighborhood Association met on MAY 17, warfind 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 O DENM -Applicant: attended NA meeting did not attend NA meeting YIE'S SHE DID AND MADE AN EXCELLENT PRESENTATED ABOUT HER SECURITY PLANS AND PARKING MITIGATION. President/Officer

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

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

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

The following applicant h dance or pool table licens	as applied to the City of se:	of Birmingham for an alcohol,
Name of Applicant: Bosse	s Private Lounge LLC	
Mailing Address: 6605 Ter Fairfield,	nsaw CT AL 35064	
Trade Name: Bosses Privat	te Lounge	
Location Address: 201 Rich	nard 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 d ☐ Division I Dance Permit (custon ☐ Pool Table Permit (send copy of	Beer On a Wine On Special Relays) Special Relays) Division II	Retail Liquor Class II (Package Store) or Class II (Private) & Off Premise & Off Premise etail Liquor (7 days or less) etail Liquor (under 30 days)  Dance Permit (entertainers)
Kitchen equipped: yes ☐ no ⊠		le and chairs 5TBS/67CHS
Date Applied: 6/17/2022 Revenue Examiner: GS	Copy: Fire I Health Departm	Prevention ent Development irmingham pool tables)

#### City of Birmingham Application for Alcoholic Beverage License **New Application** $\boxtimes$ Transfer CLUB LIQ CLASS II TYPE 032(PRIVATE) By: GS (Enter Type of License Applied For) (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 Date of Birth Drivers License Number Present Residence Title Length of Name of Owner, Officer or Partner Place of Birth Address Residence at Place Named ALDL# Member Angela Maria Gooden 6605 Tensaw CT 5 years Birmingham, AL Fairfield, AL 35064 Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama: 837-083 Page: <u>1 of 3</u> Date: Foreign Corporation: certificate of Authority Date: 02/24/2021 County: Jefferson (get copy of original papers) 3. Trade Name Bosses Private Lounge

<b>X</b>
No
1
3

10 (a)	Are these premises kitchen equipped? Yes □ No ☒ Not Applicable □
(b)	
(c)	
(d)	If not kitchen equipped, is any type of food served? Yes No I If "Yes", explain Catered
(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 ☒
<b>(</b> g)	Seating Capacity:
(h)	For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date Ending Date
<b>(i)</b>	For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date Ending Dec. 31,
<b>(</b> j)	For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting Ending
11 (a) (b)	2) Multi-Vendor Sponsorship?  (3) Street Closing Required (4) Park Board Permission  Yes No
(d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	Are regular meetings held? Yes \[ \] No \[ \] If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social \[ \] Patriotic \[ \] Political \[ \] Athletic \[ \] Other \[ \]  elow the court records for law violations in the last ten (10) years, if any, of each person interested in this application, the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except reckless driving. If no record, state "None".)
Name -	Violation Charged Name of Court Date Disposition of Case
Sworn and	or the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has polication and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is requested.  Subscribed before me this
	ation will not be processed until all fees due at the time of application are paid and receipts are on file.

# for Zoning Yurposes Opply! Club Lig Class II Type 032 (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	continual.	
Add a New Location or Tax Tyre to warm to	sections)	
Add a New Location or Tax Type to your curre	ent registration (Please co	mplete Sections 2 ,3, 5-10,12,13, and 14
Change Business Ownership of your current re	gistration (Please comple	te all sections)
Change the Mailing Address only for your curre	ent registration (Please co	mplete Sections 2, 8-10, 12, 13 and 14)
and your current n	egistration (Piease comple	te Sections 2 2 E 12 and 143
and Change in Corporate Officers, Members, or Par	tners (Please complete Se	ections 2 5 7-9 11-12 and 143
Provide a general "update" of your current regi	stration information (Plea	Se complete all sections
	( )	so complete di secdolis)
Section 2 - LEGAL NAME AND MAILING ADDRESS (Note: If mailing address is a neet office building	to which tay forms are to	ho contr
(Note: If mailing address is a post office box, the	street address of the busi	ness must also be indicated.)
Full Legal Name: Bosses Private Lounge LLC		,
Attention:		
Address: 6605 Tensaw CT City: Fairfield State		
Area Code and Phone Number: (205)409-1453	AL Zip	Code: 35064
Area Code and Fax Number: (205)409-1453		
Name of Contact Person: Angela Gooden		
E-Mail: Angelagooden38@gmail.com	Website Address	
	TTCDSICE AUGI ESS.	
Section 3 — TRADE NAME AND LOCATION ADDRESS please see reverse side of this form. (Important Note: A Please select: Commercial Establishment  Trade Name (d/b/a): Bosses Private Lounge	All business locations are	you are registering more than one location, subject to zoning approval.)  No Physical Birmingham Location
ddress: 201 Richard Arrington Jr Blvd S		
ity: Birmingham State: Al		Zip: 35233
rea Code and Phone Number of Business Location:		-ip: 33233
rea Code and Fax Number of Business Location: ame of Contact Person at Business Location:		
-Mail:	Website Address:	
ection 4 – CHANGE OF OWNERSHIP resulting from r f applicable, this section MUST be completed.	nerger, purchase or acqui	sition of an existing business.
and the second s		•
ormer Owner:		
ade Name (d/b/a)		
niling Address of Former Owner		
dress (es) of Former Location(s)		
idress (es) of Former Location(s) ea Code and Phone Number of Former Owner:		

Please indicate the f	E OF OWNERSHIP form of organization. NOTE: Please refer rm? instruction sheet for a listing of suppl	to the accompanying emental documentati	"General Information : on to be included with thi	for Preparing an Application for spolication.
🗖 1. Alabama C	orporation (Incorporated in Alabama			n (Incorporated in another state
	(two or more owners)		2. 1 oreign Corporatio	ii (incorporated in another state
3. Sole Propri				
4. Unincorpor	rated Association (i.e., PA)			
☐ 5. Other				
6. Limited Lia	ability Partnership (LLP)			
	bility Company (LLC)			
Section 6 — TYPE Please indicate the	OF BUSINESS e principal business activity catego	ory.		
1. Manufactu		8. Home	Occupation/Home Or pecify the type of occupation or	ffice raffice)
2. Contractor	(Please Specify)	☐ 9. State (	Certified, State Regul	ated, or State Licensed
3. Wholesaler	•	Occupa	tions, (Please Specifient Vendors/Special	V)
4. Retailer		Date(s	s) of the Event	events;
LI I I I I I I I I I I I I I I I I I I		Event	Location	
V E Other (8)	Private			
5. Other (Plea				
☐ 6. Food/Eating	g Establishment			
7. Day Care C				
Section 7 – PRINCI You should indicate the pusiness activity as we Manufacturing / Produce Revenue Service on Service	PAL BUSINESS ACTIVITY AND PR ne one business activity that accounts ell as the product or service. For exar uct: Automobiles. Note: This informa chedule c of Form 1040 for Sole Propr	for the largest perc nple-Activity: Who	centage of gross income lesale Sales / Product: same information as re	e. State the broad field of Pharmaceuticals OR Activity: quired by the Internal
Section 7 – PRINCI You should indicate the pushings activity as we wanted	PAL BUSINESS ACTIVITY AND PR ne one business activity that accounts ell as the product or service. For exar uct: Automobiles. Note: This informa chedule c of Form 1040 for Sole Propr	for the largest perc nple-Activity: Who	centage of gross income lesale Sales / Product: same information as re Alcohol/Pool/Hooka	Pharmaceuticals OR Activity: quired by the Internal
Section 7 – PRINCI You should indicate the pusiness activity as we wanted the service on Section 8 – FEDERA	PAL BUSINESS ACTIVITY AND PR ne one business activity that accounts ell as the product or service. For exar uct: Automobiles. Note: This informa chedule c of Form 1040 for Sole Propr ounge/Bar  L TAX ID NUMBER / NUMBER OF fification Number (REQUIRED) and	for the largest percipited and the largest perci	Alcohol/Pool/Hooka	Pharmaceuticals OR Activity: quired by the Internal
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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.

AF	PLICATION FOR TAX	CERTIFICATE	CHILDONY		
12		CERTIFICATE	CILYOFF	3IRMINGHAM	ALARAMAY

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 lodgings taxes. Each separate business location requires a

Section 11 – OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS
This information RECULIDED (Attack and Missell and Mi

NAME Gooden, Angela	TITLE Member	SOCIAL SECURITY NUMBER
Section 12 - CORPORATE RESIDENT AGE Name:	ENT OR LOCAL MANAGER	
Address of Residence:		
City: St Area Code and Phone Number of Residence	tate	Zip Code
I understand and agree that the granti- Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules and ordinances, rules and regulations may resi- also understand that disclosure of any fals issued pursuant to this application, or in the that it is unlawful for any person to commen not otherwise exempt therefrom under to Ordinance No. 97-183), without first having continue in any business, vocation, occup- vithout obtaining a new license. I further	ing of this license requires ne laws, as well as with all condi- nd Regulations, and that any fult in the revocation of any lice se or misleading information we he revocation of the license if si ence or engage in any business, the provisions of the City of high procured a license therefore pation, or profession after the understand that it is unlawful in	orized to complete this form and to the best of complete statements, made in good faith, my compliance with all applicable City of itions set forth in any and all applicable City failure or refusal to comply with said laws, ense issued pursuant to this application. I will result in automatic denial of any license uch has already been issued. I understand, vocation, occupation or profession, who is Birmingham Business License Tax Code e, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in a corporate limits of the City of Birmingham pineering, and Permits (Zoning Division).
Signature of Person Completing This Applica	H 18	AODQ.
Print the Name of the Person Completing This Ap	oplication Phone Number	MSG-1886 of Person Completing Application
TY OFFICE USE ONLY - Location		
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Neighborhood Response Form - (if the APPLICANT attends the NA meeting)
RE: ZBA2022-00027 BOSSES PRIVATE LOWNER
Date: MAY 26,2022 FILLED OUT.
To: Angelica Moton, Room 210, 2nd Floor City Hall (205) 279-8917, FAX: (205)254-2111  Angelica.moton@birminghamal.gov
From: FINE POINTS SWITH N.A. President, Vice President, Secretary (Please indicate the Officer who chaired the meeting when this request was heard)
On MAM 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 DIM
The decision of the Neighborhood Association was to (circle one support) not support) the request for the following reasons:  THE APPLICANT DO HER HOMEWORK TO SECURE PARKING
ARRANGEMENTS FOR HON FITHERE 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:    Charles   Personal Person
Next the state of the last meeting when the case was presented should sign above)
Fixe Points South: Neighborhood Association meets or de Tuesday, of each month at 6:00 PM; in the Social Fixed to the Flighborhood Englishment of the PM; in the Social Fixed to the Flighborhood President at 205-914-3286 and into a common the second common at 255-200.



BIRMINGHAM PARKING AUTHORITY
1732 5"Avenue North

Birmingham, AL 35203

André R. Davis Chief Executive Officer

Kevin L. Owens Chairman

Heager L. Hill Vice Chairman

Dora Sims Secretary/Treasurer

April 22, 2022

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

Bosses Private Lounge Attn: Angela Gooden 201 Richard Arrington Jr. Bivd 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
  - o 7-days per week
  - o 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 Mangelagooden38@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**

Date:4/18/22

Office of the Mayor City of Birmingham Birmingham, Alabama

Your petitioner, Angela Gooden				
(Name)				
(D.O.B); respectfully represents that he is a resident Citizen of 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 (Number) slot or coin-operated pool table(s) or (Number)				
Bosses Private Lounge				
(Name of Business) ; 201 Richard Arrington Jr Blvd S (Location Address)				
409-1453 in the City of Birmingham; wherefore your petitioner				
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 <u>Code of Alabama 1975</u>, 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 <a href="https://www.sos.alabama.gov">www.sos.alabama.gov</a> 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 amendmen	t was adopted on 04 / 12 / 2022 (MM/DD/YYYY):
See attached.	
Special Street, September 1997 and 1997	
Allaction of the state of the s	
artifologist (1) agents to agent agent (2)	
Additional Amendm	ents and the dates on which they were adopted are attached.
Secretary of State must be a *Registered agents and registered Office By Entity form direct	at must be changed if you are amending existing information. a name change, a copy of the Name Reservation Certificate issued by the Office of attached.  Stered agent addresses are changed by filing a Change Of Registered Agent Or Registered ly with the Office of the Secretary of State (the new agent's signature is required agreeing to the information will NOT be changed with an amendment.
5. The undersigned authorized required by Title 10A of the	signature certifies that the amendment or amendments have been approved in the manner Code of Alabama of 1975 and the governing documents of this entity.
04 / 12 / 2022	ANGELA GOODEN
Date (MM/DD/YYYY)	Signature as required by 10A-5A-2.04
	OWNER
1	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

X 2. Merrill

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

X. W. Merill

John H. Merrill

**Secretary of State** 

1. THE N	AME OF THE LIMITED LIABILITY COMPANY		
	ses Private Lounge LLC ORM WAS PREPARED BY:		
ANG	ELA M GOODEN		
3. THE NA IN ALABA	ME AND STREET (NO PO BOXES) ADDRESS OF THE REGISTERED AGENT LOCATED AT MA):	THE REGISTERED OFFICE (MU	JST BE LOCATED
1179 Birmi	la Gooden 16th Ave west ngham, AL 35204 ERSON		
6605 Fairfi	ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFERENT FROM STREET ADDRES Tensaw Court eld, AL 35064 ERSON	S):	
	DERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEMBER OF THE LIMITED LIABILIT	Y COMPANY.	
. 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	(FOR SOS OFFICE USE	ONLY)
	SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11	WITH TITLE 10A, CHAPTER 5A, ARTICLE 11 Alabama Sec. Of State	
		837-083	DLL
		County \$100	9:00 0.00
		Total \$200	0.00

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	ANGELA GOODEN OWNER				
	DATE	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 26 day of April 20 22	between and among	the following:
NAME OF LANDLORD: JACK SMITH REAL ESTATE LLC whose address is: 201 RICHARD ARRINGTON JR (hereinafter called "Landlord"),	s:	_,
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:BOSSES 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 receipt and sufficiency of which are hereby acknowledged, the parties hereto hereby agree as follows:	ther good and valuable	consideration, the
1. LEASED PREMISES.		
(a) <u>Description</u> Landlord does hereby demise and let unto Tenant the following de	escribed premises locate of Alabama, to wit:	ted in the City of
DESCRIPTION OF THE LEASED PREMISES:3,715 square feet located in the middle suit Birmingham, AL 35233	e of 201 Richard Arr	ngton Jr. Blvd S,
existing easements, if any, and the regulatory laws and ordinances of the political subdivision in white Leased Premises is described in Exhibit A.	(the "Leased Premise th the Leased Premise	es") subject to all es is situated. The
(b) Use. The Leased Premises shall be used by Tenant as a loun owners and professionals and for no other or different use or purpose. Tenant shall not use of the Leased Premises to be used or occupied, in violation of any ordinance, law or regulation of any gow would vitiate or increase the premium charged for insurance on the Leased Premises or the building in shall not allow smoking.	emmental hady or in	remises, or permit
TERM. The Term of this Lease is forThirty Six (36) Months	he _Thirtieth (30 <sup>th</sup> )_ ovided for herein.	beginning on the day of
The Birmingham Association of Realtors® is not engaged in rendering legal, accounting or other professional service. The professionals		
and an explanation of its various provisions should be obtained from the appropriate professional. Because competent legal or other advice should be secured before using any form,	of varying state and local	laws,

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Commercial Lease - Page 1 of 9

#### **Amendment Details**

Entity Info-

**Current Entity Name** 

Bosses Private Lounge LLC

Type

Limited Liability Company (LLC)

**Entity ID** 

000-837-083

**Formation Date** 

2021-02-24

Principal Address

**Original** 

Amended

**Physical Address** 

i ilybicul Additess

Physical Address

201 RICHARD ARRINGTON JR. BLVD S.

BIRMINGHAM, AL 35233

**Mailing Address** 

Mailing Address

201 RICHARD ARRINGTON JR BLVD S.

BIRMINGHAM, AL 35233

5

# BOSSES PRIVATE LOUNGE, LLC



205-756-1886 Mangelagooden38@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

Augela Gooden

# 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.
  - o 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

# BOSSES 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
  - o Overcrowding or over occupancy
  - o Any extension cords or exposed wiring
  - o Patrons gathering to closely to exit routes
  - o No emergency lighting

o 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 onduty 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 BOSSES PRIVATE LOUNGE/CLUB

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### 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 fce 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

# BOSSES 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 Jones7130 hwy 253Guin, AL 35563

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

39. Dejordoran 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

# POSSES PREMARE LOXINGE

# 

Cassandra Wright	20 Shellerwood Cir. Pinton AL 35/2-6
Jimmy Payne	1440 Tuscaloosa Are Bhom AL 35211
* Mary Sharp	35 Ansley Rd. Josper AL 35504
Donald Jelks	915 Hickory Knoll Bham, AL 35206
- Byran Mosley	1113 Popple Crack PKW4 BhAn AL 35214
Gary Arm Strong	140 South hun Cir. Bhan AL 35244
Grancos Williams	1203 Summer Thase Dr. Bham AL 35244
Bianca Patrick	706 2nd Ave No. Bess. 46 35000
OPhelia Daniels	,5350 Kon Souly Dr. Collondale AL35453
Sandra Macon	1644 64 PL NW Bhom AL 35215
Skypn Eubanks	308 Martin DR. Bham AL 35215
12. DeCorivoe Males	282   Sydney Dr. +106 Bham AL35211
Jessica Rapley	4004 St. John Lay, Bham AL 35215
lanishu Johnson	2471 Chestnut Ridge Bham AL 35214
Transha Morrow	7228 Division Ave. Bhom AL 35206
: Amanda Ware	9821 Greenles 2d Bhum AL 35215
Angelique Riags	2421 74 DL. NE Bham A 3525
Sade Watts	1515 319+ St. No. Bham AL35234
Yasan'an Watts Dillard	
Michael Craig	5621 HWY 69 S. 41931 TUS Calasse AL 35405
Comeron Thomas	2511 Wildrenad Crossins Bham AL 35211
Daniel Reid	1311 Carrouse C++B Bham AL 35216
Deric Jackson	40 20th Ave So. Bham AL 35205
3. Brenda McKinney	760 Gene Reed Rd Bham, Al 35235
Jeremu McCrarti	300 Elm St. Leets AL 36094
Salving I rolling 9	

Eric Kimble	1619 1st St. So. Bham 35205
Tesha Johnson	7738 4 Are So 8 Bham 35306
Michelle, Pettural	400. 40t. John in Bham 3505
Reginald Dunning	4000 54. John Un Bram 25015
Matinda Fowler	514 Newton Dive NdRid 25028
Johnathia Gooden	1808 The Ave N. deeld 35338
Palricia niggs	1720 whist, NW Bham AL 35215
David Brown	3036 Apole Valley L.N. Bham 35215
Murin White	13108 Hillard Trace Bham 35005
Rebekah Nordine	1406 Wild Forest DR. Bham 35009
hiara Evans	108 Dugan Ave #E Bham AL35814
Talanisha Moorer	18706 19th Ave 16, Board AL 35234
Shwataing Lester	4201 Bessemer Rd 35020 Bhom AL
Carl Lester	4201 Bessemer Rd Bham AL 35020
Pernerthia Gamble	1128 Aurora Cir. Bhom At 35215
Genald Jones	
Artelvion Collier	1528 N. Bossemer 35020
	1129 Devine Dr. Bhom AL 35214
William Pennell III	50 Vandrbilt Street to Cham 3500
Antonya Jones	1866 Goth P. Fairfield Al. 35064
Candice Patton	3036 Apple Valley LV Bhom AL 352/5
Malika Chuker	Action and Dilling to the action
Malika Fluker	2542 32rd St. 16 Madhart AL 35476
Danny Battle	1713 32nd Pl. Not C Bham AL 35204
Danick Adams	1834 Halson He Bhom AL 85201
Emma Rodgers	4859 Hutson Ave Bhom, AL 35207 S0985th Street South Bhom, AL 35206
Nyethy Nurwood	100 Huntley We #1004 Pelham AL
<b>y</b>	35124

2	0.00
Demetrius Kabinson	3306 Ridge Manor Dr. Bham AL 35246
Donna Simpson	1721 181 Pl. So. Bham AL 35205
Jacob Jones	7130 HWYSBO GUIN AL 35563
Markia Lewis	7130 Huy BO GUIN AL 35563 704 Clover Prive Bhom AL 35214
Kevin Poe	740 Clover Drive BhamAL 35014
Christopher Davis	35 Ansley St. Josper AL 3550
Charles King	
Tiffany Cambell	Corrigger Luke PKWy Bham A 3525
Jennier Wilson	2027 Center way 80. Bhom AL 35206
Machew Brown	535 Fullande AL 3
Mathew Brown	535 Fulton Brook Dr. Fultontile: AL 35068
Amber Tucker	153 Sterling Cr. NW#D Bham AL 35215
Joshua Smith	5/ Standifer Dr. Odenville Al. 35/30
Ed Rodoers	1241 Seattle St. Bham 41 35204
La Kashia Binyo	1440 iuscaloosa Ave Bham AL 350
Shawn Hightourer	1789 Steiner Ave Bram A 35211
Roderick Parker	4720 404 Pl. No. Brian, AL 35217
Tynetta Byrd	518 Villa Sola IN Bhan AL 35214
Andrea Payne	1423 32nd St. No. Bham AL 35234
Shavan's Calloway	1907 Portage Ave Bham AL 35234
William Sharp	KNE A 11 AL IL I 2 CANI
Jeremy McCrary	3065 Bella Ct Moody AC 35004
Sharese Tall	300 EIN St. LOEAS AL 35094
	478 Jolg Ave S. Bham At 35205
<u>Devin Callins</u>	blo3a Ave No Sham AL 35228
Joshua Moferrin	7508 1944 St. Huerfown AL 35083
Telvia Collins	6632 Ave No. Bham, AL 35228
Vonguette Thomas	3184 454 Ave No. Bham, AL 35207
	- land broad, and

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Resalind Harding	1508 Alabama Ave Bhom AL 35211
Ngamon Rigas	31/3 Caraise Ct #A Bhom AL 35216
Anya Mc Queen	1229 File Mile Kd. Bham al 3516
Intonio Lawson	8001 St Aves. Brum AL 35200
Lauthorine Maore	1909 30th Ave. No. Birpon AL 35,000
Terryauna Mantey	3300 Conterway So. Bham A. 35005
Venida Manning	1508 Archor Shares Dr. Ahman 12. 35211
Jacoria Manning	150% Archor Shores Dr. Bham AL 35211
TeErykah Kimble	7306 Division Ale Bhom AL 35006
Nikita Buford	2320 Centerus y So. Phan AL 3526
lerry Mankey	2320 Centerry So. Bhamfl 35200
Natisha Reasor	806 Jubilee - Cir Pell City AL 35215
Nekeya Williams	5229 WILL PLANT 100
	15339 Willow Ridge W. Pinson At 35126
Dejaradan Skason	1859 Hulson Ave. Bham, 46 35207
Joe Veronica She phen	1121 13h St. SW#-10 Cham AL 35211
MeShanla Mules	7160 24th Ave N.W. 4C BhamAL 35015
Marcia Payme	3109 Chase W. Bham 4 35215.
Nakia Sanders	740 Clover Dr. Bham, AL 35214
Michael Lews	7715 and C. No #B Birmincham AL 35206
Zaria Probinson	1423 320 81. No. Sham, 41.35234
Carline Bermude 2	2612 154 St. No. Bham, AL 35204
Tracy Kirkman	4 7 AC 1 De Dieser AL BUSINE
	467 Aliamont Dr. Pleasant Gr. 19th 35127
Rosemary Allen	2128 Emerald Pointe Dr. Phonn of 35516
amber Maxwall	2850 Venice Rd. SW #280 Champer 35211
Sakemah AkraM	1829 794 Pl. So. Bham AL 35 206

## 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 (projected):	overhead	\$6,500.00
(projected):		\$400,000.00
Gross profit for first year of business (project	red);	\$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

BOSSES 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.

(IRS USE ONLY) 575G

02-24-2021 BOSS O 999999999 SS-4

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

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

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 02-24-2021 EMPLOYER IDENTIFICATION NUMBER: 86-2259770

FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 BOSSES PRIVATE LOUNGE LLC ANGELA M GOODEN SOLE MBR 1179 16TH AVE W BIRMINGHAM, AL 35204

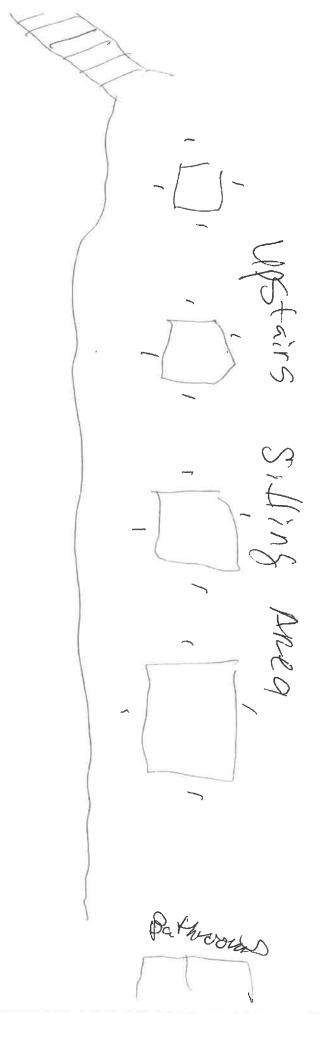
Brancos. 47V Loungers Bar 3 Enter Decurity Box 1 Liurgers Salund TAD

Counger

Dance Speed

ROOM 1

Louige



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 AREA: 13,900.16 **ACRES: 0.32** 

SUBDIVISION INFORMATION:

NAME BIRMINGHAM BLOCKS

**BLOCK: 137 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

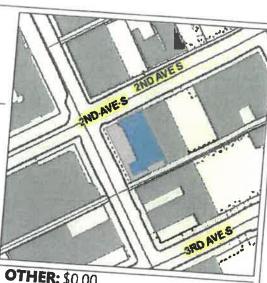
RISE Focus Area: In RISE Focus Area

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 if arcel mapping and description information is obtained from the Jerrerson 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.



88

**OTHER: \$0.00** 

LOT:

SENT To: CC latonya tate @ birminglam al. gor birminglam al. gor brandon, mc cray @ birminglam al gor gregory. Stanley @ birminglamal gregory. Stanley @ birmi

Date:6/15/22	
Application Type: New — Re	estaurant Retail Liquor
Subject: Applicant's Entit Name	y RJ Five Points West LLC
Business Name Business Addres	
Type of License/Permit App Lounge Retail Liquor Class I Club Liquor Class I Beer Off Premise Wine Off Premise Restaurant Retail Liquor Special Retail License (under 30 di	Lounge Retail Liquor Class II (Package Store Club Liquor Class II (Private) Beer On & Off Premise Wine On & Off Premise Special Retail License (over 30 days) Pool Table Permit
The FIVE POINTS SOUTH voted about the above-named lice regarding the granting of this licen	Division II Dance Permit  Neighborhood Association met on JUNE 21, and and association. The concerns of the Neighborhood asse are indicated as follows: (Please check one)  Dose Support Description
Reason for Opposition WAS TO HAVE NEW BOY LOCATION	NOT OPPOSED. NETGHBONS PLEASED
Applicant: attended NA	meeting did not attend NA meeting
AL 35203; City Council Chambe	President/Officer  SHELLA MEHAPEN  return this form to the of attention Latonya  ningham: 710 North 20th Chroat Diversity Dive

11:03 205-586-5560 La Sardra 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 20 <sup>th</sup> St S Birmingham, AL 35205				
Trade Name: Crab Bar	rack			
Location Address: 1108	20th St S			
Contact Number:	(205)586-5560	Contact Person: LaSandra Hall		
⊠ N	ew Application	Transfer		
Type of License				
Lounge Retail Liquor Class Club Liquor Class I (Frate) Beer Off Premise Wine Off Premise Restaurant Retail Liquor Special Retail Liquor (over	rnal)	nge Retail Liquor Class II (Package Store) Liquor Class II (Private) On & Off Premise On & Off Premise Ial Retail Liquor (7 days or less) Ial 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 🛭 n	o 🗌 Number	of table and chairs 40TBS/160CHS		
Date Applied: 6/15/22	Health De Commun	Fire Prevention partment ity Development New Birmingham		
Revenue Examiner: GS	Melanie Ge	Melanie Genkin (pool tables) Katrina Thomas (PEP)		

# City of Birmingham

			A	Application Icoholic Beverag		
	w Application	Normal .		_		
	aileici		KESTAURAI	NT RETAIL LIQO		By: GS
				(Enter Type of Lice	nse Applied For)	(Revenue Official
1. 1	lame of Applica	nt (s) R1 Fiv	ve Points We	act II C		
			Indicate wh	ether Individual D	Partnership, Corporation, LL	CHELL
2. Na	ame and address of	individual applicant	t or all partners	and members if partn	ership or assoc., or all officers and	.C, LLP, etc) 1 directors if composition
			(Attach	separate sheet if	necessary)	ancorors, ir corporado
	ocial Security N			Date of Birth	Present Residence	Length of
	rivers License N e of Owner, Off		Title	Place of Birth	Address	Residence a
MOIT	e or Owner, Off	icer or Partner		And the second		Place Name
ALD!	49941741		Manshau	(19/17/78 )		
	iang Jin		Member	China	3191 Chase Ct	5 years
	grang Sin		-	China	Birmingham, AL 35235	
Note:	If a corporation, LL	.C or LLP, give place	and date of in	corporation or issuance	e of certificate of authority to do b	ricinace in Alabama.
_	n Corporation: o  ade Name Co  Location 11	rab Barrack		(get copy of or		
	Birmingham, A	Exact Street labama Zip Code	Number, or 35205	if on Highway, give of County \(\infty\) Jeffers	details as to Location Shelby	
(b)	Length of time	at this location				
(c)	Mailing Address	s: 1108 20 <sup>th</sup> Si	S Birmingh	am, AL 35205		
(d)	Business Phor	ne	Fax:		Other Contact: (205)!	586-55 <u>60</u>
	lame, trade name rade name	and License num	nber of last or Year	previous licensee:	Taxpayer ID	
6 (a) PO	Owner of re Box 130715 Birmi	eal estate for which	th license is d	esired Munger LLC		
		mgnani, AL JJEI.		Address		
(b)	Describation FA	T STOLY DIGIT		ch a license is desire	d: New Construction   Exist	
(c)	is establishmen	t equipped with ta	ables and cha	irs? Yes 🛛 No 🗌	If "Yes", how many? 40TBS,	160CHS
7. Has	a liquor, malt or es", explain fully	brewed beverage	license for p	remises ever been d	enied, suspended or revoked?	Yes 🖾 No
(b) Vi	ool Tables? Yes deo Games? Yes ending Machines	I I No IXI	Tuke Boy or	Yes No X r Slot Musical Equipn Cigarettes or T	Standard Provider: nent? Yes  No  No	☑ Other?
9 (a) W (b) Ir	ill you allow danc	ing? Yes No	If "Yes	": Customer/Patron	? Div I Exhibition/Perform	nance? Div II

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)	
(e)	Are these premises equipped for on premises consumption of liquor? Yes ⊠ No □
<b>(f)</b>	Will this business be operating primarily as a package store? Yes ☐ No ☒
<b>(</b> g)	Seating Capacity:
<b>(</b> 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,
<b>(i)</b>	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)	-
(c) (d) (e) (f)	Does the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes  No  If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political Athletic Other
	below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except d reckless driving. If no record, state "None".)
Name	Violation Charged Name of Court Date Disposition of Case
the only p	for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is berson interested in the business for which said license is requested.  d subscribed before me this
	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 Loning 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.

Continued - 1411 to Table 19 to 19 t	
Section 1 – WHAT WOULD YOU LIKE TO DO?	
Register a new business (Please complete all se	ections)
Add a New Location or Tax Type to your curren	nt registration (Please complete Sections 2,3, 5-10,12,13, and 1
☐ Change Business Ownership of your current reg	sistration (Please complete all sections)
	nt registration (Please complete Sections 2, 8-10, 12, 13 and 14
Change the Location Address of your current	registration (Please complete Sections 2, 8-10, 12, 13 and 14
Change the Location Address or your current re	gistration (Please complete Sections 2, 3, 5-13, and 14)
Change in Corporate Officers, Members, or Parti	ners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
Provide a general "update" of your current regis	stration information (Please complete all sections)
Section 2 - LEGAL NAME AND MAILING ADDRESS to	o which tax forms are to be sent:
(Note: If mailing address is a post office box, the s	treet address of the business must also be indicated.)
Full Legal Name: RJ Five Points West LLC	
Attention:	
Address: 1108 20th St S	
A 0 1 1 m	AL Zip Code: 35205
Area Code and Phone Number: (205)586-5560	
Area Code and Fax Number: Name of Contact Person: LaSandra Hall	
Name of Contact Person: LaSandra Hall E-Mail:	
L"('10#,	Website Address:
Please select:	of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham. If you are registering more than one location of office in Birmingham.
Trade Name (d/b/a): Crab Barrack Attention:	
Address: 1108 20th ST S	
City: Birmingham State: AL	Zip: 35205
rea Code and Phone Number of Business Location:	Zip: <u>35205</u>
rea Code and Fax Number of Business Location:	
lame of Contact Person at Business Location:	
-Mail:	Website Address:
Pertion 4 CHANCE OF OWNEDCUTP	
f applicable, this section MUST be completed.	merger, purchase or acquisition of an existing business.
-	
ormer Owner:	
rade Name (d/b/a)	
ailing Address of Former Owner	
ddress (es) of Former Location(s)	
rea Code and Phone Number of Former Owner:	
THE THE PARTY OF T	

Section 5 — TYPE OF OWNERSHIP Please indicate the form of organization. NOTE: Please refer t Tax Certificate Form" instruction sheet for a listing of supple	to the accompanying "General Information for Preparing an Application for mental documentation to be included with this application.
<ul> <li>1. Alabama Corporation (Incorporated in Alabama)</li> </ul>	☐ 1. Foreign Corporation (Incorporated in another state
<ul><li>2. Partnership (two or more owners)</li></ul>	the state of the s
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	Home Occupation/Home Office (Please Specify the type of occupation or office)
2. Contractor (Please Specify)	9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
3. Wholesaler	☐ 10. Transient Vendors/Special Events:
4. Retailer	Date(s) of the Event Event Location
5. Other (Please Specify)	EVER ESCHOOL
7. Day Care Center	
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRI	ODUCT
	for the largest percentage of gross income. State the broad field of nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
You should indicate the one business activity that accounts business activity as well as the product or service. For exam Manufacturing / Product: Automobiles. Note: This information	for the largest percentage of gross income. State the broad field of nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
You should indicate the one business activity that accounts business activity as well as the product or service. For exam Manufacturing / Product: Automobiles. Note: This informa Revenue Service on Schedule c of Form 1040 for Sole Propri Activity: Restaurant	for the largest percentage of gross income. State the broad field of nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Ition should be the same information as required by the Internal letorships.  Product: Alcohol/Food
You should indicate the one business activity that accounts business activity as well as the product or service. For exam Manufacturing / Product: Automobiles. Note: This informa Revenue Service on Schedule c of Form 1040 for Sole Propri Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and Federal ID Tax Number 87-3875976 Number of I	for the largest percentage of gross income. State the broad field of nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Ition should be the same information as required by the Internal letorships.  Product: Alcohol/Food  EMPLOYEES I the number of employees that will be working in Birmingham.  Employees in Birmingham (Required)
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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

APPLICATION FOR TAX	CERTIFICATE	317 37 7373 P	N. T. W. C. W. C.	
APPLICATION FOR TAX	CENTIFICATE (C	JII Y OF E	SIKMINGHAM.	ALABAMAI

3

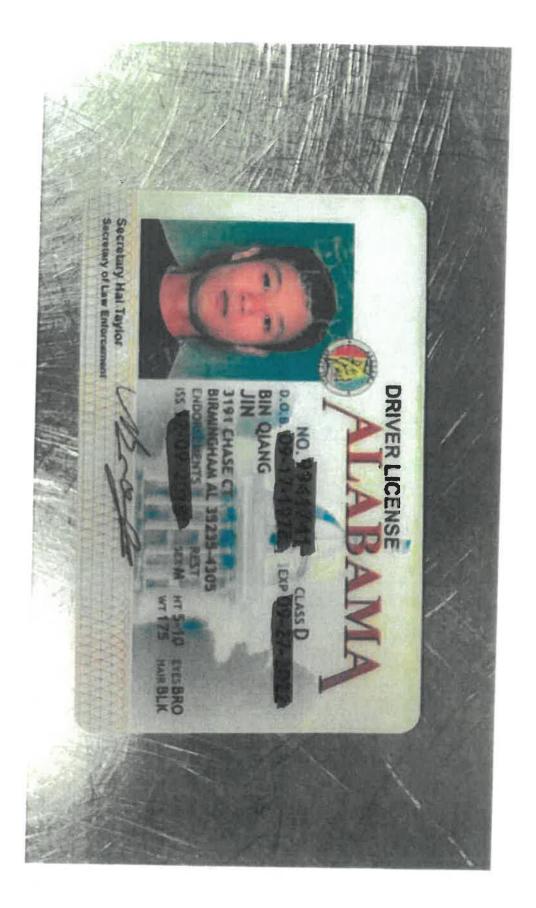
☑ Business License Tax

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 separate business license. Lease, occupational and lodgings taxes. Each separate business location requires a

NAME Jin, Bin	TITLE Member	SOCIAL SECURITY NUMBER
Section 12 - CORPORATE RESIDENT AC Name: Address of Residence:	GENT OR LOCAL MANAGER	
City: Area Code and Phone Number of Reside	State ence:	Zip Code
I understand and agree that the grain Birmingham Tax Code provisions, and stof Birmingham Laws, Ordinances, Rules ordinances, rules and regulations may realso understand that disclosure of any fissued pursuant to this application, or in that it is unlawful for any person to commot otherwise exempt therefrom under Ordinance No. 97-183), without first has continue in any business, vocation, occurithout obtaining a new license. I further	false declaration, that I am authoris answered are true, correct, and conting of this license requires my ate laws, as well as with all conditions and Regulations, and that any fail esult in the revocation of any licensalse or misleading information will the revocation of the license if such mence or engage in any business, were the provisions of the City of Buying procured a license therefore, accupation, or profession after the engagement of the city of the companion of the city of the city and the city of the city	ized to complete this form and to the best complete statements, made in good faith. Compliance with all applicable City of one set forth in any and all applicable City lure or refusal to comply with said laws, se issued pursuant to this application. I result in automatic denial of any license h has already been issued. I understand ocation, occupation or profession, who is irmingham Business License Tax Code and that it is unlawful for any person to xpiration of a license previously issued any person to engage in or continue in
Signature of Person Completing This Appl	lication	ine 15.2022
Print the Name of the Person Completing This	205 5%	Person Completing Application
TY OFFICE USE ONLY Location		

Please select: Commercial Establishn		☐ Private Residence	No Physical Birmingham Locati
Trade Name (d/b/a): Attention:			
Address:			
Cib	tate:		
Area Code and Phone Number of Business	Location		Zip:
Area Code and Fax Number of Business Lo	ocation:		
Name of Contact Person at Business Locat	ion:		
E-Mail:		Website Address	:
CITY OFFICE USE ONLY Location			
ZONING APPROVAL AND COMMENTS:	SICOR	NAICS	
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	TERRIT		
	ANNEX	H DEPT PERMIT	
OME OCCUPATION CERTIFICATE EXECUTED		REQUIRED PERMIT	
YES NO NOT APPLICABLE	ARTICL	ES OF INCORPORATION	
	CERTIF	ICATE OF AUTHORITY	
		SOUTH OF HUTHORITY	
rade Name and Location Address of office laction. Attach additional sheets if necessary. (1	TAX FO	RMS ORDERED NE	ore than one location, please use this cions are subject to zoning approval.
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HED FOR



CONTRACTOR CONTRACTOR



MODERNY AR INCHES

Dersipud description of holder is of date of mituralization:

· Jan MALE

Date of buth:

Height: 5 feet 10 inches

Country of former nationality:

CHINA, PEOPLE'S REPUBLIC OF

blurital status: MARRIED

CFS Registration No.

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

(Complete and brue signature of halder)

De it known that, pursuant to an application filed with the Secretary of Komeland Security

(III. JACKSONVILLE, FLORIDA The Secretary having found that:

BIN QIANG JIN

was: entitled to be admitted to citizenship, such person having taken the oath of allegiance me a ceremony conducted by the then residing in the United States, intends to reside in the United States when so respired by the Saturalization Laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and respects

US DISTRICT COURT NORTHERN DISTRICT

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 VITHOUT LAWFUL AUTHORITY

epartners of homeland security

FORM N-550 NEV 4/04

Patieenship and Immyration Services



## 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 LOCATE IN ALABAMA):	ED AT THE REGISTERED OFFICE (MUST BE LOCATE
BIN QIANG JIN 1108 20TH STREET SOUTH BIRMINGHAM, AL 35205 JEFFERSON	
MAILING ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFERENT FROM STREET AD	DRESS):
. THE UNDERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEMBER OF THE LIMITED LIA	ABILITY COMPANY.
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	(FOR SOS OFFICE USE ONLY)
SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11	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

X 74. Marill

John H. Merrill

Secretary of State

6. THE U	NDERSIGNED SPECIFY	12/07/2021 15:54:02	AS THE EFFECTIVE DATE AND THE TIME OF FILING
	ATTACHED ARE ANY C	THER MATTERS THE	MEMBERS DETERMINE TO INCLUDE HEREIN

## 7. ORGANIZER(S) - OPTIONAL

Organizer		Office Address	Bieline Baldur	
BIN QIANG JIN			Mailing Address	
DIV GIANG JIN		1108 20TH STREET SOUTH BIRMINGHAM, AL 35205	1108 20TH STREET SOUTH BIRMINGHAM, AL 35205 BIN QIANG JIN ORGANIZER	
	12/07/2021			
	DATE		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 20t 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

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

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

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

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you documents, even if you have no employees. Please keep this notice in your permanent

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.

CINCINNATI OH 45999-0023 INTERNAL REVENUE SERVICE

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

	NOBOD	<b>⊉-SS</b>	FORM:	-	
9762785-78	FICATION NUMBER:	EK IDENLI	EWPLOY		- (

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 12-07-2021

666666666

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

Cb 212 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,

W. Avery Morris, CLEE Operations Commander Criminal Justice Information Services Division Alabama State Bureau of Investigation XXXXXXXXXXX STATE ABI SEARCH RESULT AND RAP SHEET XXXXXXXXXX

TCN:8002203106 NAME:JIN,BIN QIANG SOC:237990748 ABI RESULT:IDENT SID:AL02986606

- 1

# 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: 05-18-2	922 *
*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.

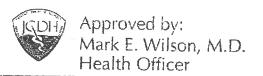
THE NATURE OF THE BUSINESS IS CLASSIFIED AS FOLLOWS:

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.

CHARLES AND CHARLES STREET

\* NON TRANSFERABLE \*. EXPIRATION DATE 9/30/2022



Jorathan Stanton, Director Environmental Health Services



Invoice Number: 104042204035

Payment For: Food Permit - Level 3

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

Amount: \$275.00

06/09/2022

Received by

telecia &

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

**AREA:** 43,979.41

**ACRES: 1.01** 

SUBDIVISION INFORMATION:

**NAME** BHAM BLK 770 RES 29-1-1

**BLOCK:** 770

LOT:

**OTHER: \$0.00** 

ATH AVES

3A

TANGE DITANGUEN //U RES 29-1-1

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				
То:	Hunter Williams, Cha Public Safety	airman			
Subject:	Applicant's Name Business Name Business Address	Graymon	A. Abdullah t Food mont Ave W	PREMATURATION OF THE PROPERTY	
Lounge Ret Club Liquor Beer Off Pr Wine Off Pr Restaurant Special Ret Division I D	remise remise Retail Liquor ail License (under 30 days) vance Permit (customers)  Nence to the above name d regarding the granting  dance Oppos	eighborhood license a of this lice	Club Liquor Cla Beer On & Off Vine On & Off Special Retail L Pool Table Pen Division II Dan and Association pplication. T	Premise License (over 30 day mit ce Permit  n met on Line / he concerns of the	and e Please
Applicant:	attended NA m	eeting	d	id not attend NA n	neeting
Birmingham; 7	this form to the of atter 710 North 20 <sup>th</sup> Street, Bir to attend the neighborh	rmingham,	AL 35203; C	ity Council Chamb	ers: 3 <sup>rd</sup>

6/24/2022 11:05 Lyndle Potens Lost VM

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

The following applicant had dance or pool table licens	as applied to te:	the City of	F Birmingham for an alcohol,		
Name of Applicant:	Maiadah Ab	duirahma	Abdullah		
Mailing Address:	541 Graymont Ave W Ste A Birmingham AL 35204				
Trade Name:	Graymont Fo	ood			
Location Address:	541 Graymo	nt Ave W			
Contact Number:	(205)563-20	75	Contact Person: Lynette Peters		
☐ New	/ Application				
	Туре о	f License			
☐ Lounge Retail Liquor Class I☐ Club Liquor Class I (Fraterna☐ Beer Off Premise☐ Wine Off Premise☐ Restaurant Retail Liquor☐ Special Retail Liquor (over 3)	al)	☐ Club Lid ☐ Beer Of ☐ Wine Of ☐ Special	e Retail Liquor Class II (Package St quor Class II (Private) n & Off Premise n & Off Premise Retail Liquor (7 days or less) Retail Liquor (under 30 days)	ore)	
Division I Dance Permit (cus	tomer)	☐ Division	II Dance Permit (entertainers)		
Pool Table Permit (send copy	y of application)				
Kitchen equipped: yes  no [	$\boxtimes$	Number of	table and chairs NA		
Date Applied: 11/9/2020 Revenue Examiner: GS	O M	lealth Depa Commur peration Ne	nity Development w Birmingham sin (pool tables)		

		Application	for	
New Application Transfer		050/WINE-TYP	e License E 070(OFF PREMISE ONL)	By: GS
		(Enter Type of Lice	nse Applied For)	(Revenue Official)
	(Indicate what or all partners	hma Abdullah Bether Individual IP	artnership, Corporation, LLC, ership or assoc., or all officers and d	110 40
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	e and date of i	ncorporation or issuanc	e of certificate of authority to do bus	siness in Alabama:
Book Page: Foreign Corporation: certificate of Auth  3. Trade Name Graymont Food	Date: ority Date:	(get copy of or	County: iginal papers)	
4(a) Location 541 Graymont Ave Exact Stree Birmingham, Alabama Zip Code	t Number, or	if on Highway, give County ⊠Jeffer	details as to Location son Shelby	
(b) Length of time at this location				
(c) Mailing Address: <b>541 Graym</b>				
Business Phone      Name, trade name and License nu     Trade nameGraymont Fodd &	mber of last o		4501/4501/	6 <b>3-2075</b> 4854
6 (a) Owner of real estate for wh 595 South Forest Dr Birmingham AL	ich license is ( 35209		lmansoob	
(b) Give a full description of the pre Description ☑ 1 Story Bldg (c) Is establishment equipped with			ed: New Construction   Existin	ng Structure 🛚
7. Has a liquor, mait or brewed beverage If "Yes", explain fully				☐ Yes   ☑No
8 (a) Pool Tables? Yes ☐ No ☒ (b) Video Games? Yes ☐ No ☒ (c) Vending Machines (Snacks/Sodas)	Juke Box	l? Yes □ No ☒ or Slot Musical Equip ☒ Cigarettes or	Standard Provider: ment? Yes ☐ No ☒ Fobacco Products? Yes ☒ No [	Other?
(a) Will you allow dancing? Yes \(\subseteq\) No (b) Independent Contract Employees (	If "Ye Disc Jockey,	es": Customer/Patron Band, Bartenders, Se	n?  Div I Exhibition/Performativers)? Yes  No	ance? Div II

his annl	ication will not be processed until a	Il fono due et tie es	orginature (i)	Meacure Ollida
		-	Signature	Revenue Official
		IVCO	Signature	of Afflant
orvin all	a annactined before the fulls	day of	vember	2020
the only p	application and that all the statements the derson interested in the business for which disubscribed before me this	th said license is requested.	h therein are tru	e and correct, and that the applicant is
Applicant read said	for the Alcoholic Beverage license reques	sted by the aforementioned	applicant hereby	/ swears or affirms that he or she has
WV -	Applicant			
Name	Violation Charged	Name of Court	Date	Disposition of Case
including D.U.I. an	below the court records for law violations the manager, whether as sole applicant, d reckless driving. If no record, state "N	s in the last ten (10) years, , partner, officer, member, ( lone".)	if any, of each poor landlord. (Do	erson interested in this application, not include traffic violations, except
	For what purpose is the club organized a			litical Athletic Other
(e) (f)	Is business conducted through officers r Are members admitted by written applic	ation, investigation, and ba	llot? _ Ye	es No D
(C)	How many paid-up members are there i Are regular meetings held? Yes ☐ No	If so when?		_
11 (a)	Does the club charge and collect dues fi	om elected members?	Ye	s 🔲 No 🗍
	(4) Park Board Permission	Yes  No  Yes  No		
	<ol> <li>Sponsor Letter of Designation?</li> <li>Multi-Vendor Sponsorship?</li> <li>Street Closing Required</li> </ol>	Yes No Yes No		
(k)	Event Sponsor Phone Nur	mber		a applica loly
(i)	For a SPECIAL EVENTS RETAIL LICENS (Note: Application must be filed)	E, not to exceed seven (7) ( 120 days in advance of	days: Starting event for which	Ending
(i)	For a SPECIAL RETAIL LICENSE, more			
(h)	For a SPECIAL RETAIL LICENSE, less ti			
(g)	Seating Capacity:			
<b>(f)</b>	Will this business be operating primaril	y as a package store? Yes	□ No ⊠	
(e)	Are these premises equipped for on pr	emises consumption of liqu	or? Yes 🗌 No	
(d)	If not kitchen equipped, is any type of Items	food served? Yes 🛛 No	If "Yes", ex	plain <u>Grocery</u>
(c)	Is place of business habitually and prin	ncipally used for providing f	ood to the public	? Yes 🗌 No 🔯
(b)				
10 (a)	Are these premises kitchen equipped?	Yes 🛄 No 🖾 Not Ap	plicable 🔲	

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

# For Loning Purposes Only: Rear I Wine (Off Premise) Transfer: NO SPU Required CITY OF BIRMINGHAM APPLICATION FOR TAX CERTIFICATE

TAXPAYER IDENTIFICATION NUMBER (City Office Use Only)

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 YO			
	OU LIKE TO DO?		
Register a new business (	Please complete all sec	tions)	
Add a New Location or Ta	x Type to your current	registration (Please com	plete Sections 2 ,3, 5-10,12,13, and 14)
☐ Change Business Ownersh			
			nplete Sections 2, 8-10, 12, 13 and 14)
			te Sections 2, 3, 5-13, and 14)
			ctions 2, 5, 7-9,, 11-13, and 14)
☐ Provide a general "update			
			- complain an occional
Section 2 – LEGAL NAME AND (Note: If mailing address is a	MAILING ADDRESS to post office box, the st	which tax forms are to reet address of the busi	be sent: ness must also be indicated.)
Full Legal Name: Maiadah Attention:	n Abdulrahma Abdullah		
Address: 541 Graymont A	A.		
City: Birmingham Area Code and Phone Number		AL Zip (	Code: 35204
Area Code and Fax Number:	. (203)303-2073		
Name of Contact Person:	Lynette Peters		
E-Mail:		Website Address	
Section 3 – TRADE NAME AND please see reverse side of this for	LOCATION ADDRESS m. (Important Note: A	of office in Birmingham. If Il business locations are	you are registering more than one location, subject to zoning approval.)
please see reverse side of this for	LOCATION ADDRESS m. (Important Note: A cial Establishment	of office in Birmingham. If II business locations are	subject to zoning approval.)
please see reverse side of this form  Please select:   Comment  Trade Name (d/b/a):   Graym  Attention:	m. (Important Note: A	Il business locations are	subject to zoning approval.)
please see reverse side of this form  Please select:   Comment  Trade Name (d/b/a):   Graym  Attention:  Address:   541 Graymont Ave	m. (Important Note: A cial Establishment nont Food e W Ste A	Il business locations are	subject to zoning approval.)  No Physical Birmingham Location
Please see reverse side of this form  Please select: Comment  Trade Name (d/b/a): Graym  Attention:  Address: 541 Graymont Ave  City: Birmingham  Area Code and Phone Number	m. (Important Note: A cial Establishment cont Food  E W Ste A State: AL of Business Location:	Il business locations are	subject to zoning approval.)
Please see reverse side of this form Please select: Comment  Trade Name (d/b/a): Graym Attention: Address: 541 Graymont Ave City: Birmingham Area Code and Phone Number Area Code and Fax Number of	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location:	Il business locations are	subject to zoning approval.)  No Physical Birmingham Location
Please see reverse side of this form Please select: Comment Trade Name (d/b/a): Graym Attention: Address: 541 Graymont Ava City: Birmingham Area Code and Phone Number Area Code and Fax Number of Name of Contact Person at Bus	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location:	Il business locations are  Private Residence	subject to zoning approval.)  No Physical Birmingham Location
Please see reverse side of this form Please select: Comment Trade Name (d/b/a): Graym Attention: Address: 541 Graymont Available City: Birmingham Area Code and Phone Number Area Code and Fax Number of Name of Contact Person at Bus E-Mail:	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location: siness Location:	Il business locations are  Private Residence  Website Address:	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204
Please see reverse side of this form Please select: Comment Trade Name (d/b/a): Graym Attention: Address: 541 Graymont Available City: Birmingham Area Code and Phone Number Area Code and Fax Number of Name of Contact Person at Bus E-Mail:  Section 4 - CHANGE OF OWNE	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location: siness Location:	Il business locations are  Private Residence  Website Address:	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204
Please see reverse side of this form Please select: Comment Trade Name (d/b/a): Graym Attention: Address: 541 Graymont Ave City: Birmingham Area Code and Phone Number Area Code and Fax Number of Name of Contact Person at Bus E-Mail: Section 4 – CHANGE OF OWNE If applicable, this section M	m. (Important Note: A cial Establishment nont Food  e W Ste A  State: AL  of Business Location: Business Location: siness Location: siness Location:	Il business locations are  Private Residence  Website Address:	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204
Please see reverse side of this form  Please select: Comment  Trade Name (d/b/a): Graym  Attention:  Address: 541 Graymont Ave  City: Birmingham  Area Code and Phone Number  Area Code and Fax Number of  Name of Contact Person at Bus  E-Mail:  Section 4 - CHANGE OF OWNE  If applicable, this section M  Former Owner: Sharifa Sale  Trade Name (d/b/a)	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location: siness Location:  ERSHIP resulting from ratust be completed.	Il business locations are  Private Residence  Website Address:	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204
Please see reverse side of this form  Please select: Comment  Trade Name (d/b/a): Graym  Attention:  Address: 541 Graymont Ave  City: Birmingham  Area Code and Phone Number  Area Code and Fax Number of  Name of Contact Person at Bus  E-Mail:  Section 4 - CHANGE OF OWNE  If applicable, this section M  Former Owner: Sharifa Sale  Trade Name (d/b/a) Graymont  Graymont  Trade Name (d/b/a) Graymont	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location: Siness Locat	Website Address:	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204
Please see reverse side of this form  Please select: Comment  Trade Name (d/b/a): Graym  Attention:  Address: 541 Graymont Ave  City: Birmingham  Area Code and Phone Number  Area Code and Fax Number of  Name of Contact Person at Bus  E-Mail:  Section 4 - CHANGE OF OWNE  If applicable, this section M  Former Owner: Sharifa Sale  Trade Name (d/b/a)	m. (Important Note: A cial Establishment nont Food  e W Ste A State: AL of Business Location: Business Location: siness Location: files be completed.  eh ont Food & Grocery ner 541 Graymont A	Website Address: merger, purchase or acquave W Ste A	subject to zoning approval.)  No Physical Birmingham Location  Zip: 35204

Tax Certificate Form" instruction sheet for a listing of supp	to the accompanying "General Information for Preparing an Application for lemental documentation to be included with this application
☐ 1. Alabama Corporation (Incorporated in Alabama	
2. Partnership (two or more owners)	1. Foreign Corporation (Incorporated in another state
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	ory.
☐ 1. Manufacturer	8. Home Occupation/Home Office (Please Specify the type of occupation or office)
☐ 2. Contractor (Please Specify)	9. State Certified, State Regulated, or State Licensed
☐ 3. Wholesaler	Occupations, (Please Specify)  10. Transient Vendors/Special Events:
☑ 4. Retailer	Date(s) of the Event Event Location
5. Other (Please Specify)	Event Focation
6. Food/Eating Establishment	
7. Day Care Center	
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR	
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles, Note: This inform	for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles. Note: This inform Revenue Service on Schedule c of Form 1040 for Sole Prop	for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: ation should be the same information as required by the Internal rietorships.
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PI You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles. Note: This inform Revenue Service on Schedule c of Form 1040 for Sole Prop Activity: Convenience Store  Section 8 – FEDERAL TAX TO NUMBER / NUMBER OF	s for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSE	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRO	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: nation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles. Note: This inform Revenue Service on Schedule c of Form 1040 for Sole Prop Activity: Convenience Store  Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and Federal ID Tax Number Number of Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY Inter Date Business Activity Will Begin in Birmingham noter Date City of Birmingham Taxpayer ID Applied F	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  It Month Day Year  For: Month Day Year
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION of the product of service. For examination of the product of	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  It Month Day Year  For: Month Day Year
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For examination of the product: Automobiles. Note: This information of the product of	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: action should be the same information as required by the Internal reletorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  1: Month Day Year  Tor: Month Day Year  Tor: Month Day Year  Tory Tyou are liable.
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PROJECT OF PROJECT OF PROJECT OF PROPOSITION OF PROJECT	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  If the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  It Month Day Year  The Month Day Year  The Your are liable.  ERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For examination of the product of service in the product of service. For examination of the product o	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal vietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  1: Month Day Year  For: Month Day Year  To you are liable.  ERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PROJECT OF PROJECT OF PROJECT OF PROPOSITION OF PROJECT	is for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal rietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  If the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  II. Month Day Year  Thor: Month Day Year  Thor: Month Day Year  Thoryou are liable.  ERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Sellers Use Tax Number
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRINCIPAL BUSINESS ACTIVITY AND PROPOSITION OF PRO	For the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal vietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  1: Month Day Year  Tor: Month Day Year  Tor: Month Day Year  Toyou are liable.  ERS 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
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For examination of the product of service in the product of service. For examination of the product o	is for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal reference information as required by
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PR You should indicate the one business activity that accounts business activity as well as the product or service. For examining / Product: Automobiles. Note: This information in the product of Form 1040 for Sole Propositivity:  Convenience Store  Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY Inter Date Business Activity Will Begin in Birmingham Inter Date City of Birmingham Taxpayer ID Applied Fection 10 – Tax Liabilities Check the taxes for which Sales Tax  Consumers Use Tax  Lease Tax  Occupational Tax- Employers	is for the largest percentage of gross income. State the broad field of imple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: lation should be the same information as required by the Internal virietorships.  Product: Alcohol/Grocery/Merchandise/Tobacco  EMPLOYEES  d the number of employees that will be working in Birmingham.  Employees in Birmingham (Required) 2  Y  1: Month Day Year  Tor: Month Day Year  Tor: Month Day Year  Tor: Month Day Tear  Tor: Month Day Tear  Tor: Month Day State of Alabama Sales Tax Number  State of Alabama Sellers Use Tax Number  State of Alabama Consumers Use 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	-

	TITLE Owner	SOCIAL SECURITY NUMBER 834-25-8218
Section 12 - CORPORATE RESIDENT AGE Name:	ENT OR LOCAL MANAGER	
Address of Residence:		
City: Si Area Code and Phone Number of Residen	tatece:	Zip Code
Section 13- STATEMENT OF ACKNOWLED	OGEMENT AND ACCEPTANCE OF	CONDITIONS -Please read carefully, then
ssued pursuant to this application, or in the	he revocation of the license if o	allure or refusal to comply with said laws, ense issued pursuant to this application. I ill result in automatic denial of any license ich has already been issued. I understand
Ordinance No. 97-183), without first haviontinue in any business, vocation, occurithout obtaining a new license. I further business, vocation, occupation, or profithout approval from the City of Birmingham	the provisions of the City of ing procured a license therefore pation, or profession after the runderstand that it is unlawful ression at any location within the am Department of Planning, Eng	vocation, occupation or profession, who is Birmingham Business License Tax Code , and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in
Ordinance No. 97-183), without first haviontinue in any business, vocation, occurithout obtaining a new license. I further ny business, vocation, occupation, or profithout approval from the City of Birminghilligned:	the provisions of the City of ing procured a license therefore pation, or profession after the runderstand that it is unlawful ression at any location within the am Department of Planning, Eng	vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in corporate limits of the City of Birmingham lineering, and Permits (Zoning Division).  11/9/2020
Ordinance No. 97-183), without first haviontinue in any business, vocation, occurithout obtaining a new license. I further ny business, vocation, occupation, or profithout approval from the City of Birminghilligned:	the provisions of the City of ing procured a license therefore pation, or profession after the runderstand that it is unlawful fession at any location within the am Department of Planning, Engation	vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in corporate limits of the City of Birmingham lineering, and Permits (Zoning Division).  11/9/2020
Ordinance No. 97-183), without first haviontinue in any business, vocation, occupithout obtaining a new license. I further ny business, vocation, occupation, or profithout approval from the City of Birminghaligned:  Signature of Person Completing This Application of the Person Completing This Application the Name of the Person Completing This Application of the Pe	the provisions of the City of ing procured a license therefore pation, or profession after the runderstand that it is unlawful fession at any location within the am Department of Planning, Engation	vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in corporate limits of the City of Birmingham lineering, and Permits (Zoning Division).  11/9/2020  Date
Ordinance No. 97-183), without first haviontinue in any business, vocation, occur ithout obtaining a new license. I further ny business, vocation, occupation, or profithout approval from the City of Birminghistipad:  Signature of Person Completing This Application	the provisions of the City of ing procured a license therefore pation, or profession after the runderstand that it is unlawful fession at any location within the am Department of Planning, Engation	vocation, occupation or profession, who is Birmingham Business License Tax Code, and that it is unlawful for any person to expiration of a license previously issued for any person to engage in or continue in corporate limits of the City of Birmingham lineering, and Permits (Zoning Division).  11/9/2020  Date

Please select: Commercial Establishm	nent	☐ Private Residence	No Physical Birmingham Locat
Trade Name (d/b/a):			
Address:			
City: St	ate:		Zip:
area Code and Phone Number of Business area Code and Fax Number of Business Lo	Location:		
lame of Contact Person at Business Locat	cation:		
-Mail:	1011:	144.1 11 4.44	
		Website Address:	
ITY OFFICE USE ONLY - Location			
ZONING APPROVAL AND COMMENTS:	SIC OR	NAICS	
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	TANCER	ICATE OF AUTHORITY	
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Idress: by: State Code and Phone Number of Business Lea Code and Fax Number of Business Location and Contact Person at Business Location Mail: TY OFFICE USE ONLY Location	TAX FOR INTERPRETATION OF THE RELICUTE OF THE	RMS ORDERED NBL  If you are registering molote: All business location  Private Residence  Website Address;  AICS  RY  DEPT PERMIT EQUIRED PERMIT	re than one location, please use this ons are subject to zoning approval.  No Physical Birmingham Location  Zip:





## 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.

this, 20 20.
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 day of
November, 20 20 by: Sharifa M. Sale, who is/are personally
known by me or who has/have produced: Alabama State Identification as
dentification and who did not take an oath.
(SEAL) Notary Public

State of Alabama

My Commission Expires: 06/24/2014

# TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE (CONTROLLED)

I, Sharifa M Salth hold hold (current taxpayer) License ID# 484854 , located at 5416	ling City of Birmingham
transferred to Maidah A. Abdyllah	that said License be
provided Majorian A. Ab authority  (applicant)  from the local governing body and meets all the	obtains approval requirements of the
ABC Board. I understand that I am responsible	for the operation of
this licensed establishment and for all taxes due obtains his/her license from the ABC Board.	until Marilah A. Ahdula (applicant)
I also understand that if for any reason this approved by the local governing body or the ABC over complete control, operation, and responsibility premises. If I do not continue operating this lices then, I will turn in my ABC Board License to the Ice Office and all my City of Birmingham licenses to the of the Finance Department of the City of Birmingham	Board, I must take ity of these licensed nsed establishment, ocal ABC Board Field
I further understand that this license will not until all taxes and licenses are paid and current.	be transferred
APPLICANT Mexico dons Witness heg timely	DATE 11-9-20 DATE 11-9-20 DATE 11-9-2020
V	

## **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 Lea	se shall	be bindi	ng upon, an	d inure to t	the ben	efit of, the parties,	their heirs,	successors,	and assigns
Cionad this	15t	Jan C	Dotah	01 0	e	2021) (Year).		·	Ũ
oigned ims		day or	COLON		ionth)	⊸UoU (Year).			

Landlord Tenant

PARCEL ID: 012200343022001000

**SOURCE:** TAX ASSESOR RECORDS

**TAX YEAR: 2019** 

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

OWNER: ALMANSOOB JOWHER ALI -2 3823 [

**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

**AREA:** 14,497.81

**ACRES: 0.33** 

SUBDIVISION INFORMATION:

NAME EARLE PLACE 1ST ADD

**BLOCK: 15** 

LOT:

512 508

502

608

601

(55)

**OTHER: \$0.00** 

452

448

GRAYMONT AVE W

8&9

457

453

449

445

400

-GRAYMONT-AVE-W

525

448

440

436

**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 OWIKH LLC **Business Name** Hood Quick Mart Business Address 213 Dugan Ave PC, Ste A Type of License & Description Lounge Retail Liquor Class I Lbunge Retail Liquor Class II (Package Store \_\_ Club Liquor Class I dlub Liquor Class II (Private) ☐ Beer Off Premise ☐ Beer On & Off Premise Wine Off Premise Wine On & Off Premise Restaurant Retail Liquor Special Retail License (over 30 days) Special Retail License (under 30 days) Pool Table Permit Division I Dance Permit (customers) ☐ division II Dance Permit 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 No Recommendation Support Reason for Opposition Applicant: \_\_\_\_\_ attended NA meeting X did not attend NA meeting Faith Abraham

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

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

The following applicant had dance or pool table licens	as applied to the City of Birmingham for an alcohol, e:
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
☐ Lounge Retail Liquor Class I ☐ Club Liquor Class I (Fraternal) ☑ Beer Off Premise ☑ Wine Off Premise ☐ Restaurant Retail Liquor ☐ Special Retail Liquor (over 30)	Beer On & Off Premise  Wine On & Off Premise  Special Patrill
Division I Dance Permit (custo	mer) Division II Dance Permit (entertainers)
Pool Table Permit (send copy of	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)

	£			

		Application	for	
New Application	^	Icoholic Beverag	je License	
Transfer 🖾 E	BEER-TYPE	050/WINE-TYP	E 070(OFF PREMISE ONL	V1 P
		(Enter Type of Lice	nse Applied For)	Y) By: GS (Revenue Official
Name of Applicant (s)  OWIK				(Merende Ollicia
	(H LLC	-14		
Name and address of Individual applicant	or an best office	AND INCIDED II DALLI	Partnership, Corporation, LLC ership or assoc., or all officers and a	, LLP, etc) directors, if corporation
Social Security Number	(Attach	separate sheet it	necessary)	
Drivers License Number	Title	Date of Birth Place of Birth	Present Residence	Length of
Name of Owner, Officer or Partner	ricio	Place of Biftil	Address	Residence a
		ellistado)		Place Name
ALDL#	Member		213 Dugan Ave PC	7 Months
Yagoub Saleh Mohamed		Detroit, MI	Birmingham, AL 35214	/ Monuns
			1	
Note: If a corporation, LLC or LLP, give place	and date of in	COMPoration or iccurren	of contition to 5	
Trade Name Hood Quick Mart  4(a) Location 213 Dugan Ave PC	Ct.	(get copy of or	g	
	Ste A	Continue		
Birmingham, Alabama Zip Code	35214	on Highway, give of County ⊠Jeffers	details as to Location	
(b) Length of time at this location		County Expended	usneiby Lisneiby	
	luc BC Ct-	6 M.C		
(c) Mailing Address: 213 Dugan A  (d) Business Phone			35214	
	Fax:	<del></del>	Other Contact: (205)56	3-2075
<ol> <li>Name, trade name and License num Trade name Hood Qwik Mart</li> </ol>	ber of last or Year		Erik Trinh 150k 150n Taxpayer ID 48	1004
6 (a) Owner of real estate for which	h license is de	esired Erik Trinh		
213 Dugan Ave PC Birmingham, AL 35	214			
(b) Give a full description of the prem	olono C. III	Address		
Description 1 Story Bldg	uses for which	n a license is desired	1: New Construction 🗌 Existin	g Structure 🛛
(c) Is establishment equipped with ta	bles and cha	irs? Yes 🗌 No 🛛	If "Yes", how many?	
<ol> <li>Has a liquor, malt or brewed beverage If "Yes", explain fully</li> </ol>				☐ Yes ⊠No
8 (a) Pool Tables? Yes No Co (b) Video Games? Yes No Co (c) Vending Machines (Snacks/Sodas)? Y	in Operated? Juke Box or 'es 🔲 No 🛭	Clot Musical C.	Standard Provider: nent? Yes  No  No  No  No  No  No  No  No  No  N	Other?
9 (a) Will you allow dancing? Yes No (b) Independent Contract Employees (Di	If "Voc	1. Cushamani Patricia		

TO (a	Are these premises kitchen equipped?	Yes 🗌 No 🖾 Not A	pplicable 🗌	
(b	) Is kitchen apart from but convenient to	o the dining room? Yes	] No ⊠	
(c	) Is place of business habitually and prin			c? Yes □ No l⊠
(d	) If not kitchen equipped, is any type of Items			
(e)	Are these premises equipped for on pre	emises consumption of liqu	uor? Yes 🗌 No	×
(f)				
(g)	Seating Capacity:			
(h)	For a SPECIAL RETAIL LICENSE, less th	an thirty (30) days. Start	ing Date	Ending Date
(i)	For a SPECIAL RETAIL LICENSE, more t	than thirty (30) days: Start	ting Date	Ending Dec. 31
(j)	For a SPECIAL EVENTS RETAIL LICENSE (Note: Application must be filed	not to overed (7)		
11 (a) (b) (c) (d) (e) (f) 12. List including	Event Sponsor Phone Num  (1) Sponsor Letter of Designation?  (2) Multi-Vendor Sponsorship?  (3) Street Closing Required  (4) Park Board Permission	Yes No Yes	Yeallot? Yearlotic Po	es No No Caracterican No Caracterican Athletic Other
	-Applicant	Name of Court	Date	Disposition of Case
Sworn and	for the Alcoholic Beverage license request application and that all the statements the person interested in the business for which disubscribed before me this	said license is requested day of	ecember Signature Signature	20 2

# TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE (CONTROLLED)

I, Ecik Tu Touch	t
License ID#	holding City of Birmingham
(six-digit City ID)	at 213 Dugan Ave Steff M
the mingham, AL 35214, hereb	(business address)  by agree that said License be
transferred to AWTKH LLC	
provided DWIKH LU (applican	
from the local governing (applicant)	obtains approval
from the local governing body and mee	ts all the requirements of the
ABC Board. I understand that I am resp	onsible for the operation of
this licensed establishment and for all tax	ves due unu ALTELL IIA
obtains his/her license from the ABC Boar	rd. (applicant)
I also understand that if for any rea approved by the local governing body or to over complete control, operation, and responses. If I do not continue operating then, I will turn in my ABC Board License to Office and all my City of Birmingham license of the Finance Department of the City of Birmingham license.	onsibility of these licensed this licensed establishment, to the local ABC Board Field
I further understand that this license until all taxes and licenses are paid and curr	
LICENSEE Symoto tolay	DATE 12-3-21
APPLICANT JUST SILL	——————————————————————————————————————
Witness W	DATE 12-3-2
THEY Thilly	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 tijones Narrative: NO OTHER INFO

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

05/27/2022 : 00:13:23 tjjones 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 vgatkin Narrative: comp sts police poss looking for sibj also the call him denkin

05/24/2022 : 11:29:21 vgatkin 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 of 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 vgatkin Narrative: STORE # 205-791-9988

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

STILL ON SCENE

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

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

**DOCTOR APT** 

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

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

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

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

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

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

05/05/2022: 11:09:35 vgatkin 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 dibrown 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 tjjones Narrative: SUBJ LEFT THE LOC

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

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

03/03/2022: 20:53:36 tjjones Narrative: CALLER STS THAT SHE HAVE A PROTECTION ORDER ON THE

MALE BECAUSE HE SLAPPED HER LAST YEAR

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

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

03/03/2022 : 20:52:28 tjjones 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

**AREA:** 13,798.95 **ACRES:** 0.32

SUBDIVISION INFORMATION:

NAME WAINWRIGHT AD-P C 22-20-3

**BLOCK:** 

LOT:

DUGAN AVE

1048

208

**OTHER: \$0.00** 

6&7

1109 1113 1119

21

**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: latoga .tate@birmingham.algor
brandon.mccray " ""
gregory: Stanley " ""
danny@ our juites home.com
Neighborhood Voting Form: Liquor Applications

Date:5/12/2	.2	
Application T	'ype: Transfer Ap	plication — On/Off Premise Beer/Wine
-	Applicant's Entity Name	Remington Investment LLC
	Business Name	Ikko Ramen & Sushi
Business Address		1909 11 <sup>th</sup> Ave S
Lounge Retail Club Liquor Cl Beer Off Prem Wine Off Prem Restaurant Re Special Retail Division I Dan The FIFE P voted about the regarding the gr	ass I lise hise stall Liquor License (under 30 days) ce Permit (customers)  OINTS SUVERAN above-named license ranting of this license nce Oppose	□ Lounge Retail Liquor Class II (Package Store □ Club Liquor Class II (Private) □ Beer On & Off Premise □ Wine On & Off Premise □ Special Retail License (over 30 days) □ Pool Table Permit □ Division II Dance Permit □ Division II Dance Permit  deighborhood Association met on MAY 17,000 and application. The concerns of the Neighborhood are indicated as follows: (Please check one)  se 10 Support ○ No Recommendation
Reason for Oppo	osition WAS No	OT OPOGGED. NETGHBORS FREQUENT
AND ALSO	THE RESTA	WANT. THEY RUN A CLEAN OPENATION.
WE ARE	PUGASIED TO	HAVE THOM CONTINUE.
Tate /Public S AL 35203; City	afety; City of Birmi Council Chambers	President/Officer  Shella M CHAFFIN  eturn this form to the of attention Latonya ngham; 710 North 20th Street, Birmingham,
process.		I reams in a sent in eve udino

06/24/2022 Mai Li 20 11:30 917-442-1458 sent text

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

The following applications dance or pool table	cant has applied to license:	the City of	Birmingham for ar	alcohol,
Name of Applicant:	Remington Invest	ment LLC		
Mailing Address:	1909 11 <sup>th</sup> Ave S Birmingham, AL 3	1909 11 <sup>th</sup> Ave S Birmingham, AL 35205		
Trade Name:	Ikko Ramen & Sushi			
Location Address:	1909 11 <sup>th</sup> Ave S			
Contact Number:	(917) <del>44</del> 2-1	458	Contact Per Mei Li	son:
	New Application			
	Туре	of License		
Lounge Retail Liquor Club Liquor Class I (F Beer Off Premise Wine Off Premise Restaurant Retail Liquor	ratemal) Jor	☐ Club Liq ☐ Beer On ☐ Wine Or ☐ Special	Retail Liquor Class II ( Juor Class II (Private) & Off Premise & Off Premise Retail Liquor (7 days or Retail Liquor (under 30	· less)
Division I Dance Perm	nit (customer)	☐ Division	II Dance Permit (enter	tainers)
Pool Table Permit (se	nd copy of application)			
Kitchen equipped: yes	no 🗌	Number of t	able and chairs 12TBS/	50CHS
Date Applied: 5/12/2 Revenue Examiner: 0	22 GS N	Health Depar Community Operation Nev	Development β Birmingham π (pool tables)	

### City of Birmingham **Application for** Alcoholic Beverage License **New Application** Transfer 図 RETAIL BEER-TYPE 040/WINE-TYPE 060(ON OFF PRE By: GS (Enter Type of License Applied For) (Revenue Official) 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 Date of Birth Present Residence Length of Drivers License Number Title Place of Birth Address Residence at Name of Owner, Officer or Partner Place Named ALDL# Member 14 Canvasback DR 13 years Oi Mina Li China Oxford, AL 36203 Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama: 960-140 Page: 1 of 3 01/05/2022 County: Jefferson Foreign Corporation: certificate of Authority Date: (get copy of original papers) 3. Trade Name Ikko Ramen & Sushi Location 1909 11th Ave S 4(a) Exact Street Number, or if on Highway, give details as to Location Birmingham, Alabama Zip Code 35205 County Defferson Shelby (b) Length of time at this location Mailing Address: 1909 11th Ave S Birmingham, AL 35205 (c) (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 2018 Year Type 150L 150M Taxpayer ID 470399 216 Owner of real estate for which license is desired <u>DM Drennen and Emma Houston Drennen</u> 6 (a) 1910 12th Ave S Birmingham, AL 35205 Address Give a full description of the premises for which a license is desired: New Construction ☐ Existing Structure ☑ (b) Description 2 1 Story Bldg Is establishment equipped with tables and chairs? Yes 🗵 No 🗌 If "Yes", how many? 12TBS/50CHS (c) 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 \( \square\) No \( \square\)

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

Cigarettes or Tobacco Products? Yes ☐ No ☒

(b) Ind 10 (a) A	dependent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes   No   No   No  No  No  No  No  No  No
	s kitchen apart from but convenient to the dining room? Yes  No
	s place of business habitually and principally used for providing food to the public? Yes \(\bigcap\) No \(\bigcap\)
(d) If	not kitchen equipped, is any type of food served? Yes \( \square\) No \( \text{If "Yes", explain } \)
(e) Ar	re these premises equipped for on premises consumption of liquor? Yes 🛛 No 🗌
(f) W	fill this business be operating primarily as a package store? Yes □ No ☒
	eating Capacity:
(h) Fo	r a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date Ending Date
(i) F8	Ending Date Ending Date Ending Date Ending Date Ending Dec. 31,
(1) (U)	a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting Ending
(k) Eve (1) (2) (3) (4) 11 (a) Doe: (b) How (c) Are i (d) Is but (e) Are r (f) For v	Sponsor
1VV - HPP	licant
Sworn and subs	pe Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has cation and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is interested in the business for which said license is requested.  Scribed before me this day of Signature of Affiant Signature of Revenue official on will not be processed until all fees due at the time of application are paid and receipts are on file.

# For Loning Yurposes Inly; Retail heer | Wine [On 107] Premise } City APPLICATIO

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 L	IKE TO DO?		
Register a new business (Pleas	se complete all se	ections)	
☐ Add a New Location or Tax Ty	pe to your curren	t registration (Please com	plete Sections 2 ,3, 5-10,12,13, and 14)
☑ Change Business Ownership of			
			2
			nplete Sections 2, 8-10, 12, 13 and 14)
Change the Location Address of			
☐ Change in Corporate Officers,	Members, or Parti	ners (Please complete Sec	ctions 2, 5, 7-9,, 11-13, and 14)
Provide a general "update" of	our current regis	tration information (Pleas	e complete all sections)
Section 2 - LEGAL NAME AND MAI (Note: If mailing address is a pos	ILING ADDRESS to	o which tax forms are to l treet address of the busin	be sent: ness must also be indicated.)
- 4.4	nvestment LLC		,
Attention:	HAESCHIEHT LTC		
Address: 1909 11th Ave S			
City: Birmingham		AL Zip (	Code: 35205
Area Code and Phone Number:	(917)442-1458		
Area Code and Fax Number; Name of Contact Person: Mei	4.7		
Name of Contact Person: Mei	Ц	Website Address:	
		website Address:	
Section 2 TRADE NAME AND LOC	ATION ADDRESS		
please see reverse side of this form. (I	mportant Note: A	or office in Birmingham. If y	you are registering more than one location,
Please select:		_	
Z Commercial E	2001121111611C	Private Residence	■No Physical Birmingham Location
Trade Name (d/b/a): Ikko Ramer	n & Sushi		
Attention:			
Address: 1909 11 <sup>th</sup> Ave S City: Birmingham	Chahas Al		
Area Code and Phone Number of Bu	State: AL	(205)203-4833	Zip: 35205
Area Code and Fax Number of Busin	ness Location:	(203)203-1033	
Name of Contact Person at Business	s Location:		
E-Mail:		Website Address:	
Section 4 – CHANGE OF OWNERSHI If applicable, this section MUST	P resulting from : be completed.	merger, purchase or acqu	isition of an existing business.
Former Owner:			•
Noble Investmen	nt 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 Fo	rmer Owner	(0.10) (4.0 1.10)	
		(917)442-1458	

Section 5 - TYPE OF OWNERSHIP	
Tax Certificate Form instruction short for a living	ease refer to the accompanying "General Information for Preparing an Application for
	MULICALION STILL THE PROPERTY OF THE PROPERTY
1. Alabama Corporation (Incorporated in A	Alabama) 1. Foreign Corporation (Incorporated in another state
2. Partnership (two or more owners)	Significant in mionical significance
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	y category.
	8. Home Occupation/Home Office
.1. Manufacturer	(Please Specify the type of occupation or office)
2. Contractor (Please Specify)	9. State Certified, State Regulated, or State Licensed
☐ 3. Wholesaler	Occupations, (Please Specify)  10. Transient Vendors/Special Events:
4. Retailer	Date(s) of the Event
5. Other (Please Specify)	Event Location
7. Day Care Center	
business activity as well as the product or service. I Manufacturing / Product: Automobiles. Note: This Revenue Service on Schedule c of Form 1040 for So	ccounts for the largest percentage of gross income. State the broad field of For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Information should be the same information as mention by the same information as mentions.
	le Proprietorships.
Activity: Restaurant	Product: Alcohol/Food
Activity: Restaurant Section 8 - FEDERAL TAY ID ALLIMPTE (ALLIAN)	Product: Alcohol/Food
Activity: Restaurant Section 8 - FEDERAL TAY ID ALLIMPTE (ALLIAN)	Product: Alcohol/Food
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE	Product: Alcohol/Food  EER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num	Product: Alcohol/Food  ER OF EMPLOYEES  (D) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)
Activity: Restaurant  Section 8 - FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 - COMMENCEMENT OF BUSINESS AC	Product: Alcohol/Food  EER OF EMPLOYEES  iD) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WILL Regio in Riveries	Product: Alcohol/Food  ER OF EMPLOYEES  D) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WILL Regio in Representation	Product: Alcohol/Food  EER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WILL Begin in Birminimter Date City of Birmingham Taxpayer ID App	Product: Alcohol/Food  EER OF EMPLOYEES  D) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month  DayYear  Died For: Month
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WILL Begin in Birmin Inter Date Business Activity Will Begin in Birmin Inter Date City of Birmingham Taxpayer ID Appetit City of Birmingham	Product: Alcohol/Food  ER OF EMPLOYEES  D) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)  TIVITY  Ingham: Month Day Year  Under Day Year  Which you are liable.
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WILL Begin in Birmin Inter Date Business Activity Will Begin in Birmin Inter Date City of Birmingham Taxpayer ID Appetit City of Birmingham	Product: Alcohol/Food  BER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.  ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Under For: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
Section 8 – FEDERAL TAX ID NUMBER / NUM	Product: Alcohol/Food  BER OF EMPLOYEES  D) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Died For: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number
Section 8 – FEDERAL TAX ID NUMBER / NUMBER / NUMBER / NUMBER / REQUIRE Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Number	Product: Alcohol/Food  BER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Sellers Use Tax Number
Activity: Restaurant  Section 8 – FEDERAL TAX ID NUMBER / NUMB Enter Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Num Section 9 – COMMENCEMENT OF BUSINESS ACTIVITY WIll Begin in Birmin Inter Date City of Birmingham Taxpayer ID Apprection 10 – Tax Liabilities Check the taxes for Sales Tax TAX IDENTIFICATION IN Section Use Tax  Consumers Use Tax  Lease Tax  Lease Tax	Product: Alcohol/Food  BER OF EMPLOYEES  (D) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Died For: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Sellers Use Tax Number
Section 8 – FEDERAL TAX ID NUMBER / NUM	Product: Alcohol/Food  BER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Consumers Use Tax Number  State of Alabama Lease Tax Number
Section 8 – FEDERAL TAX ID NUMBER / NUMBER / NUMBER / NUMBER / NUMBER / REQUIRE Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Number 87-4265902 Number 9 – COMMENCEMENT OF BUSINESS ACCIONATED TO BUSINESS	Product: Alcohol/Food  BER OF EMPLOYEES  D) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Under For: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Consumers Use Tax Number  State of Alabama Lease Tax Number  State of Alabama Lodgings Tax Number
Section 8 – FEDERAL TAX ID NUMBER / NUMBER / NUMBER / NUMBER / NUMBER / NUMBER / REQUIRE Federal Identification Number (REQUIRE Federal ID Tax Number 87-4265902 Number 87-4265902 Number 9 - COMMENCEMENT OF BUSINESS ACCIVITY WILL Begin in Birmin Inter Date Business Activity Will Begin in Birmin Inter Date City of Birmingham Taxpayer ID Applection 10 – Tax Liabilities Check the taxes for TAX IDENTIFICATION IDE	Product: Alcohol/Food  BER OF EMPLOYEES  ED) and the number of employees that will be working in Birmingham.  Ber of Employees in Birmingham (Required)  CTIVITY  Ingham: Month Day Year  Which you are liable.  NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)  State of Alabama Sales Tax Number  State of Alabama Consumers Use Tax Number  State of Alabama Lease Tax Number  State of Alabama Lodgings 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

This information REQUIRED. (Attach addi			
Li, Qi	TITLE Member	SOCIAL SEC	URITY NUMBER
Section 12 – CORPORATE RESIDENT AGEN	NT OR LOCAL MANAGER		
Address of Residence:			
Area Code and Phone Number of Residence	ate e:	Zip Code	
I understand and agree that the grantin Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules an ordinances, rules and regulations may result	1 - Contract will contract the	INTER VOIS 101 IN 101 JC SEIVING	all applicable Cu
also understand that disclosure of any false ssued pursuant to this application, or in the that it is unlawful for any person to commen not otherwise exempt therefrom under the Ordinance No. 97-183), without first having ontinue in any business, vocation, occupation, or professithout approval from the City of Birmingham	it in the revocation of any last or misleading information of the license if are provisions of the City of procured a license therefore the provision of the City of procured a license therefore the provision of the City of procured a license therefore the provision of profession after the production of profession after the profession after the profession that it is unlawful.	icense issued pursuant to to will result in automatic den- such has already been issue is, vocation, occupation or p of Birmingham Business Lie re, and that it is unlawful for the expiration of a license p of for any person to engage	ly with said law, his application. ial of any licensed. I understan profession, who iscense Tax Codor any person to previously issued in or continue is
also understand that disclosure of any false ssued pursuant to this application, or in the that it is unlawful for any person to commen not otherwise exempt therefrom under the Ordinance No. 97-183), without first having ontinue in any business, vocation, occupationate obtaining a new license. I further uny business, vocation, or professithout approval from the City of Birmingham ignetication.	it in the revocation of any last or misleading information are revocation of the license if ince or engage in any busines are provisions of the City of procured a license therefore allows the control of procured a license therefore allows the control of the city of procured a license therefore allows the control of profession after the inderstand that it is unlawfursion at any location within the Department of Planning, Education within the control of	icense issued pursuant to to will result in automatic den- such has already been issue is, vocation, occupation or p of Birmingham Business Lie re, and that it is unlawful for the expiration of a license p of for any person to engage	ly with said law; his application. ial of any licensed. I understand rofession, who is cense Tax Code or any person to previously issued in or continue is any person in or continue is any person.
also understand that disclosure of any false ssued pursuant to this application, or in the that it is unlawful for any person to commen not otherwise exempt therefrom under the Ordinance No. 97-183), without first having continue in any business, vocation, occupation, or profese fithout approval from the City of Birmingham.	ilt in the revocation of any la or misleading information e revocation of the license if nce or engage in any busines he provisions of the City of procured a license therefore the compartment of the compartment of Planning, Electric on the compartment of Planning on the compartment of Plannin	icense issued pursuant to to will result in automatic den- such has already been issue is, vocation, occupation or p of Birmingham Business Lie re, and that it is unlawful for the expiration of a license p of for any person to engage	ly with said lawnis application. ial of any licensed. I understand rofession, who is cense Tax Code or any person to previously issued in or continue ir by of Birmingham aling Division).

Please select: Commercial Establish  Trade Name (d/b/a):  Attention:		Private Residence		l Birmingham Location
Address:				
City:	State:		Zip:	· Harris
Area Code and Phone Number of Busines	s Location:			
Area Code and Fax Number of Business L Name of Contact Person at Business Loca	ocation:			
E-Mail:	tion:	541.4 10 11.1		
		Website Address:		
CITY OFFICE USE ONLY - Location				
STIT OFFICE USE ONLY - Location				
ZONING APPROVAL AND COMMENTS:	SIC OR	NATCS		
	BLIC	· ·· · · · · · · · · · · · · · · · · ·		
	TERRITO	DRY		
	ANNEX	DEPART NAME AND ADDRESS OF THE PARTY		
OME OCCUPATION CERTIFICATE EXECUTED	OTHER	DEPT PERMIT REQUIRED PERMIT		
YES NO NOT APPLICABLE	ARTICLE	S OF INCORPORATION		
	CEDERAL			
	J CERTIFIC	LATE OF AUTHORITY		
ocation	In Birmingham.		ore than one location	, please use this zoning approval.)
ease select: Commercial Establishme ade Name (d/b/a): tention:	in Birmingham. Important Ne	If you are registering more: All business location.  Private Residence	ore than one location ions are subject to	, please use this zoning approval.) irmingham Location
ease select: Commercial Establishme ade Name (d/b/a): tention: dress:	in Birmingham. (Important Ne	If you are registering more: All business location.  Private Residence	ore than one location ions are subject to	zoning approval.)
ease select: Commercial Establishme ade Name (d/b/a): tention: dress: y: States Code and Phone Number of Business I	in Birmingham. (Important No	If you are registering mote: All business locati  Private Residence	ore than one location ions are subject to	zoning approval.)
ease select: Commercial Establishme ade Name (d/b/a): tention: dress: y: state Code and Phone Number of Business Lea Code and Fax Number of Business Lea Code and Fax Number of Business Lea	in Birmingham. (Important No	If you are registering mote: All business locati  Private Residence	ore than one location ions are subject to  No Physical Bi	zoning approval.)
ease select: Commercial Establishme ade Name (d/b/a): tention: dress: sy: Star aa Code and Phone Number of Business Lea Code and Fax Number of Business Locatio me of Contact Person at Business Locatio	in Birmingham. (Important No	If you are registering mote: All business locati  Private Residence	ore than one location ions are subject to  No Physical Bi	zoning approval.)
ease select: Commercial Establishme ade Name (d/b/a): tention: ldress: cy: State a Code and Phone Number of Business Lea Code and Fax Number of Business Locatio me of Contact Person at Business Locatio	in Birmingham. (Important No	If you are registering mote: All business locati  Private Residence	ore than one location ions are subject to  No Physical Bi	zoning approval.)
ease select: Commercial Establishmentade Name (d/b/a): tention: dress: y: State Code and Phone Number of Business Location at Business Location at Business Location death.	in Birmingham. (Important No	If you are registering mote: All business locati  Private Residence	ore than one location ions are subject to  No Physical Bi	zoning approval.)
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ea Code and Phone Number of Business Lea Code and Fax Number of Business Location me of Contact Person at Business Location Mail:  TY OFFICE USE ONLY - Location	in Birmingham.  Important No.  Important No.  Int	If you are registering mote: All business location  Private Residence  Website Address:	ore than one location ions are subject to  No Physical Bi	zoning approval.)





# (CONTROLLED)

111	
I, Nable Investment Group LLP, holding City of Birmingham License ID#	
(corrent taxosver) All July LU , holding City of Birmingham	
License ID#	
Biscalise ID# (shedight City ID) located at 1909 IM AVE	
11110/104.04.04	
hereby agree (the state)	
hereby agree that said License be	
[[anctowed to 180 and 1 are 1 /	
addistrict to Demington Investment . LC	
provided (pm in oton Taylor (applicant)	51
from the local cont (applicant) obtains approval	
from the local governing body and meets all the requirements of the	
governing body and meets all the requirement	1
and the requirements of the	
ABC Board Tundonton L.	
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ABC Board. I understand that I am responsible for the operation of	
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this licensed establishment and for all taxes due until Remonator Trivestment obtains his/her license from the ARC Board (applicant)	1.1
Obtains his/her licence 5	レゾン
obtains his/her license from the ABC Board. (applicant)	
ž a	
I also understand that is a	

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.

APPLICANT DATE 5 12 22

MITHORS MALL TIMES

DATE 5 12 22

DATE 5 12 12

DATE 5 12 12



## 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.

3

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 Croup LL  Melling Li, General Partner	P (Tenant) 3/8/18 Date	Witness Print Name: Kaitlin Weber
Aly Properties, LLC (Prior Te	enant – New Guaranto	or)
Lin Z Li lis: Member	3  8 18 Date	Witness Print Name: Kathin Weber
Zhi Yu Yang (Continued Guard	antor)	
ZHI YU YAYU Zhi Yu Yang Its: Member	3 8 18 Date	Witness Print Name: Youthin Wills
D.M. Drennen and Emma Hou Memorial Trust of Saint Mary' By: WATTS REALTY CO., INC.	Character (1 4)	Levi Hilli Alk Dec

David Watts, CPM

## 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, iLP 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.

D.M. Drennen and Emma Houston Drennen Memorial Trust of Saint Mary's Church (Landlord)

By: Watts Realty Co., Inc. as Agent

David Watts CPM



## DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION

Remington investment LLC		
2. THIS FORM WAS PREPARED BY:		
Ellie Yu		
3. THE NAME AND STREET (NO PO BOXES) ADDRESS OF THE REG IN ALABAMA):	SISTERED AGENT LOCATED AT THE REGISTERED OFFICE (MUST E	ELGGA
Qi Ming Li 1909 11th Avenue S		
Birmingham, AL 35205 JEFFERSON		
MAILING ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFE	PLN' FD'ina Ground	
amedoback Diffe	The state of the s	
Oxford, AL 36203 TALLADEGA		
THE UNDERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEM CHECK ONLY IF THE TYPE APPLIES TO THE LIMITED LIABILITY CO		
NON-PROFIT LLC	SENST OTWIED.	
NON-PROFIT SERIES LLC		
PROFESSIONAL SERIES LLC		
PROFESSIONAL LLC COMPLYING WITH TITLE 10A, CHAPT	TER 5A, ARTICLE 8 (FOR SOS OFFICE USE ONLY)	
SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, A	ARTICLE 11 Alabama Sec. Of State	
	1	
	960-140 DT.T.	
	960-140 DLL Date 01/05/2022	
	Date 01/05/2022 Time 15:37:00	
	Date 01/05/2022 Time 15:37:00 File \$100.00	
	Date 01/05/2022 Time 15:37:00 File \$100.00 County \$100.00	
	Date 01/05/2022 Time 15:37:00 File \$100.00	

6. THE UNDERSIGN	NED SPECIFY 01/05/2022 15:37:52 ED ARE ANY OTHER MATTERS THE	AS THE EFFECTIVE DATE AND THE TIME OF FILING  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** 

X 24. Marrill

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

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

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 87-4265902. 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 Form 940

04/30/2022 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 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 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/mefbusproviders 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.

(IRS USE ONLY) 575A

01-05-2022 REMI B 999999999 SS-4

Keep this part for your records.

CP 575 A (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 A

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 01-05-2022 )

EMPLOYER IDENTIFICATION NUMBER: 87-4265902

FORM: SS-4

NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 hlaldalaladahahahallandalalalada

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

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

**AREA:** 31,682.96

**ACRES: 0.73** 

SUBDIVISION INFORMATION:

NAME BLK 770 RESUR NO 3

**BLOCK:** 770

**LOT:** 2-B

**OTHER: \$0.00** 

11-TH-AVE.S

**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&

**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:6/1	5/22	
Application	n Type: New - Restau	urant Retail Liquor
Subject:	Applicant's Entity S	Slice Crestline, LLC
		Slice Pizza & Brew
		101 Dunston Ave
Lounge Re Club Liquo Beer Off P Wine Off P Restaurant Special Ret Division 1 C	remise remise Retail Liquor sall License (under 30 days) tence Permit (customers)  Net Net Net Net Net Spranting of this license a dance Oppose	Lounge Retail Liquor Class II (Package Store   Club Liquor Class II (Private)   Beer On & Off Premise   Wine On & Off Premise   Special Retail License (over 30 days)   Post Table Permit   Division II Dance Permit   Division II Dance Permit   Ighborhood Association met on   Store   Association met on   Store   Association met on   Store   Association   The concerns of the Neighborhood re indicated as follows: (Please check one)   Support   No Recommendation   N
pplicant:	attended NA me	
		alerothy Miller President/Officer
		OPresident/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 dance or pool table license:	to the City	ty of Birmingham for an alcohol,	
Name of Applicant: Slice Crestline i	LLC		
Mailing Address: 725 29 <sup>th</sup> St S Birmingham, AL 3	5233		
Trade Name: Slice Pizza & Brew			
Location Address: 1101 Dunston Av	e		
Contact Number: (205)410	)-8776	Contact Person: Denise Koch	
New Application	on	Transfer	
Тур	oe of Licen	nse	
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)	☐ Clut ☐ Bee ☐ Win ☐ Spe	ounge Retail Liquor Class II (Package Store ub Liquor Class II (Private) eer On & Off Premise ine On & Off Premise pecial Retail Liquor (7 days or less) pecial Retail Liquor (under 30 days)	∌)
Division I Dance Permit (customer)	☐ Divi	vision II Dance Permit (entertainers)	
Pool Table Permit (send copy of applicat	ion)		
Kitchen equipped: yes 🗵 no 🗌	Number	er of table and chairs 8TBS/47CHS	
Date Applied: 6/15/22 Revenue Examiner: GS	Health De Communication Operation Melanie G	y: Fire Prevention Department unity Development on New Birmingham Genkin (pool tables) Thomas (PEP)	

## City of Birmingham

		Application licoholic Beverage	for License	
New Application 🖂		NT RETAIL LIQU		D
		(Enter Type of Licen		By: GS (Revenue Official)
	t or all partners	C nether Individual, Pass and members if partne	artnership, Corporation, LL(	
	(Attach	i separate sheet if i	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# Jason Brian Bajalieh	Member	Birmingham, AL	3023 Weatherton Dr Birmingham, AL 35223	
ALDL# Christopher Saleh Bajalieh	Member	Birmingham, AL	5016 10 <sup>th</sup> Ct S Birmingham, AL 35222	
3. Trade Name  Slice Pizza & Brew  4(a)  Location  1101 Dunston Ave  Exact Street Birmingham, Alabama Zip Code  (b)  Length of time at this location  (c)  Mailing Address: 725 29th St.:	35213	if on Highway, give d County ⊠Jefferso	etails as to Location on Shelby	
(d) Business Phone		:	Other Contact: (205)4	<u> 10-8776</u>
5. Name, trade name and License nun Trade name	nber of last o	r previous licensee:	Taxpayer ID	
6 (a) Owner of real estate for which 27 Inverness Center Pkwy Birmingham	ch license is d n, AL 35242	esired The Barber Co	ompanies Inc	
<ul> <li>(b) Give a full description of the prer Description  ☐ 1 Story Bldg</li> <li>(c) Is establishment equipped with to</li> </ul>				
<ol><li>Has a liquor, malt or brewed beverage If "Yes", explain fully</li></ol>				
8 (a) Pool Tables? Yes No Co (b) Video Games? Yes No Co (c) Vending Machines (Snacks/Sodas)?	Juke Box o	PYes □ No ☑ S r Slot Musical Equipmo ☑ Cigarettes or To	Standard Provider: ent? Yes  No  \( \) bacco Products? Yes  No	☑ Other?
9 (a) Will you allow dancing? Yes No (b) Independent Contract Employees (C)	If "Yes	": Customer/Patron?	Div I Exhibition/Performs	ance? 🔲 Div II

10 (a)	Are these premises kitchen equipped? Yes Mo 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 📋	
<b>(f)</b>	Will this business be operating primarily as a package store? Yes ☐ No ☒	
<b>(</b> 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 EVENT'S RETAIL LICENSE, not to exceed seven (7) days: Starting 9/9/22 (Note: Application must be filed 120 days in advance of event for which licenses	Ending <u>9/10/22</u> se is applied for)
(k)	Event Sponsor Phone Number  (1) Sponsor Letter of Designation? Yes No X  (2) Multi-Vendor Sponsorship? Yes No X  (3) Street Closing Required Yes No X  (4) Park Board Permission Yes No X	
(c) (d) (e) (f) 12. List including	Does the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes No If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political below the court records for law violations in the last ten (10) years, if any, of each person in the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not included reckless driving. If no record, state "None".)	lo    Athletic Other   Other
Name		Disposition of Case
the only	for the Alcoholic Beverage license requested by the aforementioned applicant hereby swear application and that all the statements therein and the facts set forth therein are true and operson interested in the business for which said license is requested.  In the statements therein and the facts set forth therein are true and coperson interested in the business for which said license is requested.  In the statements therein and the facts set forth therein are true and coperson interested in the business for which said license is requested.  In the statements therein and the facts set forth therein are true and coperson interested in the business for which said license is requested.  Signature of Affinity Signature of Revenue.	orrect, and that the applicant is

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

## For Loning Purposes Only: Restaurant Refail 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 se	ections)
_	t registration (Please complete Sections 2 ,3, 5-10,12,13, and 14)
Change Business Ownership of your current reg	sictration (Please complete all autions)
Change the Maining Address only for your currer	nt registration (Please complete Sections 2, 8-10, 12, 13 and 14)
	gistration (Please complete Sections 2, 3, 5-13, and 14)
Li Change in Corporate Officers, Members, or Parti	ners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
Provide a general "update" of your current regis	tration information (Please complete all sections)
Section 2 – LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the s	o which tax forms are to be sent: treet address of the business must also be indicated.)
Full Legal Name: Slice Crestline, LLC	
Attention: Address: 725 29th St S	
City Disaste share	AL Zip Code: 35233
Area Code and Phone Number: (205)410-8776	AL Zip Code: 35233
Area Code and Fax Number:	
Name of Contact Person: Denise Koch	
E-Mail: dlovoykoch@gmail.com	Website Address:
( The second sec	
Please select: Commercial Establishment  Trade Name (d/b/a): Slice Pizza & Brew	of office in Birmingham. If you are registering more than one location, all business locations are subject to zoning approval.)  Private Residence No Physical Birmingham Location
Attention:	
City: Birmingham State: AL	Ti Open a m
Area Code and Phone Number of Business Location: Area Code and Fax Number of Business Location:	Zip: <u>35213</u>
Name of Contact Person at Business Location:	
E-Mail:	Website Address:
Section 4 - CHANGE OF OWNERSHIP resulting from notificable, this section MUST be completed.	merger, purchase or acquisition of an existing business.
former Owner:	
rade Name (d/b/a)	
failing Address of Former Owner	
ddress (es) of Former Location(s)	
rea Code and Phone Number of Former Owner:	

			The same state of
Section 5 TYPE OF OWNERSHIP Please indicate the form of organization. NOTE: Please refer Tax Certificate Form instruction sheet for a listing of suppr	r to the accompanying	"General Information t	in Prenering on Analysis of
or supp	Actucates documentali	on to be included with thi	s application.
1. Alabama Corporation (Incorporated in Alabama	1)	1. Foreign Corporation	n (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 categ		Occumation / Laws - Oc	-
1. Manufacturer	(Please Sp	Occupation/Home Of pecify the type of occupation or	TICE raffice)
2. Contractor (Please Specify)	Occupa	tions, (Please Specifi	ated, or State Licensed
☐ 3. Wholesaler	☐ 10. Trans	ient Vendors/Special	Events
4. Retailer	Date(s Event	i) of the Event: Location:	
5. Other (Please Specify)			
7. Day Care Center			
Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PR	SUDJECT		
You should indicate the one business activity that accounts business activity as well as the product or service. For exa Manufacturing / Product: Automobiles. Note: This inform Revenue Service on Schedule c of Form 1040 for Sole Prop	s for the largest percample-Activity: Who	entage of gross income lesale Sales / Product: same information as re	e. State the broad field of Pharmaceuticals OR Activity: quired by the Internal
Activity: Restaurant	Product:	Alcohol/Food	
Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and	EMPLOYEES  d the number of e	mplovees that will h	e working in Rirmingham
Fader I vo en la constant de la cons		ningham (Required)	- Working in Diffiningnam.
Section 9 - COMMENCEMENT OF BUSINESS ACTIVIT	v		
Enter Date Business Activity Will Begin in Birmingham			
Enter Date City of Birmingham Taxpayer ID Applied F	or: Month	Day Day	Year Year
Section 10 - Tax Liabilities Check the taxes for which  Sales Tax  TAX IDENTIFICATION NUMBER  TAX IDEN			
TO ADEIGH TO THE PROPERTY OF T			e" if no number assigned)
Sellers Use Tax	State of Alabama	Sales Tax Number	
Consumers Use Tax	State of Alabama	Sellers Use Tax Num	nber
Lease Tax	State of Alabama	Consumers Use Tax	Number
	State of Alabama	Lease Tax Number	-
Lodgings Tax		Lodgings Tax Number	er

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

APPLICATION FOR TAX	CERTIFICATE (CIT	Y OF BIRMINGHAM, ALABAM	Α1
No.		TO THE PARTY OF TH	7

3

■ Business License Tax

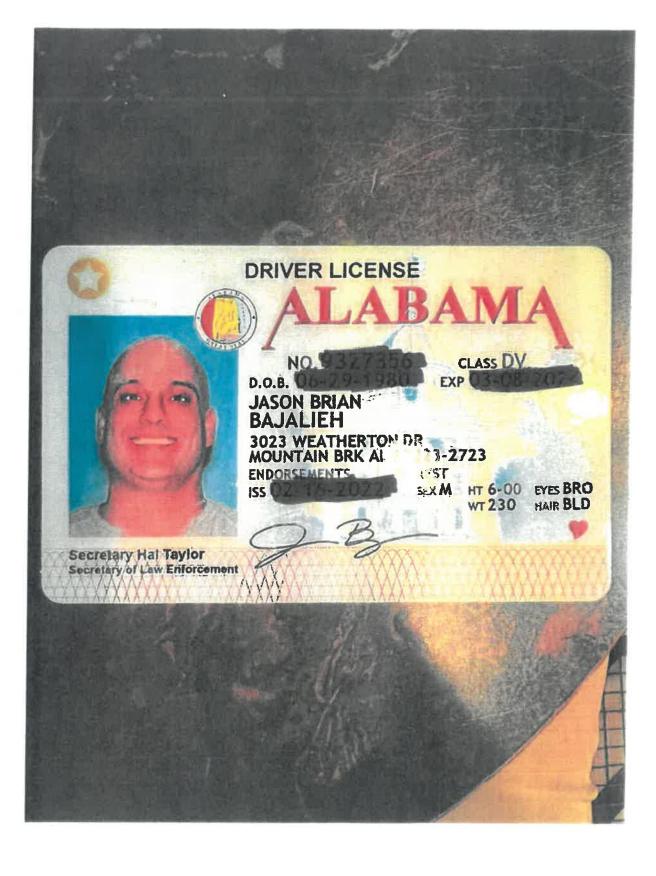
State of Alabama Unemployment Tax Number

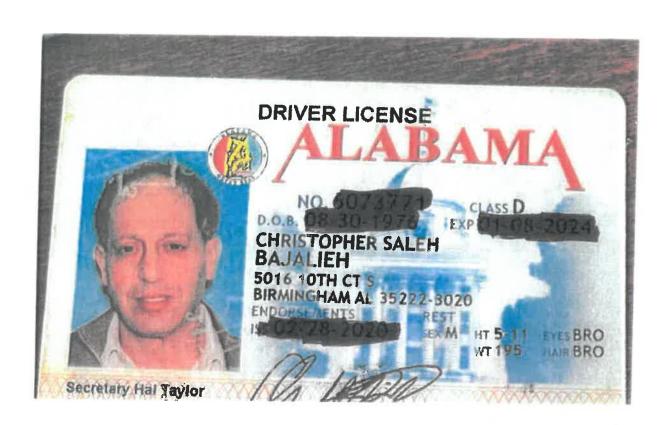
If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

#### Section 11 OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS

Bajalieh, Jason	TITLE	SOCIAL SECURITY NUMBER
Bajalieh, Christopher	Member Member	12.519.708 12.512.71.61
Section 12 - CORPORATE RESIDENT AGEN	IT OR LOCAL MANAGER	
Address of Residence:		
City: Sta		Zip Code
Area Code and Phone Number of Residence	e:	
of my knowledge and bellef all questions a understand and agree that the granti- irmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules are relinances, rules and regulations may results ounderstand that disclosure of any false is understand that disclosure of any false is understand that disclosure of any false is understand that disclosure of any false is unlawful for any person to comme of otherwise exempt therefrom under to otherwise exempt therefrom under to otherwise in any business, vocation, occur	answered are true, correct, aring of this license requires a laws, as well as with all conditions, and that any ult in the revocation of any lites or misleading information of the license if the provisions of the City of the provision of the city of the provision, or profession after the understand that it is unlawfulession at any location within the	norized to complete this form and to the best of complete statements, made in good faith my compliance with all applicable City of ditions set forth in any and all applicable Cit failure or refusal to comply with said laws cense issued pursuant to this application. will result in automatic denial of any license such has already been issued. I understance, vocation, occupation or profession, who is firmingham Business License Tax Code re, and that it is unlawful for any person to experimental to the corporate limits of the City of Rimingham
		ic corporate mines of the city of birthinghan
of Birmingha of Birmingha	am Department of Planning, En	ngineering, and Permits (Zoning Division).
igned: Signed: Completing This Application	am Department of Planning, En	ngineering, and Permits (Zoning Division).
igned: Completing his Application the Name of the Person Completing This Application was a second completing This Application to the Name of the Person Completing This Application was a second completing This Application to the Name of the Person Completing This Application to the Name of the	am Department of Planning, En	ngineering, and Permits (Zoning Division).  Date  Or of Person Completing Application
igned: Completing his Application the Name of the Person Completing This Application was a second completing This Application to the Name of the Person Completing This Application was a second completing This Application to the Name of the Person Completing This Application to the Name of the	am Department of Planning, En	ngineering, and Permits (Zoning Division).
igned: Signed: Completing This Application	am Department of Planning, En	Date  Online Division).
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igned:  igned:	am Department of Planning, Ender Dep	ngineering, and Permits (Zoning Division).
igned:  Signed:  Sign	am Department of Planning, Ender Dep	Date  Online Division).
igned:  Fint the Name of the Person Completing This Application  TY OFFICE USE ONLY Location  ZONING APPROVAL AND COMMENTS:	SIC OR NAICS BLIC TERRITORY ANNEX HEALTH DEPT PERMIT	Date  Online Division).
Print the Name of the Person Completing This Application  TY OFFICE USE ONLY Location  ZONING APPROVAL AND COMMENTS:  DME OCCUPATION CERTIFICATE EXECUTED	SIC OR NAICS BLIC TERRITORY ANNEX HEALTH DEPT PERMIT OTHER REQUIRED PERMIT	Date  Date  Coning Division).  Application
Print the Name of the Person Completing This Application  TY OFFICE USE ONLY Location  ZONING APPROVAL AND COMMENTS:	SIC OR NAICS BLIC TERRITORY ANNEX HEALTH DEPT PERMIT	Date  Date  On Person Completing Application

Please select: Commercial Establishme	ent [	Private Residence	☐ No P	hysical Birmingham Locatio
	_			rrysical birringham Eocad
Trade Name (d/b/a):				
Address:				
	ate:		7:	
Area Code and Phone Number of Business			Zip:	
rea Code and Fax Number of Business Lo				
lame of Contact Person at Business Locati	on:			
-Mail:		Website Address:		
41				
ITY OFFICE USE ONLY - Location				
ZONING APPROVAL AND COMMENTS:	SIC OR N	AICS		
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	TERRITO	RY		
		DEPT PERMIT		
OME OCCUPATION CERTIFICATE EXECUTED		EQUIRED PERMIT		
YES NO NOT APPLICABLE		OF INCORPORATION		
		ATE OF AUTHORITY	OPPERED !	
ction. Attach additional sheets if necessary. (1	TAX FORM	If you are registering m	ore than one li	ocation, please use this ect to zoning approval.
cation. Attach additional sheets if necessary. (I cation  ease select: Commercial Establishmer  ade Name (d/b/a): tention: dress:  y: Stat	TAX FORM  Birmingham.  Important Not  at	If you are registering mote: All business location  Private Residence	ore than one lions are subj	ect to zoning approval.
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ease select: Commercial Establishmer ade Name (d/b/a): tention: Idress: by: State ea Code and Phone Number of Business Location and Contact Person at Business Location Mail:  TY OFFICE USE ONLY - Location	TAX FORM  Birmingham. Important Not  at   e: ocation: ation: n:  SIC OR NAI BLIC	If you are registering mote: All business location  Private Residence  Website Address:	ore than one le	ect to zoning approval
ease select: Commercial Establishmer ade Name (d/b/a): tention: Idress: State a Code and Phone Number of Business Location and Fax Number of Business Location Mail:	TAX FORM  Birmingham. Important Not  e: e: ocation: ation: n:  SIC OR NAI BLIC TERRITORY ANNEX	If you are registering mobe: All business location  Private Residence  Website Address:	ore than one le	ect to zoning approval,
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ease select: Commercial Establishmer rade Name (d/b/a): tention: didress: State a Code and Phone Number of Business Location and Fax Number of Business Location and Contact Person at Business Location Mail:  TY OFFICE USE ONLY - Location  ZONING APPROVAL AND COMMENTS:  ME OCCUPATION CERTIFICATE EXECUTED	TAX FORM  Birmingham. Important Not  e: e: ocation: ation: n:  SIC OR NAI BLIC TERRITORY ANNEX HEALTH DE OTHER REC	If you are registering mobe: All business location  Private Residence  Website Address:  ICS  OUTPERMIT QUIRED PERMIT	ore than one le	ect to zoning approval
trention: ddress: tty: Stat rea Code and Phone Number of Business Loca rea Code and Fax Number of Business Loca rea Code and Fax Number of Business Loca rea of Contact Person at Business Location Mail: TY OFFICE USE ONLY - Location	TAX FORM  Birmingham. Important Not  at   e: cocation: ation: n:  SIC OR NAI BLIC TERRITORY ANNEX HEALTH DE OTHER REC ARTICLES C	If you are registering mobe: All business location  Private Residence  Website Address:	ore than one le	ect to zoning approval





8 to 18 to 1



## 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.

Keep this part for your records. CP 575 A (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 A

9999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-14-2021 ( ) -

EMPLOYER IDENTIFICATION NUMBER: 87-3106753
FORM: 5S-4 NOBOD

NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 

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

#### 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 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

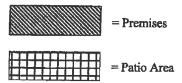
#### WITNESSETH:

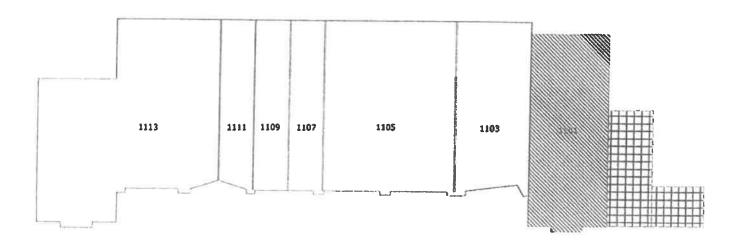
### ARTICLE 1 DEFINITIONS

- 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

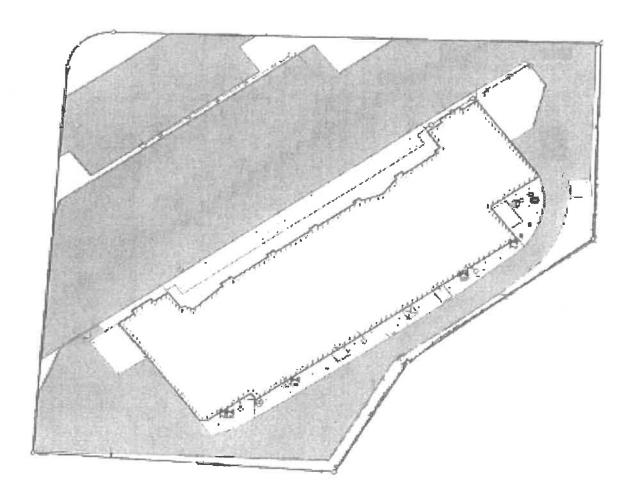
"Premises": that certain space located in the Shopping Center (without basement, balcony, or mezzanine) as shown by cross-hatched lines on Exhibit A.





### EXHIBIT B

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

**AREA:** 49,373.57

**ACRES: 1.13** 

SUBDIVISION INFORMATION:

NAME CRESTLINE PARK

**BLOCK: 8** 

LOT:

HAGGOD S

**OTHER: \$0.00** 

3

DUNS TON AVE

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: CR1

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: Urba	n Impact Inc		
Mailing Address: 1721 4 <sup>th</sup> Birmingh	Ave N nam, AL 35203		
Trade Name: Taste of 4 <sup>th</sup>	Avenue Jazz Festival		
Location Address: 4th Ave	N Between 16 <sup>th</sup> and 1	8 <sup>th</sup> 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 (Fraterna Beer Off Premise Wine Off Premise Restaurant Retail Liquor Special Retail Liquor (over 30	I)	e Retail Liquor Class II (Package Store) iquor Class II (Private) On & Off Premise On & Off Premise Il Retail Liquor (7 days or less) Il Retail Liquor (under 30 days)	
Division I Dance Permit (cust		n 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	Health Depa Community Operation No	y Development ew Birmingham kin (pool tables)	

## City of Birmingham

	A1	Application 1	for	
New Application	AI	coholic Beverage	License	
	PECIAL EV	ENTS RETAIL-TY	PE 140/7 DAYS	By: GS
		(Enter Type of Licen	se Applied For)	(Revenue Official
	t or all partners	ether Individual, Pa and members if partne	artnership, Corporation, LL rship or assoc., or all officers and	C, LLP, etc)
Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	separate sheet if r Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# ALDL# Ivan Wesley Holloway	Executive Director	Birmingham, AL	809 Northcrest Dr Birmingham, AL 35235	18 years
Note: If a corporation, LLC or LLP, give place  Book 291-435 Page: 1 of 1  Foreign Corporation: certificate of Author	Date:	corporation or issuance  11/18/2013  (get copy of orig	County: Jeffers	
Trade Name				
	Number, or it	f on Highway, give de	etails as to Location	_
(b) Length of time at this location				
(c) Mailing Address: 1721 4th Ave	N Birmingh	am, AL 35203		
(d) Business Phone	Fax:		Other Contact: (205)2	43-7913
<ol> <li>Name, trade name and License num Trade name</li> </ol>	nber of last or Year	previous licensee:	Taxpayer ID	
6 (a) Owner of real estate for which 710 N 20 <sup>th</sup> St Birmingham, AL 35203	h license is de	esired City of Birmin	gham	
(b) Give a full description of the pren Description ☑ Street Festival				
<ul><li>(c) Is establishment equipped with to</li><li>7. Has a liquor, malt or brewed beverage If "Yes", explain fully</li></ul>				
8 (a) Pool Tables? Yes No S Co (b) Video Games? Yes No S (c) Vending Machines (Snacks/Sodas)?	oin Operated? Juke Box or Yes No	Slot Musical Equipme	tandard Provider: ent? Yes \( \) No \( \) bacco Products? Yes \( \) No	☑ Other?
9 (a) Will you allow dancing? Yes \(\sime\) No (b) Independent Contract Employees (D	☑ If "Yes"	: Customer/Patron?	Dist T Exhibition (Destaura	

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 \( \text{No} \) \( \text{No} \) \( \text{If "Yes", explain } \)	
<b>(</b> e)	Are these premises equipped for on premises consumption of liquor? Yes \( \square\) No \( \square\)	
<b>(f)</b>	Will this business be operating primarily as a package store? Yes ☐ No ☐	
<b>(</b> g)	Seating Capacity:	
(h)	For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date	Ending Date
	For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date	
	For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting 8/27/22 (Note: Application must be filed 120 days in advance of event for which licens	Ending 0 (27 (22
(	Event Sponsor Phone Number  (1) Sponsor Letter of Designation? Yes No	•
(b) (c) // (d) 1 (e) // (f) F	Does the club charge and collect dues from elected members?  How many paid-up members are there in the club?  Are regular meetings held? Yes  No  If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political  below the court records for law violations in the last ten (10) years, if any, of each person in the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not inclid reckless driving. If no record, state "None".)	o
Name NO - A	Violation Charged Name of Court Date D	isposition of Case
the only pe	for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears application and that all the statements therein and the facts set forth therein are true and coverson interested in the business for which said license is requested.  It is a subscribed before me this and the facts set forth therein are true and coverson interested in the business for which said license is requested.  It is a subscribed before me this and the facts set forth therein are true and coverson interested in the business for which said license is requested.  Signature of Affia  Signature of Revenue	20 20
This appli	ication will not be processed until all fees due at the time of application are paid a	

## Special Events Retail-Type 140/2 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?			
THE HOULD TOO LIKE TO DO!			
Register a new business (Please complete all se	ections)		
Add a New Location or Tax Type to your curren		mete Se	ections 2 3 5-10 12 12 and 1/
☐ Change Business Ownership of your current reg	istration (Please complete	a all cort	ione)
☐ Change the Mailing Address only for your curren	t registration (Please con	onlete C	nding 3 0 40 45 45 45
Change the Location Address of your current re-	rictration (Please complete	inpiece Si	ections 2, 8-10, 12, 13 and 14)
Change the Location Address of your current re	gistration (Please complet	re Sectio	ns 2, 3, 5-13, and 14)
Change in Corporate Officers, Members, or Partr	ters (Please complete Sec	ctions 2,	5, 7-9,, 11-13, and 14)
Provide a general "update" of your current regist	tration information (Pleas	e comple	ete all sections)
Section 2 LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the structure of the second section of the section of the section of the second section of the section of the second section of the	o which tax forms are to i treet address of the busin	be sent: ness mus	st also be indicated.)
Attention:			
Address: 1721 4th Ave N			
Asses Co. J. A. Di	AL Zip C	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 please see reverse side of this form. (Important Note: All Please select: Commercial Establishment	Private Residence	subject t	egistering more than one location, to zoning approval.)  Display the proval of the pro
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest ttention:	Private Residence	subject t	o zoning approval.)
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Authorition:  ddress: 4th Ave N Between 16th and 18th St N	Private Residence	subject t	o zoning approval.)
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest Attention:  ddress: 4th Ave N Between 16th and 18th St N  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest Attention:	Private Residence		o zoning approvai.)
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Attention:  Address: 4th Ave N Between 16th and 18th St N  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Attention:  Address: 4th Ave N Between 16th and 18th St N  Trace Code and Phone Number of Business Location:	Private Residence		o Physical Birmingham Location
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest ttention: ddress: 4th Ave N Between 16th and 18th St N tity: Birmingham State: AL rea Code and Phone Number of Business Location: rea Code and Fax Number of Business Location:	Private Residence		o Physical Birmingham Location
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Attention:  Address: 4th Ave N Between 16th and 18th St N  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Attention:  Address: 4th Ave N Between 16th and 18th St N  Trace Code and Phone Number of Business Location:	Private Residence		o Physical Birmingham Location
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Ittention:  ddress: 4th Ave N Between 16th and 18th St N  Ity: Birmingham State: AL  rea Code and Phone Number of Business Location:  rea Code and Fax Number of Business Location:  ame of Contact Person at Business Location:  Mail:  ection 4 CHANGE OF OWNERSHIP resulting from the	Private Residence	□No	o Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Ittention:  ddress: 4th Ave N Between 16th and 18th St N  Ity: Birmingham State: AL  rea Code and Phone Number of Business Location:  rea Code and Fax Number of Business Location:  ame of Contact Person at Business Location:	Private Residence	□No	o Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Ittention:  ddress: 4th Ave N Between 16th and 18th St N  Ity: Birmingham State: AL  rea Code and Phone Number of Business Location:  rea Code and Fax Number of Business Location:  ame of Contact Person at Business Location:  Mail:  ection 4 CHANGE OF OWNERSHIP resulting from the	Private Residence	□No	o Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest Attention:  ddress: 4th Ave N Between 16th and 18th St N  ity: Birmingham State: AL  rea Code and Phone Number of Business Location:  rea Code and Fax Number of Business Location:  ame of Contact Person at Business Location:  Mail:  ection 4 CHANGE OF OWNERSHIP resulting from many papers.	Private Residence	□No	o Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest Attention: Address: 4th Ave N Between 16th and 18th St N  Trade Name of Avenue Jazz Fest Attention: Address: 4th Ave N Between 16th and 18th St N  Trade Name of Business Location: Trade Name of Contact Person at Business Location: Trade Name of Contact Person at Business Location:  Trade Name of Contact Person at Business Location:  Trade Name of Contact Person at Business Location:  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Attention:  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest  Trade Name (d/b/a): Taste of	Private Residence	□No	o Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Taste of 4th Avenue Jazz Fest Attention:  ddress: 4th Ave N Between 16th and 18th St N  ity: Birmingham State: AL  rea Code and Phone Number of Business Location:  rea Code and Fax Number of Business Location:  ame of Contact Person at Business Location:  Mail:  ection 4 - CHANGE OF OWNERSHIP resulting from many applicable, this section MUST be completed.  Dormer Owner:  ade Name (d/b/a)	Private Residence	□No	o Physical Birmingham Location  35203

Section 5 - TYPE OF OWNERSHIP Please indicate the form of organization. NOTE: Please refer to Tax Certificate Form" instruction sheet for a listing of supplen	the accompanying "General cental documentation to be in	ul Information for P neluded with this app	reparing an Application for dication.
1. Alabama Corporation (Incorporated in Alabama)	1. Forei	ign Corporation (In	corporated 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 categor  1. Manufacturer	8. Home Occupa	type of occupation or offic	œ)
2. Contractor (Please Specify)	Occupations, (	(Please Specify)	ents: Taste of 4 <sup>th</sup> Avenue
3. Wholesaler	Jazz Festival		
4. Retailer	Date(s) of th	e Event: 8/27/22	ween 16 <sup>th</sup> and 18 <sup>th</sup> St N
5. Other (Please Specify)	Event rocade	on: 4- Ave in ben	ween 10" and 18" St N
6. Food/Eating Establishment			
7. Day Care Center			
Section 7 – PRINCIPAL BUSINESS ACTIVITY AND PRO You should indicate the one business activity that accounts to business activity as well as the product or service. For exam Manufacturing / Product: Automobiles. Note: This informal Revenue Service on Schedule c of Form 1040 for Sole Propri	or the largest percentage ple-Activity: Wholesale S	Cales / Product: Dh	armacouticale OD Activitus
Activity: Special Event	Product: Musi	c Festival/Alcohol	I/Vendors
Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and	EMPLOYEES the number of employ	ees that will be v	vorking in Birmingham.
Federal ID Tax Number 63-0795551 Number of I	Employees in Birmingh	am (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 Fo		Day	Year
Section 10 – Tax Liabilities Check the taxes for which	you are liable.	•	
Sales Tax TAX IDENTIFICATION NUMBER		Oth /Meile Wilson	
_	RS NOW ASSIGNED TO Y	oo, (write wone	if no number assigned)
☐ Sellers Use Tax	RS NOW ASSIGNED TO Y State of Alabama Sales		if no number assigned)
☐ Sellers Use Tax		s Tax Number	
☐ Sellers Use Tax ☐ Consumers Use Tax ☐ Lease Tax	State of Alabama Sales	s Tax Number rs Use Tax Numb	er
☐ Sellers Use Tax ☐ Consumers Use Tax ☐ Lease Tax	State of Alabama Sales State of Alabama Selle	s Tax Number rs Use Tax Numb umers Use Tax N	er

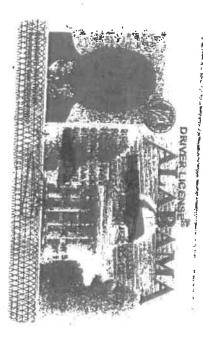
If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license.

■ Business License Tax

State of Alabama Unemployment Tax Number

### Section 11 - OWNER, PARTNERS, MEMBERS, OR CORPORATE OFFICERS

NAME Holioway, Ivan	TITLE Executive Director	SOCIAL SECURITY NUMBER
Section 12 – CORPORATE RESIDENT AGEN Name:	T OR LOCAL MANAGER	
Address of Residence: City: Sta Area Code and Phone Number of Residence		Zip Code
Section 13- STATEMENT OF ACKNOWLEDG	EMENT AND ACCEPTANCE OF (	CONDITIONS -Please read carefully, then
I declare, under the penalty of making a fall of my knowledge and belief all questions a I understand and agree that the grantir Birmingham Tax Code provisions, and state of Birmingham Laws, Ordinances, Rules and ordinances, rules and regulations may result also understand that disclosure of any falso issued pursuant to this application, or in the that it is unlawful for any person to commende otherwise exempt therefrom under the (Ordinance No. 97-183), without first having continue in any business, vocation, occup without obtaining a new license. I further any business, vocation, occupation, or professithout approval from the City of Birmingham	nswered are true, correct, and ag of this license requires my laws, as well as with all condition and Regulations, and that any fact the revocation of any licent e or misleading information will e revocation of the license if such the provisions of the City of ag procured a license therefore, ation, or profession after the understand that it is unlawful for ssion at any location within the	complete statements, made in good faith.  y compliance with all applicable City of  ions set forth in any and all applicable City  illure or refusal to comply with said laws,  nse issued pursuant to this application. I  I result in automatic denial of any license  ch has already been issued. I understand  vocation, occupation or profession, who is  Birmingham Business License Tax Code  , and that it is unlawful for any person to  expiration of a license previously issued  or any person to engage in or continue in  corporate limits of the City of Birmingham
Signed of his	,	-2/-22
Signature of Person Completing This Applica	/	Date 05-5688
Print the Name of the Person Completing This Ar		of Person Completing Application
CITY OFFICE USE ONLY - Location		
ZONING APPROVAL AND COMMENTS:	SIC OR NAICS BLIC TERRITORY	
HOME OCCUPATION CERTIFICATE EXECUTED YES NO NOT APPLICABLE	ANNEX HEALTH DEPT PERMIT OTHER REQUIRED PERMIT ARTICLES OF INCORPORATION CERTIFICATE OF AUTHORITY	



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### Alabama Secretary of State



	BAN 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	
1 000	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.

#### **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.



### 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

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

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

STATE OF ALABAMA )	
JEFFERSON COUNTY )	
For the sole consideration of being allowed to	Taste of 4th Avenue Jazz Festival O organize, sponsor, or hold the
_	(Name of Event)
employees from any and all claims, demands, dama	in Birmingham, Alabama, the harmless the City of Birmingham, its agents, servants and ges, actions, causes of actions or suits of any kind or nature ste of 4th Avenue Inc.
_	(Sponsoring Organization)
known and unknown, both to persons and property, Taste of 4th Avenue Jazz Festival	agents or employees, particularly on account of all injuries, which may result or may in the future develop from the
(Name of Event) Saturday, August 27, 2022 on or about the (Date(s) of Event) allowed by Alabama Law.  The undersigned hereby declares that the terfully understood and voluntarily accepted.	, at or near Birmingham, Alabama to the extent
rully understood and voluntarily accepted.	Taste of 4th Avenue Jazz Festival
	(Sponsoring Organization) Carla Youngblood By:
	(Applicant's Name)
	Its:(Applicant's Title)
	March 16, 2022 Date:
	(Date of Signature)

# BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT SPECIAL EVENT EMS PLAN

### Music/Jazz Festival Type of Event: \_\_\_\_\_ 1. 4th Avenue Historic Business District II. Location of Event: 2500-3000 A. Anticipated Attendance: \_\_\_\_ 12-10pm B. Length of Event: \_\_\_\_\_ C. Date(s) of Event: \_\_\_\_\_ Taste of 4th Avenue Jazz Festival 111. Sponsoring Agency: \_\_\_\_\_ A. Address: 205-243-7913 B. Telephone Contact: \_\_\_\_\_ Medical Direction Provided By: \_\_\_\_\_ IV. Emergency Medical Personnel: (Attach additional sheet to list names and qualifications of personnel) V. VI. Plot Plan: Attachment with description of facilities. Deployment Map: Attachment with description of area of involvement. VII. Text messages and loud speakers Describe Emergency Communications System: VIII. Loud speakers Method of Announcing Notification for Location of Emergency: IX.

18th Street N TEAR DOWN BEGINS Clase 4th Avenue Whetween 16th and 17th Streets
Gates open VENDOR SET UP STAGE SET UP Clase 4th Avenue M between 17th and 18th Streets Saturday, 25 & ugust 2018, Street N between 3rd and 5th Avenues 5th Avenue N TASTE OF 4TH AVENUE JAZZ FESTIVAL Streets reopen to traffic Show starts Show ends Street N Friday 24 August 2018 2:00 pm 12:00 pm 10:00 pm 11:59 pm 2:00 pm

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

The following applicant has applicance or pool table license:	plied to the City	of Birmingham for an alcohol,
Name of Applicant: Slice, LLC		
Mailing Address: 213 Richard Ar Birmingham, A	rington Jr Blvd AL 35233	S
Trade Name: Birmingham Artwa	ılk	
Location Address: 20th St N from	າ 1 <sup>st</sup> Ave N to 4	th Ave N & Forstall Parking Lot
Contact Number: (205)	)410-8776	Contact Person: Denise Koch
⊠ New Appli	cation	Transfer
	Type of License	e
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)	☐ Club ☐ Beer ☐ Wine ☒ Speci	ge Retail Liquor Class II (Package Store) Liquor Class II (Private) On & Off Premise On & Off Premise al Retail Liquor (7 days or less) al Retail Liquor (under 30 days)
☐ Division I Dance Permit (customer)		on II Dance Permit (entertainers)
Pool Table Permit (send copy of appl	lication)	
Kitchen equipped: yes ☐ no ☒	Number o	of table and chairs Multiple
Date Applied: 6/15/22 Revenue Examiner: GS	Health Dep Communit Operation N	ty Development lew Birmingham nkin (pool tables)

		City of Birming Application f Icoholic Beverage	for	
New Application		/ENTS RETAIL-TY		By: GS
		(Enter Type of Licen		(Revenue Official
Name of Applicant (s) Slice,     Name and address of individual applicant	Indicate what or all partners	nether Individual, Pass and members if partne a separate sheet if r	artnership, Corporation, LLC	c, LLP, etc) directors, if corporation
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# Jason Brian Bajalieh	Member	Birmingham, AL	4342 Clairmont Ave S Birmingham, AL 35222	
ALDL# Christopher Saleh Bajalieh	Member	Birmingham, AL	5016 10 <sup>th</sup> Ct S Birmingham, AL 35222	
Book LR201007 Page: 1962 Foreign Corporation: certificate of Author  3. Trade Name Birmingham Artwal  4(a) Location 20th St N from 1st A Exact Street Birmingham, Alabama Zip Code  (b) Length of time at this location  (c) Mailing Address: 213 Richard	k Live N to 4 <sup>th</sup> A Number, or 35203	if on Highway, give do County ⊠Jefferso	g Lot etails as to Location on Shelby	on
(d) Business Phone			Other Contact: (205)4:	<u>10-8776</u>
Name, trade name and License num     Trade name  Owner of real estate for which	Year	Туре	Taxpayer ID	
6 (a) Owner of real estate for whice 710 20 <sup>th</sup> St N Birmingham, AL 35203	th license is d	esired City of Birmin	gham	
<ul> <li>(b) Give a full description of the prer Description ☐ Outdoor Festiva</li> <li>(c) Is establishment equipped with the control of the prer Description ☐ Outdoor Festiva</li> </ul>				
7. Has a liquor, malt or brewed beverage If "Yes", explain fully				☐ Yes   ☑No
8 (a) Pool Tables? Yes No Co (b) Video Games? Yes No (c) Vending Machines (Snacks/Sodas)?	luke Boy o	Yes □ No ☑ S r Slot Musical Equipmo ☑ Cigarettes or To	not? Vec 🔲 No 🔯	☑ Other?
9 (a) Will you allow dancing? Yes No (b) Independent Contract Employees (D	☑ If "Yes	": Customer/Patron? and, Bartenders, Serv	☐ <b>Div I</b> Exhibition/Performa	ince? Div II

10 (a)	Are these premises kitchen equipped? Yes	ot Applicable 🛛	
(b)	Is kitchen apart from but convenient to the dining room? Y	es No	
(c)	Is place of business habitually and principally used for provi	ding 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) <sub>*</sub>	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 seve (Note: Application must be filed 120 days in advan	n (7) days: Starting 9/9/22 ce of event for which licer	Ending <u>9/10/22</u> nse is applied for)
	Event Sponsor Phone Number  (1) Sponsor Letter of Designation? Yes No X  (2) Multi-Vendor Sponsorship? Yes No X  (3) Street Closing Required Yes No X  (4) Park Board Permission Yes No X		
(b) (c) (d) (e) (f)	Does the club charge and collect dues from elected members. How many paid-up members are there in the club?  Are regular meetings held? Yes No If so, when?  Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, for what purpose is the club organized and operated? Social below the court records for law violations in the last ten (10)	Yes And ballot? Yes And ballot? Yes And Patriotic Political	No   No   Athletic Other   Other
iriciuding	the manager, whether as sole applicant, partner, officer, mend reckless driving. If no record, state "None".)	nber, or landlord. (Do not in	clude traffic violations, except
Name NJ-A	Violation Charged Name of Cour		Disposition of Case
the only p	for the Alcoholic Beverage license requested by the aforement application and that all the statements therein and the facts operson interested in the business for which said license is required subscribed before me this	set forth therein are true and	ars or affirms that he or she has correct, and that the applicant is
This appl	lication will not be processed until all fees due at the t	Signature of Aff	nue Official
	and an ices are at the	me at abhitration ste bald	and receipts are on file.

# Special Events Retail-Type 140/2Days Sept. 9-10, 2022 CITY OF BIRM

TAXPAYER IDENTIFICATION NUMBER
(City Office Life Univ)

### 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 se	ections)	
☐ Add a New Location or Tax Type to your current		Coding 2 2 5 40 45 45
Change Business Ownership of your current reg	intention (Please complete	Sections 2 ,3, 5-10,12,13, and 14
Change the Mailing Address only for your currer	it registration (Please complete	Sections 2, 8-10, 12, 13 and 14)
Change the Location Address of your current rec	gistration (Please complete Sec	tions 2, 3, 5-13, and 14)
Change in Corporate Officers, Members, or Partr	ners (Please complete Sections	2, 5, 7-9,, 11-13, and 14)
Provide a general "update" of your current regist	tration information (Please com	plete all sections)
Section 2 - LEGAL NAME AND MAILING ADDRESS to (Note: If mailing address is a post office box, the statement of the section of	o which tax forms are to be sen treet address of the business m	nt: nust also be indicated.)
Full Legal Name: Slice, LLC		
Attention: Address: 213 Richard Arrington Ir Rivel S		
City Dimingle 1	AL Zip Code	araan
Area Code and Phone Number: (205)410-8776	AL Zip Code:	35233
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 please see reverse side of this form. (Important Note: A Please select:	ii business locations are subjec	t to zoning approval.)
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk	ii business locations are subjec	t to zoning approval.)
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:	Private Residence	t to zoning approval.)
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F  City: Birmingham State: AL	Private Residence	t to zoning approval.)  No Physical Birmingham Location
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F  City: Birmingham State: AL  Area Code and Phone Number of Business Location:	Private Residence	t to zoning approval.)  No Physical Birmingham Location
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Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F.  City: Birmingham State: AL  Area Code and Phone Number of Business Location:  Area Code and Fax Number of Business Location:  Name of Contact Person at Business Location:	Private Residence	t to zoning approval.)  No Physical Birmingham Location
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20 <sup>th</sup> St N from 1 <sup>st</sup> Ave N to 4 <sup>th</sup> Ave N & F  City: Birmingham State: AL  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:	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F City: Birmingham State: AL  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:  Section 4 - CHANGE OF OWNERSHIP resulting from the contact Person and Power Presulting from the contact Person Area Code and Fax Number of Business Location:  Section 4 - CHANGE OF OWNERSHIP resulting from the contact Person Area Code and Fax Number of Business Location:	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F City: Birmingham State: AL  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:  Section 4 CHANGE OF OWNERSHIP resulting from In  If applicable, this section MUST be completed.	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F.  City: Birmingham State: AL  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:  Section 4 CHANGE OF OWNERSHIP resulting from In In Implicable, this section MUST be completed.	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F City: Birmingham State: AL  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:  Section 4 CHANGE OF OWNERSHIP resulting from n  If applicable, this section MUST be completed.  Former Owner:  Trade Name (d/b/a)	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203
Please select: Commercial Establishment  Trade Name (d/b/a): Birmingham Artwalk  Attention:  Address: 20th St N from 1st Ave N to 4th Ave N & F	Private Residence	t to zoning approval.)  No Physical Birmingham Location  35203

Section 5 TYPE OF OWNERSHIP Please indicate the form of organization. NOTE: Please refer Tax Certificate Form" instruction sheet for a listing of supple	to the accompanying "General Information for Preparing an Application for emental documentation to be included with this application
☐ 1. Alabama Corporation (Incorporated in Alabama)	
2. Partnership (two or more owners)	I. Foreign Corporation (Incorporated in another state)
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	
	8. Home Occupation/Home Office (Please Specify the type of occupation or office)
1. Manufacturer	(ricese specify are type of occupation of office)
2. Contractor (Please Specify)	State Certified, State Regulated, or State Licensed Occupations, (Please Specify)
C 2 Whatastan	□ 10. Transient Vendors/Special Events: Birmingham     Artwalk
3. Wholesaler	Date(s) of the Event: 9/9-9/10/22 Event Location: 20th St N from 1st Ave N to 4th Ave N &
4. Retailer	Forstall Parking Lot
5. Other (Please Specify)	
6. Food/Eating Establishment	
7. Day Care Center	
Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PR	ODUCT
You should indicate the one business activity that accounts business activity as well as the product or service. For every	for the largest percentage of gross income. State the broad field of mple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity:
Activity: Special Event	Product: Art Festival/Alcohol/Vendors
Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF Enter Federal Identification Number (REQUIRED) and	EMPLOYEES  If the number of employees that will be working in Birmingham.
Fig. 175 Fig. 1	Employees in Birmingham (Required)
Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY	
Enter Date Business Activity Will Begin in Birmingham Enter Date City of Birmingham Taxpayer ID Applied Fo	: Month Day Year or: Month Day Year
Section 10 - Tax Liabilities Check the taxes for which	you are liable.
	RS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
	State of Alabama Sales Tax Number
~~ · · · · ·	State of Alabama Sellers Use Tax Number
1	State of Alabama Consumers Use Tax Number
7 A. 11 1m m	State of Alabama Lease Tax Number
	amen of Liangilla rease 19Y Mailibel

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.

AF	PLICATION FOR TAX CERTIFICATE	(CITY OF BIRMINGHAM, ALABAMA)	3
Ш		State of Alabama Lodgings Tax Number	
X	Business License Tax	State of Alabama Unemployment Tax Number	

Section 11	OWNER.	PARTNERS	MEMBEDS	OP	CORPORATE	OFFICERO
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or claiming, engine	orporate limits of the City of Birminghan eering, and Permits (Zoning Division).
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7)	Date
205-0	110-8774
Phone Number of I	Person Completing Application
	l.
NAICS	
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2010022000010007 Pg: 1E52
Jefferson County, Alabama
6072072019 11: 16:57 Mm 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").

- 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.
- 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.
- 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.
- Jason Bajalieh, 725 29th Street South, Birmingham, Alabama, 35233, shall serve as manager of the Company.

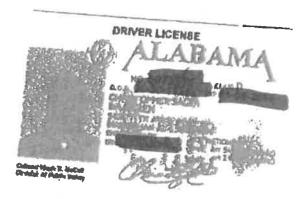
IN WITNESS THEREOF, the undersigned organizer executed these Articles of Organization for Slice, LLC, on this the 2<sup>nd</sup> day of August. 2010.

Jason Bajalieh, Organizer

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

20107020000316260 Pg: 1962 Bk: LR201907 Pg: 1962 Jefferson County Alabama 2012072018 (1:19:53 or INC Fee: 351.00

Total of Fees and Taxes-\$51.00



# BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT SPECIAL EVENT EMS PLAN

I.	Type of Event: Birmingham Artwalk
H.	Location of Event:
	A. Anticipated Attendance:
	B. Length of Event:
	C. Date(s) of Event: Fri. Sep 9th from 6pm-10pm and Sat. Sep 10th
11).	Sponsoring Agency:
	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.
/III.	Describe Emergency Communications System: PA System/Radio/Cell Phone
X.	Method of Announcing Notification for Location of Emergency: Public Address System and Social Med

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

		12-0	-L' (D)
STATE OF ALABAMA	)		
JEFFERSON COUNTY	)		
For the sole conside	eration of being allowed	d to organize, sponsor, or hold the	rimingham Artwalk
			(Name of Event)
undersigned agrees to rele employees from any and all	ase, indemnify and ho I claims, demands, dar	in old harmless the City of Birminghar mages, actions, causes of actions o	Birmingham, Alabama, the m, its agents, servants and r suits of any kind or nature
whatsoever, attributable to t	the act or omissions of	Slice LLC	
		(Sponsoring Organi	ization)
known and unknown, both t Birmingham Artwalk	o persons and propert	ers, agents or employees, particular ly, which may result or may in the fu	ly on account of all injuries Iture develop from the
(Name of Ever	,		
on or about the Sep 9 - 10,	2022	, at or near Birmingh	am, Alabama to the extent
allowed by Alabama Law.	(Date(s) of Event)		
The undersigned her fully understood and volunta	reby declares that the rily accepted.	terms of the Agreement have been	n completely read and are
		Slice LLC/GoPro Event	Solutions
		Dente (C.)	(Sponsoring Organization)
		By:	
		Its: Event Coordinator	(Applicant's Name)
		Den of	(Applicant's Title)
		Date: 6/14/2022	(Signature)
		Date: 0/ 14/2022	

(Date of Signature)

# CITY OF BIRMINGHAM REQUEST FOR CENTRAL BUSINESS DISTRICT STREET BLOCKAGE PERMIT

Name of Event: Brimingham 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 Festvial

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: Slic

Slice LLC/GoPro Event Solutions

Address:

213 Richard Arrington JR Blvd S

Birmingham, AL 35233

Phone:

205-410-8776

Email:

www.denisekochevents.com

### **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 1<sup>st</sup> Floor of City Hall. Bring the receipt to the Traffic Engineering Department (9<sup>th</sup> 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.

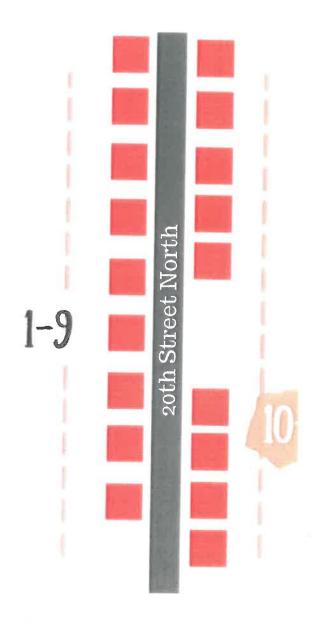
If approved, a copy of the permit will be mailed to you prior to the event.

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



3RD AVE NORTH



## Special Retail - Type 150/30 Days or Less: Event Dates 7/7-7/17/22: 11 Days

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:				
Name of Applicant: The Birmingham Urban League, Incorporated				
Mailing Address: 2101 6 <sup>th</sup> Ave N, Ste 700 Birmingham, AL 35203				
Trade Name: Civil R	lights District Mari	ketplace		
Location Address: Co	orner of 16 <sup>th</sup> St an	nd 5 <sup>th</sup> Ave N	– Kelly Ingram Park	
Contact Number:	Kelli Solom	on	Contact Person: (205)602-0012	
×	New Application		Transfer	
	Туре	of License		
Lounge Retail Liquor ( Club Liquor Class I (F Beer Off Premise Wine Off Premise Restaurant Retail Liquor ( Special Retail Liquor (	raternal) or	Club Liq Beer On Wine On Special F	Retail Liquor Class II (Package Store) uor Class II (Private) & Off Premise a & Off Premise Retail Liquor (7 days or less) Retail Liquor (under 30 days)	
☐ Division I Dance Perm	it (customer)	☐ Division	II Dance Permit (entertainers)	
Pool Table Permit (ser	nd copy of application	)		
Kitchen equipped: yes	no 🖾	Number of ta	able and chairs Multiple	
Date Applied: 6/24/2 Revenue Examiner: 0	= (	Health Depart Community I Operation New	Development v Birmingham n (pool tables)	

# City of Birmingham

	A	Application f	or	
New Application			30 DAYS OR LESS	By: GS
		(Enter Type of Licens		(Revenue Official)
	Indicate who or all partner	Urban League, Inconether Individual, Passand members if partners is separate sheet if n	ortnership, Corporation, Li ship or assoc., or all officers an	IC IIP etc)
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# William Antoine Barnes	CEO	Birmingham, AL	473 37 <sup>th</sup> Ct W Birmingham, AL 35207	17 years
Note: If a corporation, LLC or LLP, give place  Book 817-002 Page: 1 of 5  Foreign Corporation: certificate of Author	Date:	ncorporation or issuance  11/09/2001  (get copy of original control or in the contro	County: Jeffe	
3. Trade Name Civil Rights District 4(a) Location Corner of 16 <sup>th</sup> St at				
Exact Street Birmingham, Alabama Zip Code	t Number, or	if on Highway, give do County Seffers	etails as to Location on Shelby	
(b) Length of time at this location				
(c) Mailing Address: 2101 6th Av		0 Birmingham, AL 3	5203	
(d) Business Phone (205)326-01		G	Other Contact: (205)	602-0012
5. Name, trade name and License nur Trade name	nber of last o	or previous licensee: Type	Taxpayer ID	
6 (a) Owner of real estate for which 210 20 <sup>th</sup> St N Birmingham, AL 35203	ch license is	desired City of Birmin	gham	
(b) Give a full description of the pre Description Marketplace for	mises for wh	Address ich a license is desired es	l: New Construction  Exi	sting Structure 🛛
(c) Is establishment equipped with t	ables and ch	nairs? Yes 🛛 No 🗌	If "Yes", how many? Multip	ole
<ol><li>Has a liquor, malt or brewed beverage If "Yes", explain fully</li></ol>	e license for	premises ever been de	enied, suspended or revoked	i? ☐ Yes ☒No
8 (a) Pool Tables? Yes ☐ No ☒ C (b) Video Games? Yes ☐ No ☒ (c) Vending Machines (Snacks/Sodas)?	oin Operated Juke Box Yes  No	or Slot Musical Equipm	Standard Provider: ent? Yes  No  \( \square\) obacco Products? Yes  \( \square\) No	o 🛛 Other?
9 (a) Will you allow dancing? Yes \(\simeg\) No (b) Independent Contract Employees (I	☑ If "Ye Disc Jockey,	es": Customer/Patron? Band, Bartenders, Sen	P ☐ <b>Div I</b> Exhibition/Perforvers)? Yes ☐ No ☒	mance? Div II

/L1		
(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	0
(e)	Are these premises equipped for on premises consumption of liquor? Yes   No	
<b>(f)</b>	Will this business be operating primarily as a package store? Yes \( \square\) No \( \square\)	
(9)	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 (Note: Application must be filed 120 days in advance of event for which licenses.)	Ending <u>7/17/22</u> nse is applied for)
(k)	Event Sponsor Phone Number  (1) Sponsor Letter of Designation? Yes No X  (2) Multi-Vendor Sponsorship? Yes No X  (3) Street Closing Required Yes No X  (4) Park Board Permission Yes No X	
11 (a) (b)	Does the club charge and collect dues from elected members?  Yes  How many paid-up members are there in the club?	No 🔲
(c) (d) (e) (f)		No Athletic Other
(d) (e) (f) 12. List includin	Is business conducted through officers regularly elected?  Yes  Are members admitted by written application, investigation, and ballot?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Yes	No Athletic Other interested in this application,
(d) (e) (f) 12. List includin	Is business conducted through officers regularly elected?  Are members admitted by written application, investigation, and ballot?  For what purpose is the club organized and operated? Social Patriotic Political  below the court records for law violations in the last ten (10) years, if any, of each person g the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not in	No Athletic Other Athletic Other Disposition of Case

# For Loning Purposes Special Retail-Type 150/30 Pays or Less

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

### CITY OF BIRMINGHAM APPLICATION FOR TAX CERTIFICATE

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

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)			
Estritude a general appear of your current registration information (rease complete an 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 6 <sup>th</sup> 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			
Please select:			
Trade Name (d/b/a): Civil Rights District Marketplace			
Trade Name (d/b/a): Civil Rights District Marketplace Attention:			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> Ave N – Kelly Ingram Park  City: Birmingham State: AL Zip: 35203			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention: Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> Ave N – Kelly Ingram Park  City: Birmingham State: AL Zip: 35203  Area Code and Phone Number of Business Location: (205)326-0162			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> Ave N – Kelly Ingram Park  City: Birmingham State: AL Zip: 35203			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> 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:			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> 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:			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> 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.			
Trade Name (d/b/a): Civil Rights District Marketplace  Attention:  Address: Corner of 16 <sup>th</sup> St and 5 <sup>th</sup> 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.			
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.			
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)			

Section 5 - TYPE OF OWNERSHIP  Please indicate the form of organization. NOTE: Please refer to  Tax Certificate Form" instruction sheet for a listing of supplementary of the control of t	the accompanying "General Information for Preparing an Application for nental 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 categor	
☐ 1. Manufacturer	8. Home Occupation/Home Office (Please Specify the type of occupation or office)
	9. State Certified, State Regulated, or State Licensed
☐ 2. Contractor (Please Specify)	Occupations, (Please Specify)
	☑ 10. Transient Vendors/Special Events: Civil Rights District Marketplace
3. Wholesaler	Date(s) of the Event: 7/7-7/17/22
_	Event Location: Corner of 16th St and 5th Ave N - Kelly
4. Retailer	Ingram Park
5. Other (Please Specify)	
6. Food/Eating Establishment	
7. Day Care Center	
business activity as well as the product or service. For example,	for the largest percentage of gross income. State the broad field of nple-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: tion should be the same information as required by the Internal
Activity: Special Event	Product: Marketplace Festival/Alcohol/Vendors
Section 8 – FEDERAL TAX ID NUMBER / NUMBER OF	EMPLOYEES
	I 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	Υ
Enter Date Business Activity Will Begin in Birmingham	: Month Day Year
Enter Date City of Birmingham Taxpayer ID Applied Fo	
Section 10 - Tax Liabilities Check the taxes for which	you are liable.
Sales Tax TAX IDENTIFICATION NUMBE	RS 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
	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.

	PLICATION FOR TAX CERTIFICATE	(CITY OF BIRMINGHAM, ALABAMA)
	Lodgings Tax	State of Alabama Lodgings Tax Number
X	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 Section 12 - CORPORATE RESIDENT AGENT OR LOCAL MANAGER Address of Residence: City: 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 Print the Name of the Person Completing This Application Phone Number of Person Completing Application CITY OFFICE USE ONLY Location ZONING APPROVAL AND COMMENTS: SIC OR NAICS BLIC TERRITORY

ANNEX

HOME OCCUPATION CERTIFICATE EXECUTED

☐ YES ☐ NO ☐ NOT APPLICABLE

HEALTH DEPT PERMIT

OTHER REQUIRED PERMIT

ARTICLES OF INCORPORATION CERTIFICATE OF AUTHORITY

TAX FORMS ORDERED [ NEL ORDERED [ ]



William A. Barnes	
SSN:	
Number of years at residence: 17 years	1,4
DOB:	
January 14, 1978	
Place:	
Birmingham AL	

Birmingham Urban League

CEO:

STATE OF ALABAMA RA DECLARATION OF INCORPORATION THE BIRDINGHAM UNBAR LEAGUE, INCORPORATED JEFFERSON COUNTY #817-100

TO THE HONORABLE JUDGE OF PHOBATE OF SAID CO

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

- 1. The name chosen for the Corporation is, "THE BIRMINGHAM UHBAN 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 objactives:
- 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 ar se.
- 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

XOV 0 9 2001

SECRETARY OF CTUST

- 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 ip.
- 6. That no member or officer small have any pecuniary interesting 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:

y W Taleart	16.0 - hth ave., No., City
Arthur D. Shores	1527-th Ave. North City
John J. Drew	1.21 - North 16th Street, City
Emor, O. Jackson	312 -17th St., North, Cit
J. L. Ware	file - 10th Ave. West. City
Amos Ryce, II	Kiles College, Birmingham, A.a.
J. E. Lower:	1500 - 6th Ave. North City
Jesse L. Lewis	505-17th St. North, City
L. H. Pitts	5400 Avenue G. Vinesville, City
A. G. Gaston	1527-5th Avenue North, City
Clarence L. Price	19-2nd Avenue, South, City
James O. Prewitt	,26-5th Ave. Rorth, City
Philander L. Butler	1527-5th Ave. North, City
Harold D. Lons	102, North Center Street. City.
Samuel O'Nesi	152305th Avenue - 1711, 1119

10. The mame and address of the initial registered office and the initial registered agent are as follows: 1027-1th Ave. Borth City ARTHUR D. SHORES 11. The number, names and addresses of the directors consti tuting the initial Board of Directors are: as subscribed below: IN WITHESS WHEREOF, we have hereunto set our hands and seals this litth day of January, 1967; 1630 - Ath Avenue, North, City - 1527-5th Avenue, North, City Klaker, 1.24 North 16th Street, City Con Structure 312 - 17th Street, North City :12-10th Avenue, West, City Miles College, Birmingham, Ala. 1'00 -6th avenue, North, City -O5-North 17th Street, City .500 Avenue G. Vinesville, City 1527-5th Avenue, North, City 49 - 2nd Avenue, South, City 424 - North 16th Street, City 1527-Sth Avenue, North, City 102% No th Center Street, City

1523 - 5th avenue, North, City-

I, AGNES N. STUDEMIRE , a Notary Public in and for said County, is said State, hereby certify that E. W. Taggert Arthur B. Shores John J. Drew. Emory O. Jackson, J. L. Ware, Amos Ryce, II. L. R. Towery, Jesse J. Lewis, L. H. Pitts, A. G. Caston, Clarence,

L. Price, James O. Prewitt, Philander L. Butler, Harold ".Long & Samuel . 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 \_\_lsth \_\_ day of January, 1967.

BTAIR OF MA. APPENDON EC. | CININFO THE INSTRUMENT WAS FILED ON

State of Alabama

Ismuson County

I, the Undersigned, as ludge of Probabilin and for unid 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 opposition of instrument with the filing of same as opposition. Jufferson County

2003

record in this office in vol. 893 press 418 Given under my hand and afficial seed, this the Sth

Judge of Probate



Diretor

Shonae' Eddus-Bennett

**Board Members** 

Montal Morton, President
Carly Miller, Vice-President

Carol Clarke Larry D. Cockrell Ronald D. Mitchell

June 22, 2022

Tabi Gaines
Birmingham Urban League
2101 6t 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  $8^{th} - 10^{th}$ , 2022 and July  $15^{th} - 16^{th}$ , 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

### CATH OF BEHAVIORS OF ANY BEHOWING HAM PARK & RECREATION BOARD Will Employed Assets Water Himmingham, AL 35204

### To Sell Alcohol Permission Form

If should will be seld and sorv are sold to enter or if a soul be granted.	ed at any Miradagham Furk or it to be setup, then this form	and Recreation will need to be	m Beard facility where the completed and approval	toda /
FACILITY	REQUESTED Kelly	Trager	n Park	
Name (Please Print) Bab	Dickerson		Paris 205 - 218	1003
Street Address 1500 15	ALE No. ON B	hau s	Rests ALZIP Code 352	03
Date of event TIJ 27 10 16	will Downson	arketok	ace	
Expected standards: 500	Organization Responsible for	Serving Aloohn	Birmuhay DEB	an Leagu
Liquor Lioense 8	Contact Person Jo Smile	Allen	Phone 205-719-9	019
Recreation Board is prod  THE SELLING OF THE SELLING OF THE SELLING OF THE BY THE SELLING OF THE	by without the expressed withited.  CKETS is permitted if on and Recreation Board.  BE SOLD OR SERVED I werages by any person and ig, or on park grounds, is and the responsible adult), plicant's group hereby assicies regarding the selling ingham Park & Recreation	ritten permissi ganizations' ev TO ANYONE or 21 years of prohibited ar ume responsit and/or servine facility.	ents meet the qualification of the Birmingham I sents meet the qualification of the Birmingham Property in a Birmingham Property to ensure afterence of alcoholic beverages	Park & Otto set  F AGE sad test and tes

ANCURITY: One off-duty uniformed Birmingham Palice Officer per and up to each 100 persons in attendance will be required, at the regter'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 Habilities. cialms, judgments, demands and costs serving 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.

o In making this application, I have read and fully understand the rules and regulations of the literalingham Park and Recreation Board and will shide by all rules and assume the financial responsibility for my 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

Applicant - Print Name: Applicant's Signature:

### CTTV OF SUBMINISHAM BURGHLAM FARE & SECTION THAN BURAND ON COMMINISH BYS GROUNDSON, NO. 18704 TO SURER Alsocked Proceedings Pages

If alcohol will be served at any Hirmington, Paril, and Resection Board Society where levined general new mered photos from of charges where MQ Sidner are more to entary as (0) and how is to be emuga than their from will send to be completed and approved granted.
PACELETY REQUIREMEN Kelly INGERM Park
mommo Bob Diekerson mass-218 1003
1500 10 Av. No. on Bhan small 2000 35203
Part Trees NAV V=10 4 15 -16 Treest-
Expend and locar 500 Organization Responsible for Serving Alcohol Blank Ushan Leas
DAMINE YHEN PRINT 205-719-9019
* THE RESEVENCE OF ALCOHOL soulfor the possession of alcohol at a Binningham Park and Recrustion Board facility without the expressed written permission of the Birmingham Park &
RO ALCOHOL MAY BE SOLD OR SERVED TO ANYONE UNDER 21 YEARS OF AGE
Accompliant Bearing haddeling as the sand
The applicant and the applicant's group hereby ensure evaposatibility to comes adherence to all advantable at a Birmingham Fack & Recreation facility.
OH RECOURSE.
SECTION DOWNERS OF THE PARTY OF
SECRETY: One off-duty suffermed liferateglum Police Officer per and up to each 100 persons in extendence will be riquired, at the ranter's expense, for the duration of the event. All necurity arrangements
The applicant and the applicant's group, shall indemnify, defined and hold Birmingham Park & Recrustion Board and the City, its elected and appointed officials, agents, comployous and volunteers harvings from all timblifties, bruingham Park & Recrustion Board bruingham Park & Recrustion and course of the professor's security from the applicant's security from the applicant's security security.
deless, judgments, demands and appointed officials, agents, comployees and voluntuers harmiers from all tital man
taken, judgments, demands and expectated officials, agents, comployees and volunteers harmine from all inhibition, irralighteen Park & Recreation facilities and adherence to all rules included in the applicant's group or their invitous' une of the applicant applicant and adherence to all rules included in the applicant policy.
In making this application, 2 have cond and fully understand the color and passey.
reservation if fallers to comply with any role is from that the Park Spord has the right to record and
plicant - Print Names 606 Dickers on Dates 6 17 82
Marie Date: 6/17/82
DON HUSEA

### BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT

### **SPECIAL EVENT EMS PLAN**

١.	Type of Event: Civil Rights District Marketplace
11.	Location of Event: Carner OF 16th Street and 5th Are. North
	Sponsoring Agency: Birmingham Urban League
A.	Address: 2101 Gets Are. N. Ste 700 Birmingham AL 35203
В.	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)
VΙ.	Plot Plan: Attachment with description of facilities.
/II.	Deployment Map: Attachment with description of area of involvement.
III.	Describe Emergency Communications System: <u>Cellular Devices</u>
X.	Method of Announcing Notification for Location of Emergency:



2101 6<sup>th</sup> 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

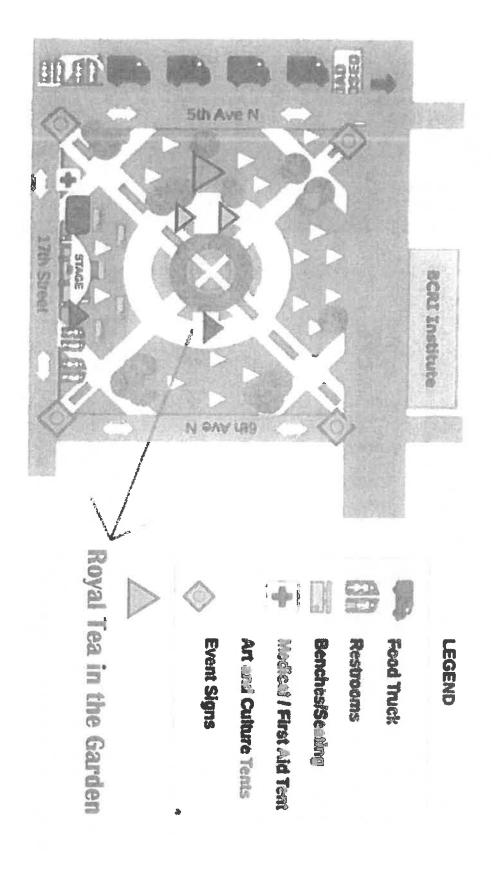
16th and 5th AVE north

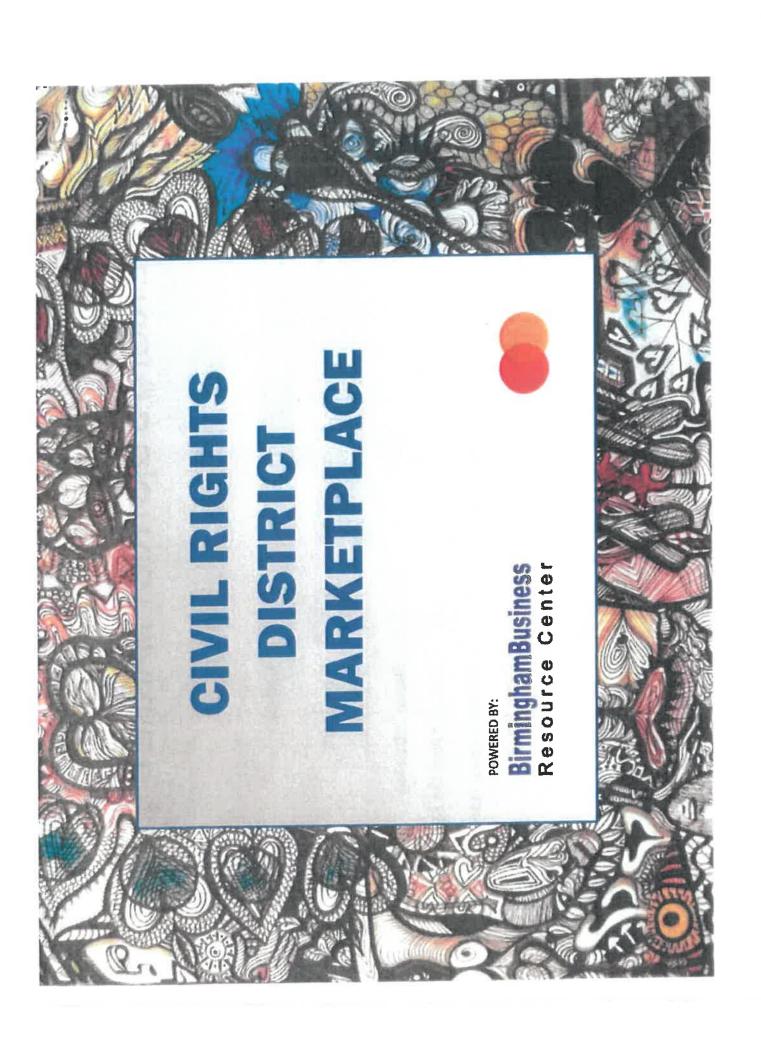
Park and Rec Board- approved

Noise permit- approved

Street Blockage- approved

## CIVIL RIGHTS DISTRICT MARKET





Welcome to the

### Civil Rights District Marketplace!

National Monument - Kelly Ingram Park. powered by the Birmingham Business Resource Center (BBRC) and Mastercard. This five-day festival feature an eclectic experience in the during The World Games 2022 will beautiful Birmingham Civil Rights

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 flags, and a beautiful fountain design as a event includes live music, white tents and centerpiece set to offer an unforgettable experience for the world to see.



The World Games 2022 Birmingham, World of Opportunity - Vendor Program Civil Rights District Marketplace is in collaboration with

### COMMUNITY

Birmingham Civil Rights Institute

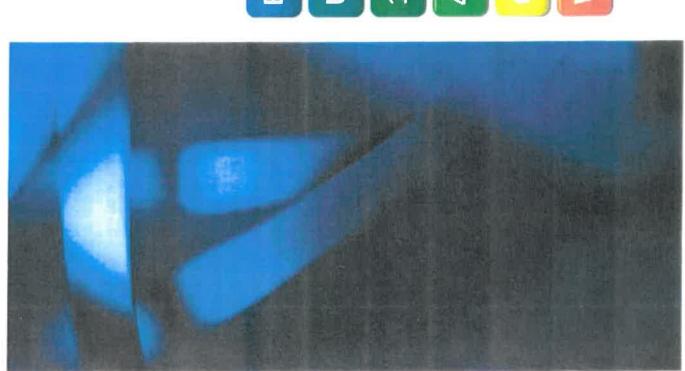
Urban Impact

16th Street Baptist Church

4th Avenue Merchants

REED63

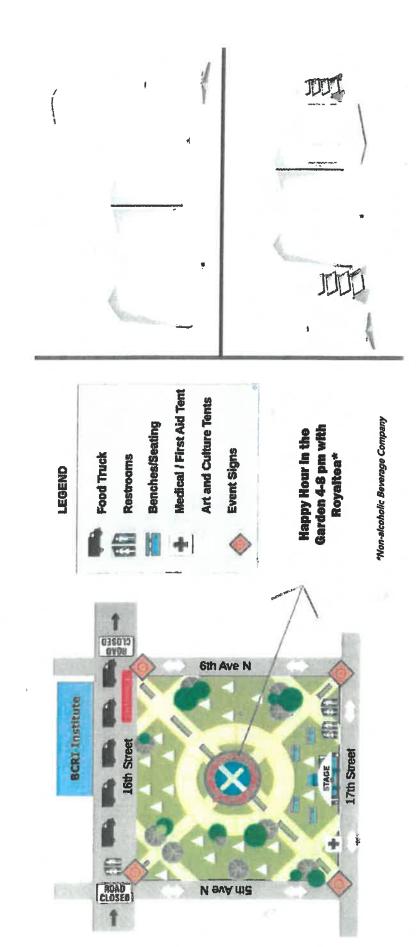
Nalker's Legacy



# 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.

throughout the park. Food vendors will offer a variety of delicious food from trucks that frame the Food Merchandise vendors will be showcased in beautiful high-pitched white, canopied tents placed Court. The Food Court is located adjacent to the park on 5th Ave N.

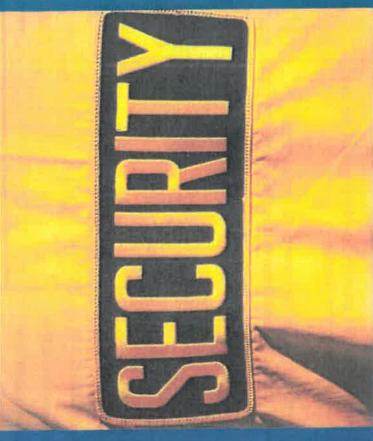


### 24HR SECURITY PLAN

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)

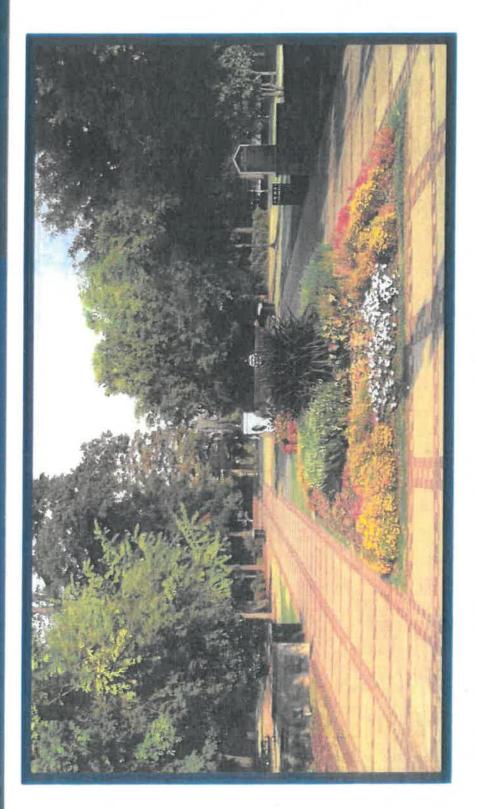
(10) Food Trucks

(20) Merchant Vendors

Vocalists
Entertainment
Live DJ

Interactives

### **THANK YOU**



BirminghamBusiness Resource Center