



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

18 JUL 16 Lir. Lic. PM 2 03

QUESTIONNAIRE
 A.R.S. § 4-202, 4-210
 Type or Print with **Black Ink**

The fees allowed by R19-1-102 will be charged for all dishonored checks.

ATTENTION APPLICANT: This is a legally binding document. Please type or print in **black ink**. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License#: 10023143

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person	<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager (complete all questions except #12)
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2. Name: THATHI SUMIT Birth Date: / /
Last First Middle (NOT a public record)

3. Social Security #: Driver License #: State: ARIZONA

4. Place of birth: NEW DELHI INDIA Height: 5'6" Weight: 135 Eyes: BLK Hair: BLK
City State COUNTRY (not county)

5. Name of current/most recent spouse: Birth Date: / /
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? Yes No If yes, what is your date of residency: 08/1997

7. Daytime telephone number: 520-310-3997 E-mail address: sthathi1993@gmail.com

8. Business Name: QUICK PIC MARKET Business Phone: 520/586/2163

9. Business Location Address: 62 N OAK DR BENSON AZ COCHISE 85602
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years. If unemployed, retired, or student, list residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
02/2012	CURRENT	CASHIER	QUICK PIC MARKET, 62 N OAK DR, BENSON AZ 85602

(ATTACH ADDITIONAL SHEET IF NECESSARY)

11. Provide your residence address information for the last five (5) years: A.R.S. §4-202

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
04/2010	CURRENT	4490 N CAMINO SUMO, TUCSON AZ 85718

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. If NO, skip to #14. Yes No
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? Yes No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? Yes No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses pending against you? (Do not include civil traffic tickets.) A.R.S. §4-202,4-210 Yes No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No

**If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement.
Give complete details including dates, agencies involved and dispositions.
CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED**

NOTARY

I (Print Full Name) SUMIT THATHI hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: 

State of ARIZONA County of _____

The foregoing instrument was acknowledged before me this

My Commission Expires on: 04/02/2021

27 Day of June 2018



Clinton J. Farnsworth
Notary Public
Pima County, Arizona
My Comm. Exp. 04-02-2021


Signature of Notary

~~The licensee has authorized the person named on this questionnaire to act as manager for the above license.~~

~~PRINT NAME: _____ SIGNATURE: _____~~



State of Arizona
 Department of Liquor Licenses and Control
 800 W. Washington 5th Floor
 Phoenix, AZ 85007
 (602) 542-5141

18 JUL 16 11:47 AM 2013

**ARIZONA STATEMENT OF CITIZENSHIP
 OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

INDIVIDUAL OWNER/AGENT NAME (Print or type) SUMIT THATHI

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? Yes No

If **Yes**, indicate place of birth:

City NEW DELHI State (or equivalent) _____ Country or Territory INDIA

If you answered **Yes**, 1) Attach a legible copy of a document from the attached list.

2) Name of document: AZ DRIVERS LICENSE
 Go to Section IV.

If you answered **No**, you must complete Section III and IV.

SECTION III – ALIEN STATUS DECLARATION

To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Name of document provided

Qualified Alien Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*];
- 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

- 14. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).

All applicants must complete this section.

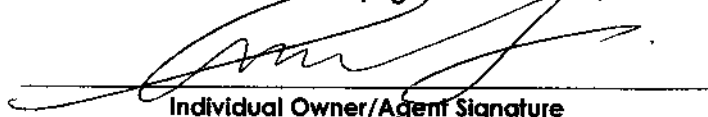
I declare under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given are true and correct to the best of my knowledge.

SUMIT THATHI

Individual Owner/Agent Printed Name

24 JUN 2018

Today's Date



Individual Owner/Agent Signature

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

Arizona DRIVER LICENSE USA

NOT FOR FEDERAL IDENTIFICATION



9 CLASS D
10 END NONE
12 REST NONE

4d BLN
3 DOB

1 THATHI
2 SUMIT

8 4490 N CAMINO SUMO
TUCSON, AZ 85718-7472



4b EXP 09/13/2058 4a ISS 12/23/2016

10 SEX M 18 EYES BLK
16 HGT 5'-06" 19 HAIR BLK
17 WGT 135 lb

Sumit Thathi

Multi-License Amendment #25798 (In Review) - Multi-License Agent...
Licensee: S & S THATHI LLC (Limited Liability Company)

Created: Jul 16, 2018 | Completed: In Progress
Created By: Selena Gonzales

This licensee has open multi-license amendments.

- Details
- Processes
- Amendments
- Licenses
- Fees & Payments
- Process
- Case Notes
- Documents

Application Received Date: Jul 16, 2018

Related Information

Agent

S & S THATHI LLC
Limited Liability Company

Agent: SUMIT THATHI
Individual

Assignments

- Reviewer 1: Selena Gonzales
- Reviewer 2: Cynthia Abrigo

Save Refresh New Reports Remember

Multi-License Amendmen

Multi-License Amendment #25799 (In Review) - Multi-License...
Licensee: *S & S THATHI LLC (Limited Liability Company)*

Created: Jul 16, 2018 Completed: mm/dd/yyyy

Created By: Selena Gonzales

This licensee has open multi-license amendments.

Details Processes Amendments Licenses Fees & Constraints Progress Case Notes Documents

Application Received Date: Jul 16, 2018

Related Information

S & S THATHI LLC
Limited Liability Company

Assignments

Reviewer 1: Selena Gonzales

Reviewer 2: Cynthia Abrigo



18 JUL 16 Lyr. Lic. # 202
 State of Arizona
 Department of Liquor Licenses and Control
 800 W. Washington 5th Floor
 Phoenix, AZ 85007
 (602) 542-5141

DLIC USE ONLY

Date Processed: 7-16-18
 CSR: SG
 60th Day: 9-13-18

Job # 25803 Agent
 Job # 25801 AOC

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

NOTE: 1) The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H) NOTE 2) the \$100.00 fee for restructure/acquisition of control MUST be submitted with this application. (A.R.S. 4-209.A)

SECTION 1

Check the appropriate boxes

<input checked="" type="checkbox"/> Agent Change Complete Sections 1,2,3,4,5 & 7	<input checked="" type="checkbox"/> Acquisition of Control Complete Sections 1,2, 3 & 7	<input type="checkbox"/> Restructure Complete Sections 1,2,3,6 & 7
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SECTION 2 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name: THATHI SUMIT 10023143
(EXISTING AGENT OR NEW AGENT) Last First Middle Liquor License #

2. Owner Name: S&S THATHI, LLC Corp File #: L19259642
(Exactly as it appears on Liquor License) (If applicable)

3. Business Name: QUICK PIC MARKET Email: sthathi1993@gmail.com
(Exactly as it appears on Liquor License)

4. Business Location Address: 62 N OAK DR BENSON COCHISE 85602
(Do not use P.O. Box Number) City COUNTY Zip

5. Is the Business located within the incorporated limits of the above City or Town? Yes No

6. Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation? Yes No If Yes, what City, Town or Tribal Reservation is this Business located in: ~~COCHISE~~

7. Mailing Address: 62 N OAK DR BENSON A2 COCHISE 85602
City State Zip

8. Business Phone: (520) 586-2163 Daytime Contact Phone: ~~(520) 940-4000~~ 520-310-3997

9. Does this transaction involve the sale of any portion of the percentage of ownership or corporate stock? Yes No If yes, submit a certified copy of minutes.

10. Has there been any change of Controlling Persons? Yes No If yes, submit a copy of the minutes, amended articles of organization and/or amended operating agreement showing change

SECTION 3 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each new person listed in section III must submit a questionnaire (form LIC0101) and a Department approved fingerprint card which may be obtained at the Department of Liquor. A Controlling Person already disclosed to the Department is not required to submit a questionnaire.

1. List all Controlling Persons to be disclosed, current and new.

New	Last	First	Middle	Title	Address	City	State	Zip
<input type="checkbox"/>	THATHI	SHAMA	MEM/MGR	81%	4490 N CAMINO SUMO	TUCSON	AZ	85718
<input checked="" type="checkbox"/>	THATHI	SUMIT	MEM/MGR	19%	4490 N CAMINO SUMO	TUCSON	AZ	85718
<input type="checkbox"/>								
<input type="checkbox"/>								

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

2. List stockholders, percentage owners and/or Controlling Members owning 10% or more

New	Last	First	Middle	% Owned	Address	City	State	Zip
<input type="checkbox"/>	THATHI	SHAMA		81%	4490 N CAMINO SUMO	TUCSON	AZ	85718
<input checked="" type="checkbox"/>	THATHI	SUMIT		19%	4490 N CAMINO SUMO	TUCSON	AZ	85718
<input type="checkbox"/>								
<input type="checkbox"/>								

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

If the ownership is owned by another entity, ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND 10% OR MORE OWNERS FOR THE ENTITIES. Attach additional sheets as necessary in order to disclose all persons.

SECTION 4

(COMPLETE THIS SECTION FOR AGENT CHANGE)

1. As an Agent, will you be physically present and operating the licensed premise? [X] Yes [] No
If you answered YES, you must provide a copy of your Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider BEFORE YOUR APPLICATION FOR AGENT ACQUISITION OF CONTROL OR RESTRUCTURE CAN BE SUBMITTED. If you answered NO, go to question 2.

2. Is there a current Manager at this license premises disclosed to the Department with the current Basic and Management Training Certificate? [] Yes [X] No

If yes, Name of current Manager: Last First Middle

Basic Training [] Yes [] No

Management Training [] Yes [] No

If "NO" for 1 and 2, a Manager with a current Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider must be submitted within 30 days after filing the application for Agent Change, Acquisition of Control or Restructure.

SECTION 5

(COMPLETE THIS SECTION FOR AGENT CHANGE)

To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License # 10023143

2. Current Agent Name: THATHI SURESH KUMAR
(Exactly as it appears on license) Last First Middle

I, (Print full name) SURESH KUMAR THATHI hereby consent to the appointment of Agent for this license. I agree to immediately resign a new Agent in the event that I am unable to discharge the duties of Agent for this license. I have not been convicted of a felony in the last five (5) years.

X [Signature] State of ARIZONA County of PIMA
(Controlling Person/Existing Agent) The foregoing instrument was acknowledged before me this

My commission expires on: 04/02/2021 of JUNE 2018
Notary Public Day Month Year
Clinton J. Farnsworth
Pima County, Arizona
My Comm. Exp. 04-02-2021
Signature of NOTARY PUBLIC

SECTION 6

(COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved? [] YES [] NO

If YES, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

Type of new ownership:

- [] J.T.W.R.O.S.
[] INDIVIDUAL
[] PARTNERSHIP
[] CORPORATION
[] LIMITED LIABILITY CO.
[] MANAGEMENT CO.
[] TRIBE
[] TRUST
[] OTHER (Explain)

- [] J.T.W.R.O.S.
[] INDIVIDUAL
[] PARTNERSHIP
[] CORPORATION
[] LIMITED LIABILITY CO.
[] MANAGEMENT CO.
[] TRIBE
[] TRUST
[] OTHER (Explain)

SECTION 7 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by Controlling Person or existing Agent (if no agent changes) OR NEW Agent if applying for Agent change as listed in Section 2 Question 1.

I, (Print full name) SUMIT THATHI hereby declare that I am the APPLICANT filing this application. I have read the application and the contents and all statements are true, correct and complete.

X [Signature] State of ARIZONA County of PIMA
(Controlling Person/Existing Agent) The foregoing instrument was acknowledged before me this

My commission expires on: 04/02/2021 of JUNE 2018
Day Month Year

Clinton J. Farnsworth
Notary Public
Pima County, Arizona
My Comm. Exp. 04-02-2021

[Signature]
Signature of NOTARY PUBLIC

Certificate # _____

Certificate of Completion For Title 4 **BASIC** Liquor Law Training

<input type="checkbox"/>	On-sale
<input checked="" type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

SUMIT THATHI

Full Name (please print)

[Handwritten Signature]
Signature

25 MARCH 2017

Training Completion Date

25 MARCH 2020

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Eddie G. Rodriguez, Jr.

Company Name

3120 South Philamena Place, Tucson AZ 85730

Mailing Address

(520) 349-8374

Daytime Contact Phone Number

18 JUL 16 11:47 AM '03

I, **EDDIE G. RODRIGUEZ, JR.**, certify that the above named individual did successfully complete
Instructor Name (please print)
Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

[Handwritten Signature]
Instructor Signature

25 / 03 / 2017
Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
| Conveyance (series 8) | Liquor Store (series 9) | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12) | In-state Farm Winery (series 13) | | Beer & Wine Store (series 10) |

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

Certificate # _____

Certificate of Completion For Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

SUMIT THATHI

Full Name (please print)



Signature

25 MAR 2017

Training Completion Date

25 MAR 2020

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Eddie G. Rodriguez, Jr.

Company Name

3120 South Philamena Place, Tucson AZ 85730

Mailing Address

(520) 349-8374

Daytime Contact Phone Number

18 JUL 16 11:49 AM '13

I, **EDDIE G. RODRIGUEZ, JR.** certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 **MANAGEMENT** Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



Instructor Signature

25 / 03 / 2017

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
| Conveyance (series 8) | Liquor Store (series 9) | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12) | In-state Farm Winery (series 13) | | Beer & Wine Store (series 10) |

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

July 15, 2018

18 JUL 16 10:47. Lic. PM 2 03

TO: AZ DEPARTMENT OF LIQUOR

SUBJECT: REMOVAL OF AGENT/CONTROLLING PERSON
SURESH KUMAR THATHI
LICENSE # 10023143

FROM: S&S THATHI LLC

S&S THATHI LLC WAS AMENDED REMOVING SURESH KUMAR THATHI AS MANGER/MEMBER. REQUEST THE AZ DEPARTMENT OF LIQUOR REMOVE HIM AS AGENT AND CONTROLLING PERSON OF LIQUOR LICENSE 10023143, QUICK PIC MARKET, 62 N OAK DR, TUCSON AZ 85602. *Suresh Kumar Thathi, manager/member 19% ownership is being replaced with Sumit Thathi, manager*
AGENT CHANGE/ACQUISITION OF CONTROL IS INCLUDED IN THIS PACKAGE.

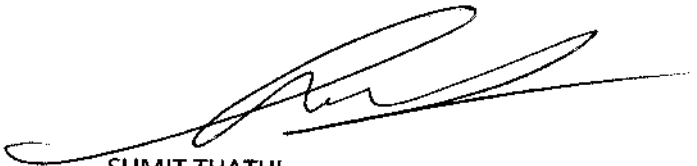
Member 19% ownership in S&S Thathi LLC -

THANK YOU



7/15/18

SURESH KUMAR THATHI



7-15-18

SUMIT THATHI
MEM/MGR S&S THATHI LLC



7/15/18

SHAMA THATHI
MEM/MGR S&S THATHI LLC