

MESCAL BAR & GRILL II LLC - MEMBER

Name: MORGAN CASEY SALAS
Gender: Male
Correspondence Address: 600 W 4TH STREET
BENSON, AZ 85602
USA
Phone: (520)808-2060
Alt. Phone: (520)204-6500
Email: MORGAN_SALAS@YAHOO.COM

MESCAL BAR & GRILL II LLC - MEMBER

Name: AMANDA SUSANNE SALAS
Gender: Female
Correspondence Address: 600 W 4TH STREET
BENSON, AZ 85602
USA
Phone: (520)720-8050
Alt. Phone:
Email: MNMSALAS@GMAIL.COM

APPLICATION INFORMATION

Application Number: 95004
Application Type: Owner Transfer
Created Date: 01/21/2020

aizee Pamm

QUESTIONS & ANSWERS

006 Bar

- 1) If you intend to operate business while your application is pending you will need an interim permit pursuant to A.R.S.§4-203.01. Would you like to apply for an Interim Permit?
Yes
A Document of type INTERIM PERMIT is required.
- 4) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.
Yes
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
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
If Yes, what City, Town or Tribal Reservation is this Business located in?
Cochise County
- 15) Please provide name, address, and Distance of nearest school.
Benson High School
360 S. Patagonia St., Benson, AZ. 85602
9 miles

- 16) Please provide name, address, and distance of nearest church.
 Peace In The Valley Lutheran
 551 S. J6 Ranch Rd., Benson, AZ 85602
 4,224 feet
- 17) Are you a tenant? (A person who holds the lease of a property; a lessee)
 Yes
 A Document of type SUPPLEMENTAL INFO is required.
- 18) Is there a penalty if lease is not fulfilled?
 Yes
 What is the penalty?
 Landlord lockout
- 19) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)
 No
- 20) Are you the owner?
 No
- 21) Are you a purchaser?
 No
- 22) Are you a management company?
 No
- 23) What is the total money borrowed for the business not including the lease?
 Please list lenders/people owed money for the business.
 \$27,000.00
 Mescal Bar & Grill, LLC
 3217 W. Acoma Pl., Benson, AZ 85602
- 24) Is there a drive through window on the premises?
 No
- 25) Have you provided a diagram of your premises?
 Yes
- 26) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
 Yes, contiguous
- 27) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
 No
- 34) Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only)
 \$30,000.00

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
QUESTIONNAIRE	Amanda Q ASF AZDL.pdf	01/21/2020
ALIEN STATUS	Amanda Q ASF AZDL.pdf	01/21/2020
DIAGRAM/FLOOR PLAN	Floor Plan.pdf	01/21/2020
BILL OF SALE	KL Mescal to Mescal Bar-BOS 010720.pdf	01/21/2020
BILL OF SALE	Mescal Bar & Grill BOS to Mescal Bar & Grill II 012120.pdf	01/21/2020
QUESTIONNAIRE	Morgan Q.pdf	01/21/2020
INTERIM PERMIT	Sect. 5.pdf	01/21/2020
SUPPLEMENTAL INFO	Sect. 9-Woolf.pdf	01/21/2020

COMPLIANCE ACTIONS

000560-19

09/07/2019 - Incident Date
10/08/2019 - Fine and Other
12/05/2019 - Fine
12/19/2019 - Fine Payment (\$250.00)
12/13/2019 - Case Closed

Violations

Statute	Counts	Description
4-202.C	1	No managers agreement form on file
R19-1-302	1	Knowledge of Liquor Laws and Rules

9/7/2019 incident date

10/8/2019 Mail In Consent issued/mailed, \$200.00 Penalty fine assessed
11/8/2019 No response to Mail In consent, Offer rescinded
12/5/2019 Final Notice mailed, \$250.00 Penalty fine assessed
12/13/2019 \$250.00 Fine paid, Receipt #R32250

State of Arizona
Department of Liquor Licenses and Control

Created 02/10/2020 @ 10:08:33 AM

Local Governing Body Report

LICENSE

Number:	INP020010339	Type:	INP INTERIM PERMIT
Name:	MESCAL BAR & GRILL		
State:	Active		
Issue Date:	02/10/2020	Expiration Date:	05/25/2020
Original Issue Date:	02/10/2020		
Location:	70 N CHEROKEE BENSON, AZ 85602 USA		
Mailing Address:	70 N CHEROKEE BENSON, AZ 85602 USA		
Phone:	(520)586-3095		
Alt. Phone:	(520)720-8050		
Email:	MNMSALAS@GMAIL.COM		

AGENT

Name:	AMANDA SUSANNE SALAS
Gender:	Female
Correspondence Address:	70 N CHEROKEE BENSON, AZ 85602 USA
Phone:	(520)720-8050
Alt. Phone:	
Email:	MNMSALAS@GMAIL.COM

OWNER

Name:	MESCAL BAR & GRILL II LLC		
Contact Name:	AMANDA SALAS		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	23052658	State of Incorporation:	AZ
Incorporation Date:	01/15/2020		
Correspondence Address:	70 N CHEROKEE BENSON, AZ 85602 USA		
Phone:	(520)720-8050		
Alt. Phone:			
Email:	AMANDAF@LONGREALTY.COM		

Officers / Stockholders

Name:	Title:	% Interest:
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MORGAN CASEY SALAS
AMANDA SUSANNE SALAS

MEMBER
MEMBER

50.00
50.00

MESCAL BAR & GRILL II LLC - MEMBER

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Gender: Female
Correspondence Address: 600 W 4TH STREET
BENSON, AZ 85602
USA
Phone: (520)720-8050
Alt. Phone:
Email: MNMSALAS@GMAIL.COM

APPLICATION INFORMATION

Application Number: 95005
Application Type: New Application
Created Date: 01/21/2020

Zizee Palma

QUESTIONS & ANSWERS

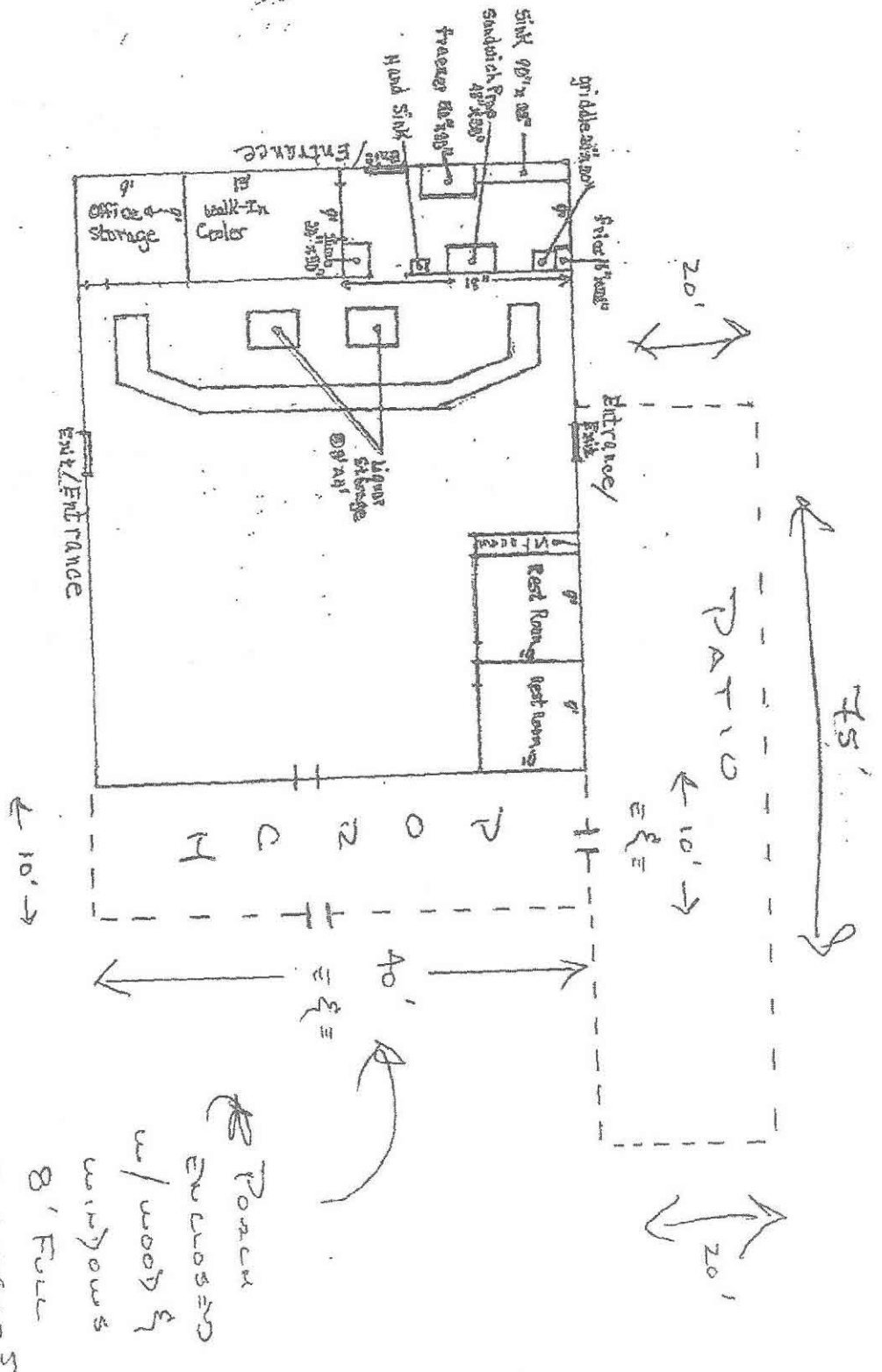
INP Interim Permit

- 1) Enter License Number currently at location
06020084
- 2) Is the license currently in use?
Yes
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page?
Yes
A Document of type INTERIM NOTARY PAGE is required.

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
INTERIM NOTARY PAGE	Sect. 5.pdf	01/21/2020

Approx. 2,000 Sq. Ft.



Porch Enclosure w/ 8' Full Windows



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

20 FEB 10 12:41 PM '14

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. *FP current as of 1/9/19*

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 #: 06020684/95004/95005

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person <input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager <small>(complete all questions except #12)</small>
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2. Name: SALAS Amaria SUSANNE Birth Date: [REDACTED]
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Driver License #: [REDACTED] State: ARIZONA

4. Place of birth: SUN VALLEY CA USA Height: 5'04" Weight: 155 Eyes: BRO Hair: BRO
City State COUNTRY (not county)

5. Name of current/most recent spouse: SALAS MORRIS CASEY Birth Date: [REDACTED]
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: 2005

7. Daytime telephone number: (520) 720-8050 E-mail address: AMARIAF@WORLDREALESTATE.COM

8. Business Name: MECAL BAR & GRILL Business Phone: 520/586/3095

9. Business Location Address: 70 N. CHEROKEE 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)
08/2016	CURRENT	CO-OWNER	WELT VAPOR SHOPPE 608 W. 4TH ST. BENSON, AZ 85602
06/2006	CURR.	PROP. MANAGER	WORLDREALESTATE 642 W. 4TH ST. 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(D)

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
11/2018	CURRENT	600 W. 4TH ST. Benson, AZ 85602
10/2011	11/2018	2072 W. CAVE COTTON LOOP Benson, AZ 85602

(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) Quana Susanne Galas 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: _____

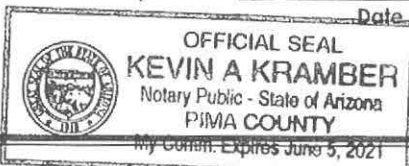
State of Arizona County of Pima

The foregoing instrument was acknowledged before me this

My Commission Expires on: 06/05/2021

21ST Day of JANUARY, 2020

Day Month Year



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

**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) Quang Susan Falls

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 Sun Valley State (or equivalent) CA Country or Territory USA

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).

Arizona

DRIVER LICENSE

USA

NOT FOR FEDERAL IDENTIFICATION



9 CLASS D 4d DLN [REDACTED]
9a END NONE 3 DOB [REDACTED]
12 REST B

1 SALAS
2 AMANDA S

0 600 W 4TH ST
BENSON, AZ 85602-6434

4b EXP 09/05/2039 4a ISS 01/23/2019

15 SEX F 18 EYES BRO
16 HGT: 5'-03" 19 HAIR BRO
17 WGT 150 lb



Amanda Salas

5 DD 4016MV610S1022A4

20 FEB 10 11P. LIC. #M1014

CLASS: D-Operator
ENDORSEMENTS: None
RESTRICTIONS: B-Corrective Lens Must Be Worn
Rev 02/18/2014
You Must Report a Change of Address Within 10 Days
19023A20090762740301

Certificate # 11493

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

**Certificate of Completion
For
Title 4 BASIC 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.

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

Amanda Salas

Full Name (please print)

Amanda Salas

Signature

May 19, 2019

Training Completion Date

May 18, 2022

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Diversys Learning, Inc. DBA SureSellNow.com

Company Name

1011 Arrow Point Drive, Cedar Park, Texas 78613

Mailing Address

512-879-1063

Daytime Contact Phone Number

I, Kelly Bailey, 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).

Kelly Bailey

Instructor Signature

May 19, 2019

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)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
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 11, 2013

19 JUN 5 11:41 AM '19

Certificate # 11493

**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

Amanda Salas

Full Name (please print)

Amanda Salas

Signature

May 19, 2019

May 18, 2022

Training Completion Date

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Diversys Learning, Inc. DBA SureSellNow.com

Company Name

1011 Arrow Point Drive, Cedar Park, Texas 78613

Mailing Address

512-879-1063

Daytime Contact Phone Number

19 JUN 5 11:41 AM '19

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Instructor Name (please print)

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Kelly Bailey

Instructor Signature

May 19, 2019

Day Mo Year

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Hotel/Motel w/restaurant (series 11)
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July 11, 2013



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

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. FP Current 6/19/19

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.

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Liquor License#: 06020084/95004/95005

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person	<input type="checkbox"/> Premises Manager <small>(complete all questions except #12)</small>
--	---

2. Name: SALAS MORGAN CASEY Birth Date: [REDACTED]
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Driver License #: [REDACTED] State: Arizona

4. Place of birth: Redondo Beach CA USA Height: 5'07" Weight: 180 Eyes: Green Hair: Brown
City State COUNTRY (not county)

5. Name of current/most recent spouse: SALAS Amanda SUSANNE Birth Date: [REDACTED]
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: 2006

7. Daytime telephone number: (520) 204-6500 E-mail address: MORGAN_SALAS@YAHOO.COM

8. Business Name: MESCAL BAR & GRILL Business Phone: 520/586/3095

9. Business Location Address: 70 N. CHEROKEE 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)
08/2016	CURRENT	CO-OWNER	VULT VAPOR SHOPPE 600 W. 4TH ST. BENSON, AZ 85602
10/2012	08/2016	SPECIALIST / ELECTRICIAN	SIEMENS 4025 E. GOTTEN CENTER BLVD. #200 AZ 85640

(ATTACH ADDITIONAL SHEET IF NECESSARY)

2018 FEB 10 10:49 AM EST

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

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
11/2018	CURRENT	600 W. 4 TH ST. BENSON, AZ 85602
10/2011	11/2018	2072 W. CAVE COTTAGE LOOP BENSON, AZ 85602

(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) MORUAN CASEY SALAS 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.

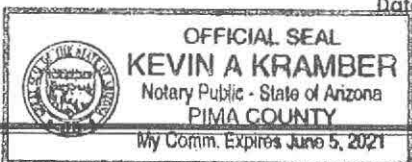
Signature: [Signature]

State of Arizona County of Pima

The foregoing instrument was acknowledged before me this

My Commission Expires on: 06/05/2021 Date

21ST Day of January, 2020
Day Month Year



[Signature]
Signature of Notary

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

PRINT NAME: _____ SIGNATURE: _____

19 JUN 5 11:41 AM 2020

Certificate # 11500

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

**Certificate of Completion
For
Title 4 BASIC 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.

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

Morgan Salas

Full Name (please print)

Morgan Salas

Signature

May 20, 2019

Training Completion Date

May 19, 2022

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Diversys Learning, Inc. DBA SureSellNow.com

Company Name

1011 Arrow Point Drive, Cedar Park, Texas 78613

Mailing Address

512-879-1063

Daytime Contact Phone Number

I, Kelly Bailey, 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).

Kelly Bailey

Instructor Signature

May 20, 2019

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)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
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 11, 2013

Certificate # 11500

19 JUN 5 Lic. Lic. PM 2:30

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

Morgan Salas

Full Name (please print)

[Signature]

Signature

May 20, 2019

7012

May 19, 2022

Training Completion Date

Certificate Expiration Date
(Three years from completion date)

Training Provider Information

Diversys Learning, Inc. DBA SureSellNow.com

Company Name

1011 Arrow Point Drive, Cedar Park, Texas 78613

Mailing Address

512-879-1063

Daytime Contact Phone Number

I, Kelly Bailey, 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).

[Signature]

Instructor Signature

May 20, 2019

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
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July 11, 2013

BILL OF SALE

KL MESCAL BAR AND GRILL, LLC, an Arizona limited liability company (Seller), for good and valuable consideration, the receipt and sufficiency of which are hereby expressly acknowledged, does hereby sell, assign, transfer, and convey to MESCAL BAR & GRILL, LLC, an Arizona limited liability company (Buyer), pursuant to that certain *Agreement* executed December 30, 2019 by and between (without limitation) Seller and Buyer (the "**Agreement**"), all of the Seller's right, title and interest to and in all of the Purchased Assets including, without limitation, the Liquor License (*i.e.*, AZDLLC liquor license no. 06020084), free and clear of all Encumbrances.


This Bill of Sale shall inure to the benefit of the respective successors and permitted assigns of Buyer. This Bill of Sale shall be governed by and construed in accordance with the laws of the State of Arizona, without regard to its conflict of law provisions, to the extent that they would require the application of the laws of a State other than Arizona.

This Bill of Sale is executed and delivered pursuant to the Agreement and is subject to and with the benefit of the respective representations, warranties, covenants, terms, conditions and other provisions thereof. This Bill of Sale does not supersede, replace, substitute for, expand, or extinguish any obligation or provision of the Agreement. In the event of a conflict or an apparent conflict between the provisions of this Bill of Sale and the provisions of the Agreement, the provisions of the Agreement shall control. Capitalized terms used herein and not otherwise defined herein shall have the meanings ascribed to them in the Agreement.

At any time or from time to time hereafter the Seller shall at the written request of Buyer take all action necessary to put Buyer in actual possession and operating control of the Purchased Assets, and shall execute, acknowledge, and deliver such further instruments of conveyance, sale, transfer, and assignment, and take such other action as Buyer may reasonably request in writing in order to more effectively sell, assign, transfer, and convey to Buyer all of the Purchased Assets, to confirm the title of Buyer thereto and to assist Buyer in exercising rights with respect thereto.

IN WITNESS WHEREOF, this Bill of Sale is executed effective as of the 7th day of January, 2020.
KL Mescal Bar and Grill, LLC


By: Keith Lammi
Its: Managing Member


Kimberly Kay Lammi
Its: Managing Member

Accepted by Mescal Bar & Grill, LLC (Buyer):


By: Stephen B. Woolf, Member

20 FEB 10 10 49 AM 2020

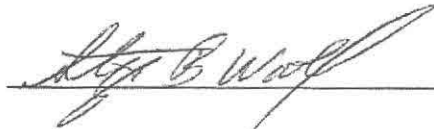
BILL OF SALE

FOR VALUABLE CONSIDERATION of Ten Dollars (\$10.00) Mescal Bar & Grill II, LLC, Inc., Buyer, and Mescal Bar & Grill, LLC, Seller, with other valuable consideration, receipt of which is hereby acknowledged, the Seller, hereby grants, bargains, sells and transfers unto Buyer, its representatives, or assigns, to have and to hold forever, Arizona State Series 6 Liquor License # 06020084.

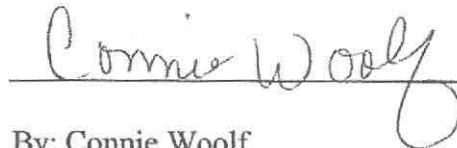
FURTHERMORE, Seller warrants it is the lawful owner of the License, that it has the right, to sell/transfer the License and that the License is free and clear of all claims and liens whatsoever. Seller further agrees to warrant and defend the same against the lawful claims and demands of all persons whomsoever.

DATED this 21st day of January 2020..

SELLER: Mescal Bar & Grill, LLC



By: Bruce Woolf
Its: Member




By: Connie Woolf
Its: Member

STATE OF ARIZONA)
) ss.
COUNTY OF PIMA)

The foregoing instrument was acknowledged before me this 21st day of January 2020 by Bruce Woolf and Connie Wolf.





Notary Public

My Commission Expires: 20/05/2021