

## ALCOHOL BEVERAGE APPLICATION

Alcohol Number \_\_\_\_\_ Year \_\_\_\_\_ Alcohol Account Number \_\_\_\_\_

1. Name of Business Matblago LLC
2. Business Address 1017 US Highway 80 East ste 8
3. City Pooler State Georgia Zip 31322
4. Business Phone ( 912 ) 748-5022 Home Phone ( 912 ) 663-0064
5. Applicant Name and Address: Rudolph Gosyne  
13 Sapphire Island Rd Savannah Ga 31410
6. Applicant Social Security # \_\_\_\_\_ D.O.B. \_\_\_\_\_
7. If Application is a transfer, list previous Applicant:  
 \_\_\_\_\_
8. Business Location: Map & Parcel 816 Cotton Lane Augusta Ga 30901 Zoning \_\_\_\_\_
9. Location Manager(s) Rudolph Gosyne
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?  
 (  ) Yes ( ) No

### OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: 10/28/2020
12. Mailing Address:  
 Name of Business Matblago LLC  
 Attention Rudolph Gosyne  
 Address 1017 US Highway 80 East Suite 8  
 City/State/Zip Pooler GA 31322
13. Ownership Type: ( ) Corporation (  ) Partnership ( ) Individual
14. Corporate Name: Matblago LLC  
 List name and other required information for each person having interest in this business.

Name	Position	SSNO#	Address	Interest
Andrew Matadin	owner		2926 Black birch rd Ocoee Fl 34761	33%
Reed Blair	Owner		134 Greyfield Cir Savannah Ga 31407	33%
<u>RUDOLPH GOSYNE</u>	<u>OWNER</u>		<u>13 SAPPHIRE ISLAND RD</u>	<u>33%</u>

15. What type of business will you operate in this location?  
 (  ) Restaurant - Full ( ) Lounge ( ) Convenience Store  
 ( ) Restaurant - Limited ( ) Package Store ( ) Hybrid  
 ( ) Other: \_\_\_\_\_

License Information	Liquor	Beer	Wine	Dance	Sunday Sales
Retail Package Dealer					
Consumption on Premises	x	x	x	x	x
Wholesale					

Total License Fee: \$ \_\_\_\_\_  
 Prorated License Fee: (After July 1 ONLY) \$ \_\_\_\_\_

16. Have you ever applied for an Alcohol Beverage License before: no  
 If so, give year of application and its disposition: NA
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? (  ) Yes ( ) No If so, please initial RG

18. Attach a passport-size photograph (front view) taken within two years. Write name on back of the dealer submitting the license application.



19. Has any liquor business in which you hold, or have held, any financial interest employed, or have been employed, ever been cited for any violation of the regulations of Augusta-Richmond County or the State Revenue Commission the sale and distribution of distilled spirits? ( ) Yes (x) No  
If yes, give full details: \_\_\_\_\_

20. Have you ever been arrested, or held by Federal, State, or other law-enforcement authorities, for any violation of any Federal, State, County or Municipal law, regulation or ordinance: (Do not include traffic violations, with the exception of any offenses pertaining to alcohol or drugs). All other charges must be included, even if they are dismissed. ( ) Yes (x) No  
If yes, give reason charged or held, date and place where charged and its disposition.

21. List owner or owners of building and property.  
Margaret B Copenhaver Magnolia LLC

22. List the name and other required information for each person, firm or corporation having any interest in the business. Reed Blair Andrew Matadin

23. If a new application, attach a surveyor's plat and state the straight line distance from the property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold.

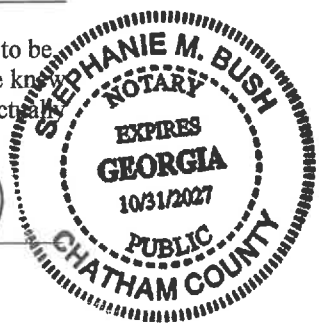
A) Church \_\_\_\_\_ C) School \_\_\_\_\_  
B) Library \_\_\_\_\_ D) Public Recreation \_\_\_\_\_

24. State of Georgia, Augusta-Richmond County, I, \_\_\_\_\_  
Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant in the forgoing alcoholic beverage application are true.

*[Handwritten Signature]*

25. I hereby certify that Rudolph Gasque Applicant Signature is personally known to be \_\_\_\_\_  
That he/she signed his/her name to the forgoing allocation stating to me that he/she knows and understood all statements and answers made herein, and, under oath administered by me, has sworn that said statements and answers are true.  
This 18<sup>th</sup> day of July in the year 2024

*[Handwritten Signature: Stephanie M. Bush]*  
Notary Public



**FOR OFFICE USE ONLY**

Department Recommendation	Approve	Deny	Comments
Alcohol Inspector			
Sheriff			
Fire Inspector			

The Board of Commissioners on the \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_  
(Approved, Disapproved) the forgoing application

\_\_\_\_\_  
Administrator Date