

State of Arizona
Department of Liquor Licenses and Control

Created 06/24/2025 @ 01:02:11 PM

Local Governing Body Report

LICENSE

Number: 09020004 Type: 009 LIQUOR STORE
Name: DOUGLAS BEVERAGE & GROCERY
State: Pending
Issue Date: Expiration Date: 06/30/2025
Original Issue Date: 11/02/1972
Location: 1330 SAN ANTONIO AVENUE
DOUGLAS, AZ 85607
USA
Mailing Address: [REDACTED]
[REDACTED]
[REDACTED]
Phone: [REDACTED]
Alt. Phone:
Email: MERECOINC@GMAIL.COM

Currently, this license has pending applications.

AGENT

Name: LAUREN KAY MERRETT
Gender: Female
Correspondence Address: [REDACTED]
[REDACTED]
[REDACTED]
Phone: [REDACTED]
Alt. Phone:
Email: MERECOINC@GMAIL.COM

OWNER

Name: DOUGLAS BEVERAGE & GROCERY LLC
Contact Name: LAUREN KAY MERRETT
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 23825087 State of Incorporation: AZ
Incorporation Date: 05/09/2025
Correspondence Address: [REDACTED]
[REDACTED]
[REDACTED]
Phone: [REDACTED]
Alt. Phone:
Email: MERECOINC@GMAIL.COM

Officers / Stockholders

60th Day



8-23-2025

Name:
SUKHCHAIN SINGH SANDHU



Title:
Member

% Interest:
100.00

DOUGLAS BEVERAGE & GROCERY LLC - Member

Name: SUKHCHAIN SINGH SANDHU
Gender: Male
Correspondence Address: 
Phone: 
Alt. Phone:
Email: MERECOINC@GMAIL.COM

MANAGERS

Name: ENRIQUE ALEJANDRO CHAVEZ
Gender: Male
Correspondence Address: 
Phone: 
Alt. Phone:
Email: MERECOINC@GMAIL.COM

APPLICATION INFORMATION

Application Number: 349580
Application Type: Owner Transfer
Created Date: 06/03/2025

QUESTIONS & ANSWERS

009 Liquor Store

- 1) Are you applying for an Interim Permit (INP)?
Yes
What date are you taking ownership? Please upload the Interim Permit Notary page when you reach the upload page.
06/10/2025
- 8) Did the Premises phone number change?
No
- 10) Will there be an agent on this license?
Yes
A Document of type QUESTIONNAIRE is required.
- 12) Provide name, address, and distance of nearest school. (If less than one (1) mile note footage)
Omega alpha Academy
1402 San Antonio Ave., Douglas, AZ 85607
690 feet

- 13) Are you one of the following? Please indicate below.
 Property Tenant
 Subtenant
 Property Owner
 Property Purchaser
 Property Management Company
 Property tenant
- 14) Is there a penalty if lease is not fulfilled?
 Yes
 What is the penalty?
 Balance of lease
- 15) What is the total money borrowed for the business not including the lease?
 Please list lenders/people owed money for the business.
 0 self-funded
- 16) Is there a drive through window on the premises?
 No
- 17) If there is a patio please indicate contiguous or non-contiguous within 30 feet
 N/A
- 18) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
 No
- 19) Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only)
 Undisclosed

DOCUMENTS

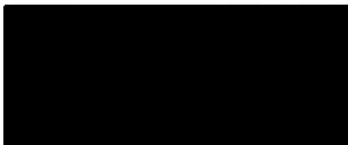


DOCUMENT TYPE	FILE NAME	UPLOADED DATE
ALIEN STATUS	Alien Status form copy copy.pdf	06/03/2025
DIAGRAM/FLOOR PLAN	Diagram.pdf	06/03/2025
INTERIM PERMIT NOTARY PAGE	IP copy.pdf	06/03/2025
ORGANIZATIONAL DOCUMENTS	Flow chart copy.pdf	06/03/2025
QUESTIONNAIRE	Ken Q copy copy.pdf	06/03/2025
MISCELLANEOUS	Statement regarding IP copy.pdf	06/03/2025
MISCELLANEOUS	Sect 5 & 7 copy.pdf	06/03/2025
QUESTIONNAIRE	My Q copy copy copy copy.pdf	06/03/2025
	Amended Alien Status form.pdf	06/16/2025
	Amended for title Flow chart.pdf	06/16/2025
	Enrique amended for ampersand copy.pdf	06/16/2025
	Enrique statement and mgmt cert copy.pdf	06/16/2025

State of Arizona
Department of Liquor Licenses and Control

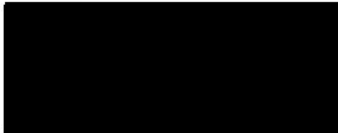


Created 06/24/2025 @ 12:51:29 PM

Local Governing Body Report

LICENSE

Number:	INP020033818	Type:	INP INTERIM PERMIT
Name:	DOUGLAS BEVERAGE & GROCERY		
State:	Active		
Issue Date:	06/24/2025	Expiration Date:	10/07/2025
Original Issue Date:	06/24/2025		
Location:	1330 SAN ANTONIO AVENUE DOUGLAS, AZ 85607 USA		
Mailing Address:			
Phone:			
Alt. Phone:			
Email:	MERECOINC@GMAIL.COM		

AGENT

Name:	LAUREN KAY MERRETT
Gender:	Female
Correspondence Address:	
Phone:	
Alt. Phone:	
Email:	MERECOINC@GMAIL.COM

OWNER

Name:	DOUGLAS BEVERAGE & GROCERY LLC		
Contact Name:	LAUREN KAY MERRETT		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	23825087	State of Incorporation:	AZ
Incorporation Date:	05/09/2025		
Correspondence Address:			
Phone:			
Alt. Phone:			
Email:	MERECOINC@GMAIL.COM		



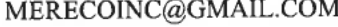
Officers / Stockholders

Name:
SUKHCHAIN SINGH SANDHU

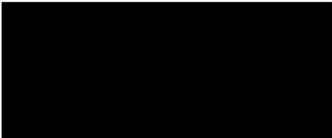


Title:
Member

% Interest:
100.00

**DOUGLAS BEVERAGE & GROCERY LLC -
Member**

Name: SUKHCHAIN SINGH SANDHU
Gender: Male
Correspondence Address: 
Phone: 
Alt. Phone: 
Email: MERECOINC@GMAIL.COM

MANAGERS

Name: ENRIQUE ALEJANDRO CHAVEZ
Gender: Male
Correspondence Address: 
Phone: 
Alt. Phone: 
Email: MERECOINC@GMAIL.COM

APPLICATION INFORMATION

Application Number: 349615
Application Type: New Application
Created Date: 06/03/2025

QUESTIONS & ANSWERS

INP Interim Permit

- 1) Enter License Number currently at location 09020004
- 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

SECTION 5 Interim Permit

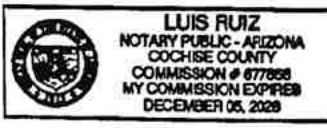
25 6 20 Ltr. Dept AM 8:40

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. § 4-203.01. For approval of an Interim permit: There must be a valid license of the same series currently issued to the location.

- Current license number at the Premises: 09020004
- If the license is **NOT** currently in use, how long has it been since the license was last used at this location? N/A

I (Print Full Name) Paul Thomas Schneider hereby declare that I am the Current Owner, Agent, or Controlling Person on the stated license and location.

Sign in front of Notary: Paul Thomas Schneider

State of <u>Arizona</u>	 <p>Notary Seal</p>
County of <u>Cochise</u>	
Signed before me on this <u>18</u> day of <u>June</u> , 20 <u>25</u> .	
Notary Signature <u>Luis Ruiz</u>	
My commission expires on <u>12 / 05 / 2028</u>	

SECTION 6 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

- If the applicant is an entity, and not an individual, answer questions 1a-b.
 - Date Incorporated/Organized: _____ State where Incorporated/Organized: _____
 - AZ Corporation or AZ L.L.C. Entity No: _____ Approval Date: _____
- List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip

(Attach additional sheet if necessary)

SECTION 7 Person to Person Transfer ARS§4-203(C), (D), (G)

25 6 5 Lic. Dept AM 7:33

1. License #: 09020004
2. Current Agent Name / Individual Name: Schneider Paul Thomas
Last First Middle
3. Current Ownership Name: Gold Sawmill Ventures, Inc.
(Exactly as it appears on the license)
4. Premises Name: GRAN LINEA BEBIDES
(Exactly as it appears on the license)
5. Premises Location Address: 1330 SAN ANTONIO AVENUE DOUGLAS AZ COCHISE 85607
Street City State County Zip
6. Current Daytime Phone: [REDACTED] Email Address: paul.schneider@iname.com
7. Does current licensee intend to operate the business while this application is pending? ☒ Yes ☐ No
8. I, (Signature): Paul Schneider authorize the transfer of this license to the applicant.
(Current Agent/Individual as listed on the license certificate)

SECTION 8 Location Transfer- Current Licensee Information ARS§4-203(C), (D), (G)

1. License #: _____
2. Current Business: Name: _____
Address: _____
(Exactly as it appears on license)
3. New Business: Name: _____
Address: _____

SECTION 9 Proximity to School

A.R.S. §4-207 States that no **retailer's license** shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12), or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

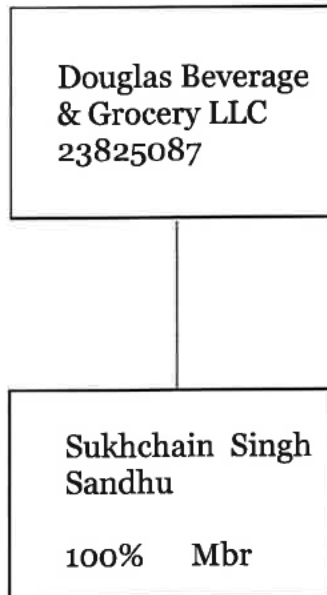
The above paragraph **DOES NOT** apply to:

Series 01 Producer
Series 03 Microbrewery
Series 04 Wholesaler/Distributor
Series 05 Government license
Playing area of a golf course

Series 11 Hotel/motel license
Series 12 Restaurants that do not sell growlers
Series 13 Farm Winery
Series 18 Craft Distillery

Distance to nearest School: _____ Name of School: _____
(If less than one (1) mile, note footage)

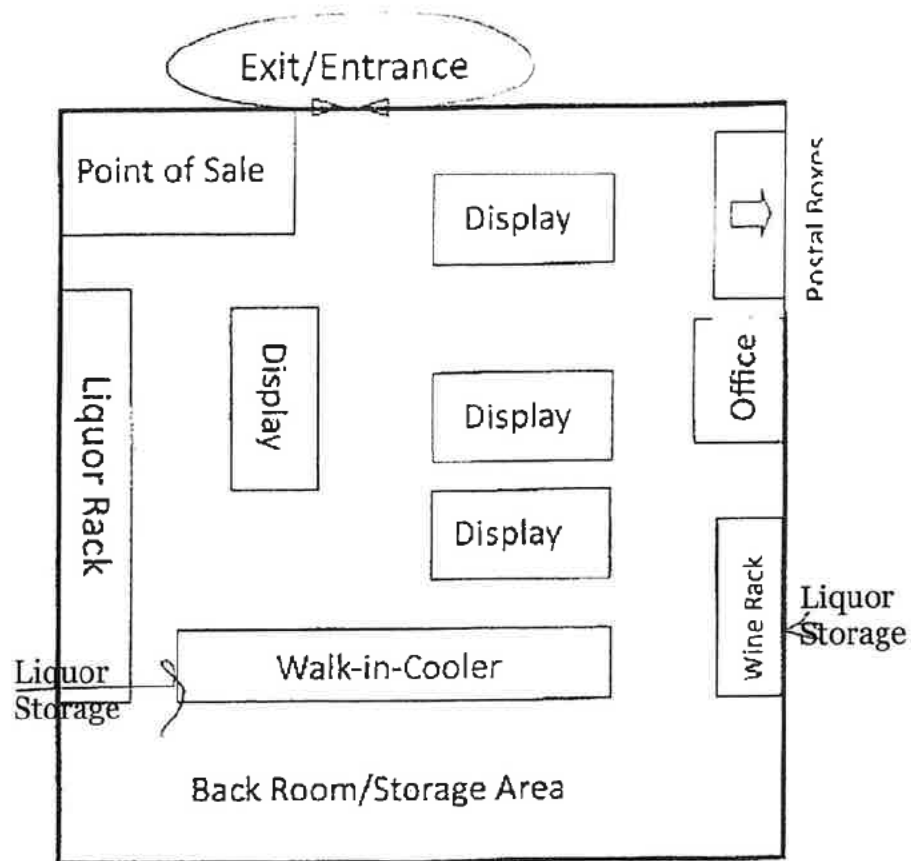
School Address: _____



*25 6 5 Lir. Dept AM 7:33

Douglas Beverage & Grocery
1330 San Antonio Ave
Douglas AZ 85607

5900 ft.²





Fee:
Job #: 349580
Date Accepted: 6-3-2025
CSR: Chays

FP Current
3-15-2024

Personal Information Questionnaire

ATTENTION APPLICANT: This is a legally binding document. 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.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.

A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.

A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.

A.R.S. §4-101(22) and
A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

☒ AGENT

☐ CONTROLLING PERSON

☐ MANAGER

- Name: Merrett, Lauren Kay
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: B01257964 State Issued: AZ
(NOT a public record)
- Are you a resident of Arizona? ☒ Yes ☐ No Date of residency: [REDACTED]
- Email address: Merecoinc@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: [REDACTED] Alternative phone #: 602/738/1421

SECTION 2 – LICENSED BUSINESS INFORMATION

- License Number: 09020004
- Business Name (doing business as): Douglas Beverage & Grocery
- Business Address: 1330 San Antonio Ave Douglas AZ 85607

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? ☐ Agent ☐ Controlling Person ☒ Manager

Name of persons who will be handling the day to day operations: Enrique Chavez

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 **YOU MUST** attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes ☐ No ☒
2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes ☐ No ☒
3. 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 5 years? A.R.S. §4-202(D) Yes ☐ No ☒
4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets)
A.R.S. §4-202, 4-210
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒

I, (Print Full Name) Lauren Kay Merrett hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature: Lauren Kay Merrett Date: 01/02/2024



ALIEN STATUS

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

Type or Print with Black Ink

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

APPLICANT NAME (Print or type) Lauren Kay Merrett

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 Phoenix State AZ COUNTRY USA

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

2) Name of document: Drivers license

If you answered **No**, you must complete Sections III.

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 Jan. 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.

SECTION III – QUALIFIED ALIEN DECLARATION

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.
- 14. **Otherwise Lawfully Present**
- 15. 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. §

Lauren Kay Merrett

Print Name

Lauren Kay Merrett

Signature

2/19/2025

Date

25 6 18 Lic. Dept PW 142



ARIZONA U
The Grand Canyon State A

DRIVER LICENSE

NOT VALID FOR OFFICIAL FEDERAL PURPOSES



Lauren Kay Merrett

4d DLN [REDACTED] 4b EXP [REDACTED]
4a ISS 03/11/2024 3 DOB [REDACTED]
1 **MERRETT**
2 **LAUREN**
3 **KAY**
4 [REDACTED]
15 SEX 16 HGT 18 EYES 17 WGT
F [REDACTED]
9 CLASS 9a ENDORSEMENTS
D NONE
12 RESTRICTIONS
NONE
5 DOB [REDACTED] [REDACTED]

48101445824



9 CLASS D - Operator
9a ENDORSEMENTS
NONE

Rev 02/28/2023

12 RESTRICTIONS
NONE

DOB
12/19/1958

You Must Report a Change of Address Within 10 Days



Fee:	
Job #	349580
Date Accepted	6-3-2025
CSR:	Chaya

805-906

Personal Information Questionnaire

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A.R.S. §4-101(10).

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A.R.S. §4-101(22) and
A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

☐ AGENT

☒ CONTROLLING PERSON

☐ MANAGER

- Name: Sandhu, Sukhchain Singh
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: [REDACTED] State Issued: WA
(NOT a public record)
- Are you a resident of Arizona? ☐ Yes ☒ No Date of residency: / /
- Email address: Merecoinc@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: [REDACTED] Alternative phone #: [REDACTED]

SECTION 2 – LICENSED BUSINESS INFORMATION

- Liquor License #: 09020004
- Business Name (doing business as): Douglas Beverage & Grocery
- Business Address: 1330 San Antonio Ave Douglas AZ 85607

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

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Name of persons who will be handling the day to day operations: Enrique Chavez

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1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes ☒ No ☐
2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes ☐ No ☒
3. 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 5 years? *A.R.S. §4-202(D)* Yes ☐ No ☒
4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets)
A.R.S. §4-202, 4-210
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒

I, (Print Full Name) Sukhchain S Sandhu hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature: 

Date: 06/02/2025

'25 6 5 Lique. Dept AM 7:33

I have ownership in two other licenses:
#010020028598-Junction Express
#06020035-Gadsden Hotel

B. Benel



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY

Job #	349580
Date Accepted:	6-3-2025
CSR:	Chavez

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

PRINT the following information:

Date	Name of Applicant:		
06/10/25	Sandhu Sukhchain S		
Name of Fingerprint Technician:			
Azeneth Balderrama Jaquez			
Fingerprint technician's Signature:			
ABJ Jaquez			
Fingerprint technician's Agency/company Name:		Phone Number:	
Hobbs Police Department		(575) 397 9265	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			



Fee:	
Job #	349580
Date Accepted:	6-9-2025
CSR:	Chavez

805-906

Personal Information Questionnaire

ATTENTION APPLICANT: This is a legally binding document. 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.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.

A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.

A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.

A.R.S. §4-101(22) and
A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

☐ AGENT

☐ CONTROLLING PERSON

☒ MANAGER

- Name: Chavez, Enrique Alejandro
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: [REDACTED] State Issued: AZ
(NOT a public record)
- Are you a resident of Arizona? ☒ Yes ☐ No Date of residency: [REDACTED]
- Email address: Merecoinc@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: [REDACTED] Alternative phone #: [REDACTED]

SECTION 2 – LICENSED BUSINESS INFORMATION

- Liquor License #: 09020004
- Business Name (doing business as): Douglas Beverage & Grocery
- Business Address: 1330 San Antonio Ave Douglas AZ 85607

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? ☐ Agent ☐ Controlling Person ☒ Manager

Name of persons who will be handling the day to day operations: Enrique Chavez

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 **YOU MUST** attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes ☐ No ☒
2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes ☐ No ☒
3. 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 5 years? A.R.S. §4-202(D) Yes ☐ No ☒
4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets)
A.R.S. §4-202, 4-210
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes ☐ No ☒
5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☒ No ☐

I, (Print Full Name) Enrique Alejandro Chavez hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature:  Date: 5/31/2025

To Whom It May Concern:

I Enrique Alejandro Chavez am writing to provide context regarding my past and to share the significant strides I have made since then. In 2014, I faced a conviction for fraud and computer tampering. This experience was a pivotal moment in my life, prompting me to reflect deeply on my choices and the impact they had on my future.

Since that time, I have taken full responsibility for my actions. I completed all restitution and obligations, demonstrating my commitment to making amends and learning from my past mistakes. I am proud to share that my rights to purchase and bear arms have been reinstated, symbolizing my dedication to living a law-abiding life and contributing positively to my community.

Motivated by my desire to turn my life around, I embarked on an entrepreneurial journey that has led me to open my own business. Today, I am proud to manage a successful chain of six hotels. This venture has not only allowed me to apply my skills in management and operations but has also provided me with the opportunity to create jobs and contribute to the local economy.

As I continue to grow my business, I am now seeking to obtain clearance to manage an off-site liquor license. This step is crucial for expanding my business offerings and enhancing the guest experience at my hotels. I am committed to upholding the highest standards of compliance and responsibility in this endeavor, ensuring that I operate within the law and contribute positively to the community.

I believe that my past has equipped me with unique insights and resilience that will serve me well in this next chapter. I am eager to demonstrate my commitment to ethical business practices and to continue making a positive impact in my community.

Thank you for considering my application. I look forward to the opportunity to further discuss my journey and aspirations.

Sincerely,



Enrique Alejandro Chavez



Douglas AZ, 85607



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY

Job#:	349580
Date Accepted:	6-3-2025
CSR:	Chavez

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

PRINT the following information:

Date 6-2-25	Name of Applicant: Enrique A. Chavez
Name of Fingerprint Technician: Ana M. Ojeda-Hoffman	
Fingerprint technician's Signature: [Signature]	
Fingerprint technician's Agency/company Name: AZC Drug Testing	Phone Number: 520-685-3216
Type of Photo ID Provided (check one):	
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)	

25 6 6 Lic. Dept RM 742

Certificate # On-line

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

☐ On-sale
☒ Off-sale
☐ 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

Enrique Alejandro Chavez

Full Name (please print)

Signature *The certificate must be signed to be valid.

05/31/2025

Training Completion Date

05/31/2028

Certificate Expiration Date
(three years from completion date) *Please enter manually

Training Provider Information

M Mereco Inc. - AAFC
Company Name

736 S. Longmore St Chandler AZ 85224
Mailing Address

602-738-1421
Daytime Contact Phone Number

I, Lauren Merrett, 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).

Lauren Merrett
Instructor Signature

05/31/2025

Date

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)
LiquorStore (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.

Certificate # AZM-ON01205138

1756 18 Lic. Dept # 143

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

Enrique Chavez

Full Name (please print)


Signature

12/06/2022

Training Completion Date

12/05/2025

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

5000 Plaza on the Lake, Suite 305, Austin, TX 78746

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, 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

12/06/2022

Day Mo Year

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BILL OF SALE

IN CONSIDERATION OF THE SUM OF:

TEN DOLLARS AND NO CENTSlawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged.

This BILL OF SALE (this "Agreement"), dated as of June 9, 2025 is by and among Gold Sawmill Ventures Inc, an Arizona Corporation (Seller), and Douglas Beverage & Grocery LLC, an Arizona Limited Liability Company (Buyer).

AZ Liquor license #09020004

RECITALS

A. Seller and Buyer are parties to an Asset Purchase Agreement executed February 6, 2025 (the "Purchase Agreement"), pursuant to which, among other things, Buyer has agreed to purchase certain assets of Seller upon the terms and conditions specified therein.

B. This Agreement is being executed and delivered in order to affect the transfer to Buyer of such assets as set forth in the Purchase Agreement.

AGREEMENTS

In consideration of the premises and the mutual covenants and agreements set forth in the Purchase Agreement, the parties hereby agree as follows:

1. **Definitions.** Capitalized terms used in this Agreement and not otherwise defined herein shall have the meaning ascribed thereto in the Purchase Agreement.
2. **Sale of Assets.** Seller, in accordance with and subject to the terms of the Purchase Agreement, hereby sells, conveys, assigns, transfers and delivers to Buyer, and Buyer, in accordance with and subject to the Purchase Agreement, hereby purchases and acquires from Seller, all of Seller's right, title and interest of every kind and nature, that certain business known as **Gran Linea Bebidas**, presently located at 1330 San Antonio Avenue, Douglas, AZ 85607, including state of Arizona Liquor License #09020004 and that certain equipment per the attached Exhibit "A", which exhibit is incorporated herein by reference. FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said personal property and hereby certifies, under oath, that he, she or they have good right to sell the same as aforesaid, and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein. Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.
3. **Counterparts.** This Agreement is executed pursuant to the Purchase Agreement and may be executed in two counterparts, each of which as so executed shall be deemed to be an original but both of which together shall constitute one and the same instrument. A facsimile signature shall be acceptable as an original for all purposes.
4. **Binding Effect.** This Agreement shall inure to the benefit of and be binding upon Buyer and Seller, and their respective successors and assigns, but shall not create any right of subrogation or other right on the part of any other person.
5. **Amendment, Waiver or Termination.** This Agreement cannot be amended, waived or terminated except by a writing signed by the parties hereto.
6. **Governing Law.** THIS AGREEMENT SHALL BE CONSTRUED IN ACCORDANCE WITH THE LAWS OF THE STATE OF ARIZONA.

IN WITNESS WHEREOF, Buyer and Seller have caused this Bill of Sale to be executed individually or in their respective corporate names by their respective proper officers thereunto duly authorized, as of the date first written above.

Dated: June 9, 2025

SELLER:

Gold Sawmill Ventures Inc, an Arizona Corporation

DocuSigned by:



Paul Thomas Schneider, President

BUYER:

Douglas Beverage & Grocery LLC, an Arizona Limited Liability Company

Sukhchain Singh Sandhu, Member

BILL OF SALE

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Dated: June 9, 2025

SELLER:

Gold Sawmill Ventures Inc, an Arizona Corporation

Paul Thomas Schneider, President

BUYER:

Douglas Beverage & Grocery LLC, an Arizona Limited Liability Company

DocuSigned by:



Sukhchain Singh Sandhu, Member

**EXHIBIT A
INCLUDED ASSETS**

1. All neon signs/lights hanging on the walls will transfer with sale.
2. All Mirrors hanging on walls will transfer.
3. Shelving and displays shall remain and transfer with sale.
5. Cases along with cash registers "No Cash" just registers shall transfer.
6. All freezers/cold boxes or walk in freezers shall transfer.
7. Two "2" safes shall transfer " Seller only has combo for 1 safe and shall give the Combo on or prior to closing.
8. Three Pool Tables shall transfer " 2 pool tables are free standing /built and the other needs to be built.
9. All fans shall transfer.
10. All appliances "washer, dryer and stove" shall transfer.
11. Free standing/ mailboxes shall transfer.
12. Ladders and any tools used in the operation or maintenance of day-to-day business.
13. Cochise County Liquor License 09020004

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