State of Arizona **Department of Liquor Licenses and Control**

Created 06/24/2021 @ 08:27:39 AM

Local Governing Body Report

LICENSE

Number:

06020035

Type:

006 BAR

Name:

GADSDEN

State:

Pending

Issue Date:

Expiration Date:

06/30/2022

Original Issue Date:

01/01/1934

Location:

1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Mailing Address:

1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(520)364-4481

Alt. Phone: Email:

(602)545-9840 ERICKHARRELL43@GMAIL.COM

Currently, this license has pending applications.

AGENT

Name:

ERICK CHRISTOPHER HARRELL

Gender:

Male

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email:

ERICKHARRELL43@GMAIL.COM

OWNER

Name:

Type:

2201 N 7TH LLC

Contact Name:

ERICK CHRISTOPHER HARRELL LIMITED LIABILITY COMPANY

AZ CC File Number:

L20040926

State of Incorporation: AZ

Incorporation Date:

05/14/2015

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email:

ERICKHARRELL43@GMAIL.COM

Officers / Stockholders

Name:

Title:

% Interest:

2201 N 7TH LLC - Managing Member

Name:

ERICK CHRISTOPHER HARRELL

Gender:

Male

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email:

ERICKHARRELL43@GMAIL.COM

APPLICATION INFORMATION

Application Number:

153405

Application Type:

Owner Transfer

Created Date:

06/24/2021 Solener

QUESTIONS & ANSWERS

006 Bar

1) Are you applying for an Interim Permit (INP)?

Yes

A Document of type INTERIM PERMIT (INP) NOTARY PAGE is required.

4) 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?

No

8) Did the Premises phone number change?

No

10) Provide name, address, and distance of nearest school and church. (If less than one (1) mile note footage)

PPEP TEC HIGH SCHOOL 1122 G AVE DOUGLAS AZ 85607 350 FEET

GRACE UNITED METHODIST 715 11TH ST DOUGLAS AZ 85607 1056 FEET

11) Are you one of the following? Please indicate below.

Property Tenant

Sub-tenant

Property Owner

Property Purchaser

Property Management Company

OWNER

12) Is there a penalty if lease is not fulfilled?

No

13) What is the total money borrowed for the business not including the lease?

Please list lenders/people owed money for the business.

0

14) Is there a drive through window on the premises?

No

15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.

CONTIGUOUS

16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

No

23) Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only)

0

State of Arizona **Department of Liquor Licenses and Control**

Created 06/24/2021 @ 08:26:17 AM

Local Governing Body Report

LICENSE

Number:

INP020014295

Type:

Expiration Date:

INP INTERIM PERMIT

10/07/2021

Name:

GADSDEN

State:

Active

Issue Date: Original Issue Date: 06/24/2021

06/24/2021

Location:

1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Mailing Address:

1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(520)364-4481

Alt. Phone:

(602)545-9840

Email:

ERICKHARRELL43@GMAIL.COM

AGENT

Name:

ERICK CHRISTOPHER HARRELL

Gender:

Male

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email:

ERICKHARRELL43@GMAIL.COM

OWNER

Name:

Type:

2201 N 7TH LLC

Contact Name:

ERICK CHRISTOPHER HARRELL LIMITED LIABILITY COMPANY

AZ CC File Number:

L20040926

State of Incorporation: AZ

Incorporation Date:

05/14/2015

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email: ERICKHARRELL43@GMAIL.COM

Officers / Stockholders

Name:

Title:

% Interest:

2201 N 7TH LLC - Managing Member

Name:

ERICK CHRISTOPHER HARRELL

Gender:

Male

Correspondence Address: 1046 N G AVENUE

DOUGLAS, AZ 85607

USA

Phone:

(602)545-9840

Alt. Phone:

Email:

ERICKHARRELL43@GMAIL.COM

APPLICATION INFORMATION

Application Number:

153406

Application Type:

New Application

Created Date:

06/24/2021

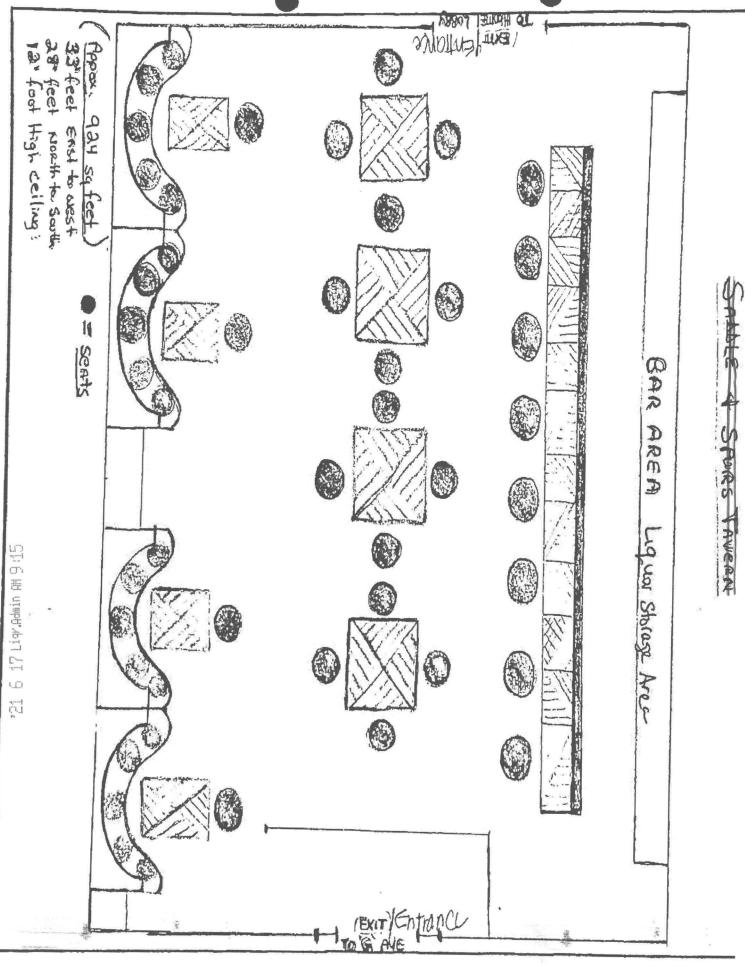
QUESTIONS & ANSWERS

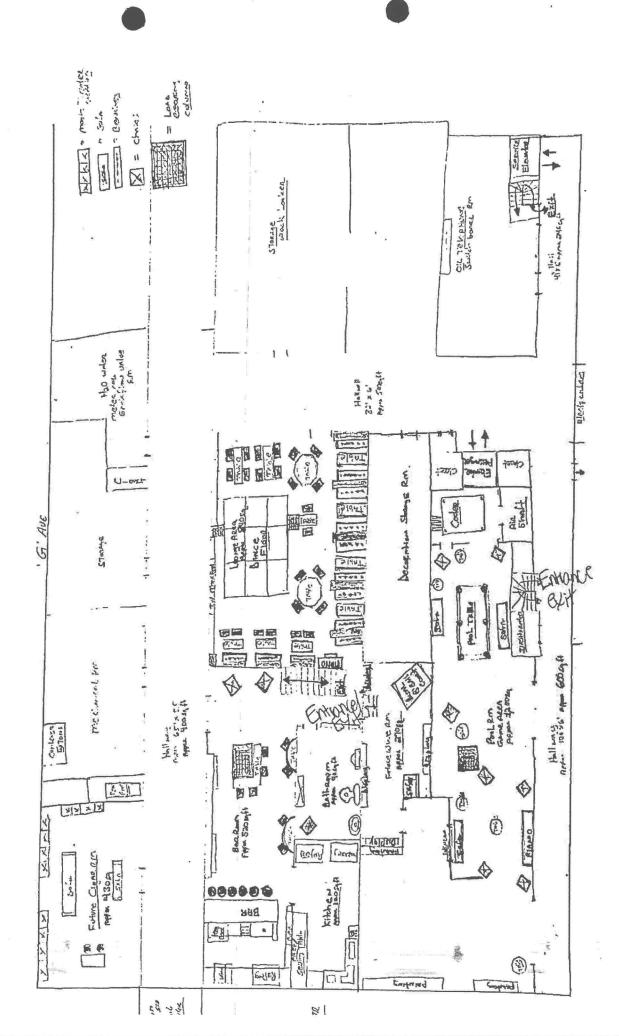
INP Interim Permit

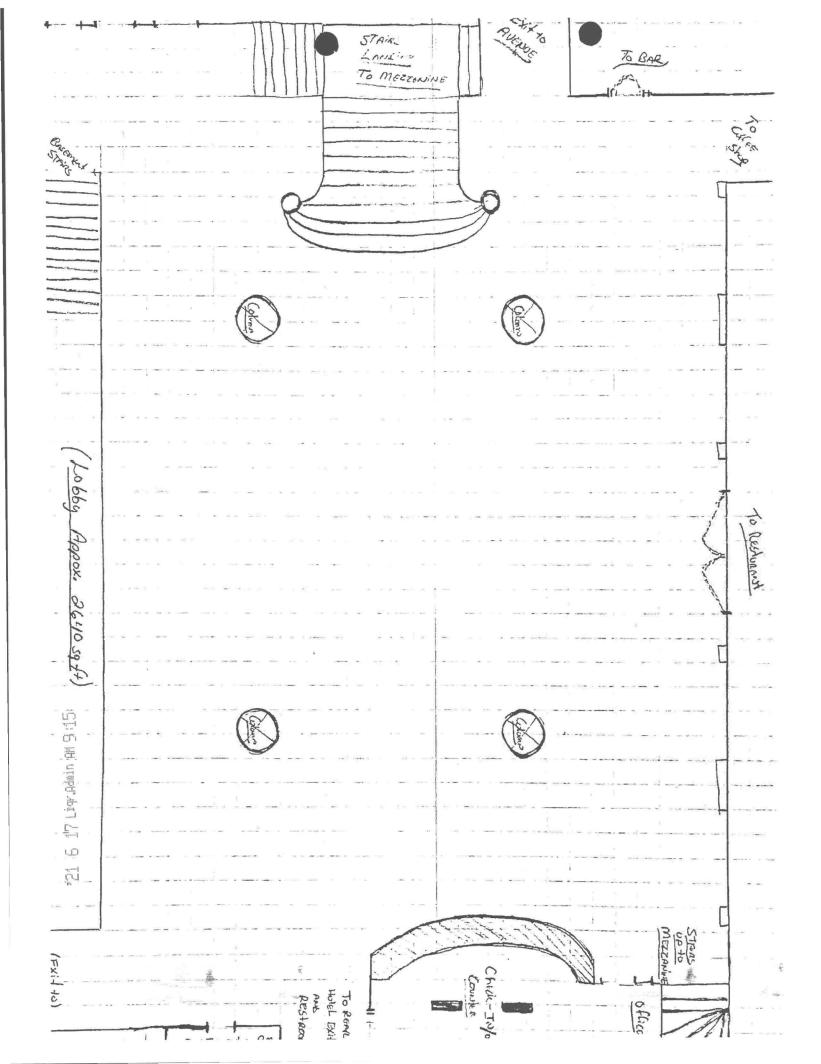
1) Enter License Number currently at location 06020035

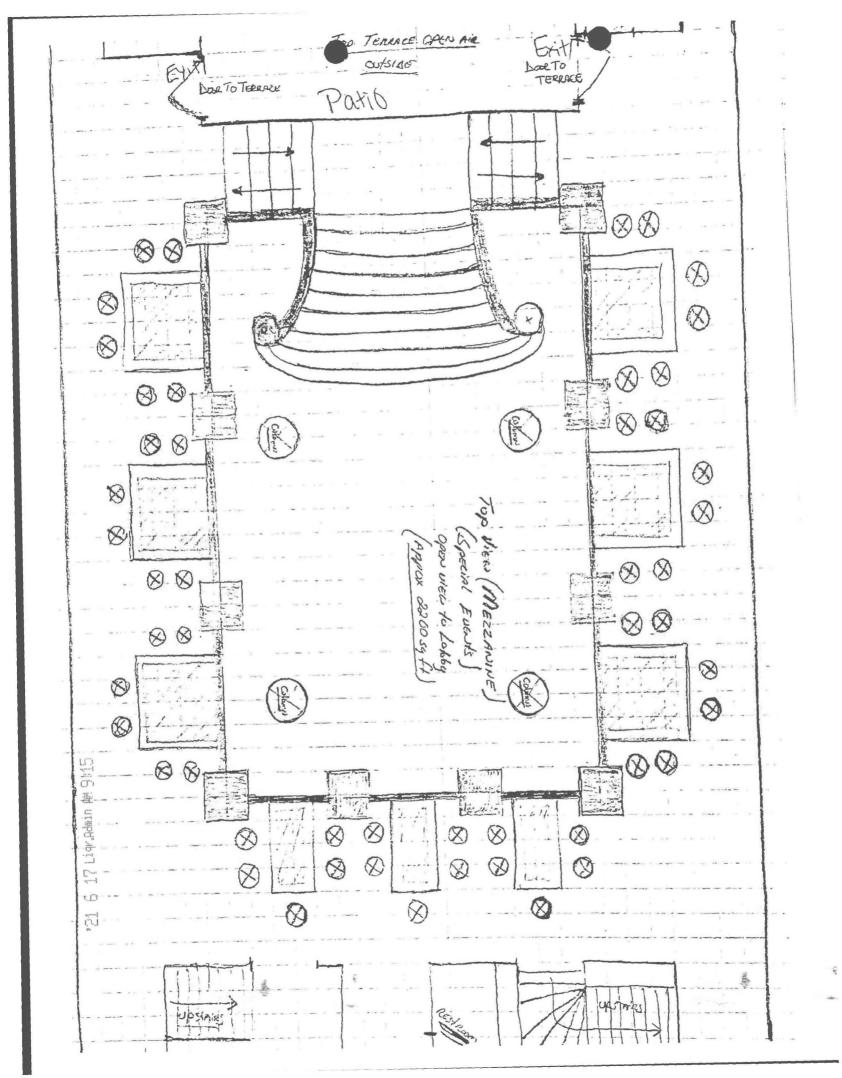
2) Is the license currently in use?

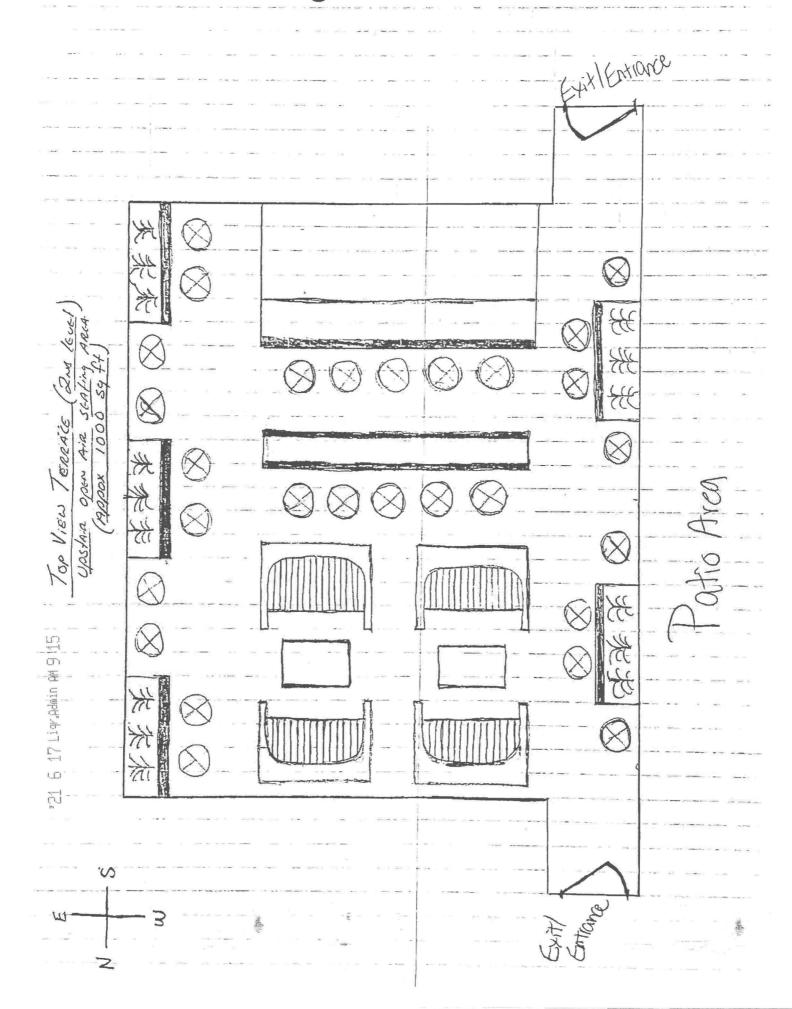
Will you please submit section 5, page 6, of the license application when you reach the upload page? 3) No

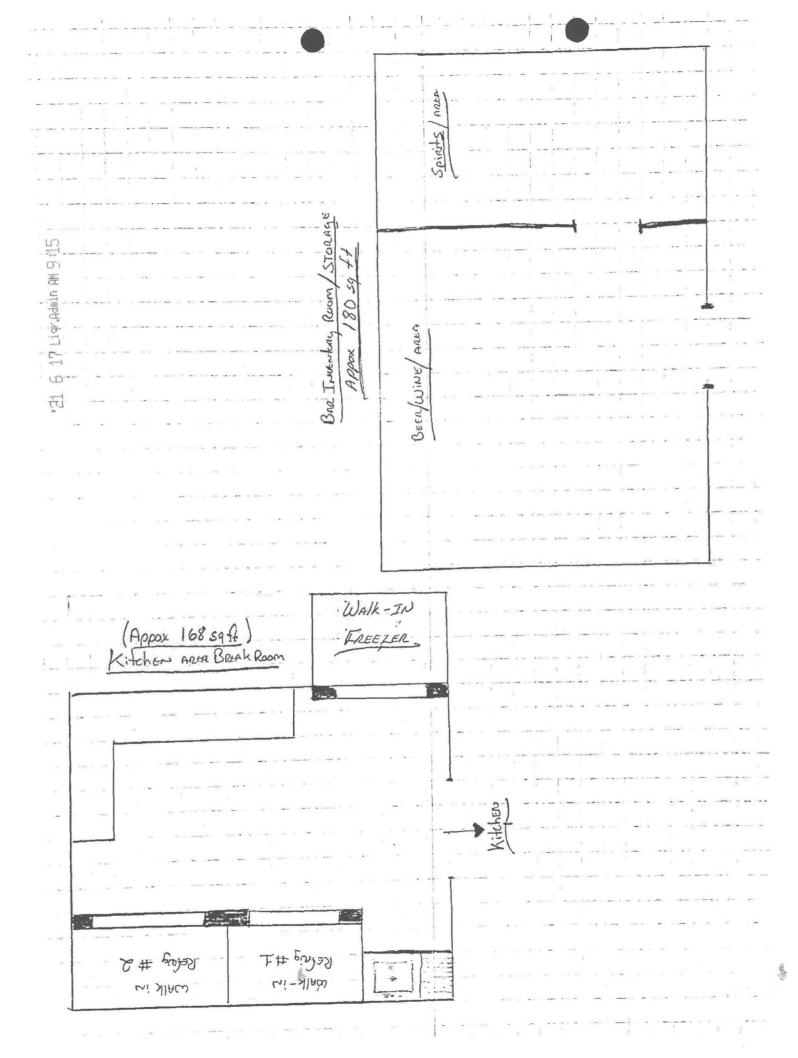






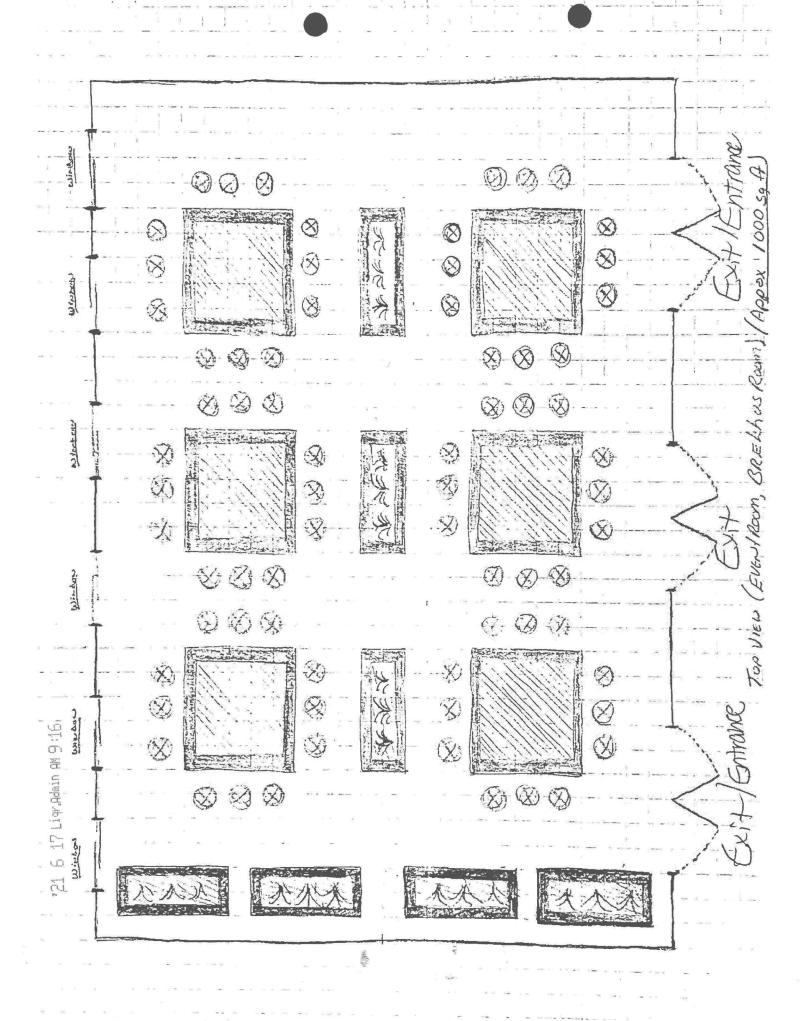






Top View (Event Rem, Kopper Room) (Aggox 768 59 ft Ulrban 888 888 8 8 (X) W11-100 8 (X) (X) ⊗⊗⊗⊗ CHONNON $\otimes \otimes \otimes$ $\otimes \otimes \otimes$ Wirken Ø

31: 6 M nimba, mil 71: 8 15°



'21 JUN 24 Ligr. Lic. PM 2:20

'21 6 17 Ligr. Admin PM 1 :19



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

FP Current 10-2-2020

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

<u>ATTENTION APPLICANT</u>: This is a legally binding document. Please type or print in <u>black ink</u>. 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 <u>BLUE OR BLACK LINED</u> 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.

1. Check the						DER TO DE TANDO	- H	B #	
Appropriate Box	•	Controlling	g Person Agent		nt	Premises Manager (complete all questions except #12)			
2. Name:	Harr	ell	Eric	K	Chr	istopher Middle	_ Birth Date:_	// (NOT a public record)	
3. Social Secu	urity #:		Driv	er License#	<i>‡</i> :		_ State:		
4. Place of bii	rth:	State	COUNTRY (not county)	_Height:	Weight:	Eyes:	Hair:	
5. Name of c	urrent/most red	cent spouse:	Last		First	Middle	Birth Date:	//_ (NOT a public record)	
6. Are you a b	oona fide resid	lent of Arizona?	□Yes □	No If yes	, what is	your date of residency:			
7. Daytime te	lephone numb	oer:		E-n	nail addre	ess:			
8. Business No	me: The Ga	dsden				Busin	ess Phone:	//	
9. Business Lo	cation Address	s:							
		Street (do	not use PO Bo	x)	(City State	County	Zip	
10. List your er	mplovment or	type of business	durina the	e past five I	(5) vears.	If unemployed, retired,	or student. list	residence address	
FROM Month/Year	TO Month/Year		SITION OR BU			EMPLOYERS NAME O (Street Address,	R NAME OF BUSINI		
	CURRENT					· · · · · · · · · · · · · · · · · · ·			
						-			

(ATTACH ADDITIONAL SHEET IF NECESSARY)



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 <u>Black</u> Ink

Fp current ks. 10-02-2020

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

<u>ATTENTION APPLICANT</u>: This is a legally binding document. Please type or print in <u>black ink</u>. 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.

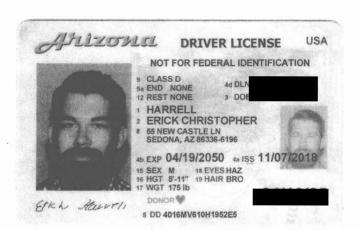
<u>Attention local governments</u>: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

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 <u>BLUE OR BLACK LINED</u> 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.

DEPARIMENTO	F LIQUOR WHEN	ACCOMPANIED B	TA COMPLE	IED APPLIC	Allon. Lia	uor Licens	e#·	060	20039	- 1	1534	105
1. Check the Appropriate Box		Controlling F	erson	Age				Premi	ses Manag Jestions ex	er	£12)	
2. Name:	HARRE	ELL	ER First	ICK	(CHT15+01	Phyl	n	Birth Date	(NOT a	public reco	d)
3. Social Secu	vrity #:,		Drive	r License‡	#:			S	tate: A2			-
4. Place of bir	th: RORTLA	nd oR State	USF COUNTRY (no	ot county)	Height:	5/11 w	eight:	175	Eyes: <u>HA</u>	2 Ho	air: Bro	in
5. Name of cu	urrent/most re	cent spouse:	Last		First		Midd	dle	Birth Date:	(NOT a	//_ public reco	rd)
6. Are you a b	oona fide resid	lent of Arizona?	X Yes □	No If yes	, what is y	your date o	of reside	ency!//	2003			_
7. Daytime tel	lephone numb	per: 602 54	5 984						*			
8. Business Na	me: HARR	ELL DYS:	tinatio	115				Business	Phone: 2	13	364, 4	1481
9. Business Loc	cation Address	s: 1046 A Street (do r	/ G f	tve	00	109665 City	State	2	COCHIS	9	85 CO	2
	With the Control of t	type of business of	during the p	oast five (5) years. I						ence add	dress.
FROM Month/Year	TO Month/Year		ITION OR BUSI			(S	Street Ad	dress, City	AME OF BUSIN , State & Zip)			
11/2003	CURRENT	RIGE ES	FatC		STEF	employ 101x	17/	207	well	ire	njon	Ave
					Phoy	nIX	42	950	713			

(ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM	ur residence c	address information for the last five (5) years: A.R.S. § 4-202(D)	
Month/Year	Month/Year	267 W CLARTN JUN PROPRY AZ 85003	
11/20	CURRENT	207 W CLARPH JUN PROPRY AZ 85003	
11/17	11/20	55 NOW (45 the Land Sedona AZ 96336 2202 N 8th St Brown X 88006	
12/10	11/17	LION N 8th St BROKN X 88006	
		(ATTACH ADDITIONAL SHEET IF NECESSARY)	
12. As a Contr If you answ	olling Person c vered YES, the	or Agent, will you be physically present and operating the licensed premises? In answer #13 below. If NO, skip to #14.]Yes No
13. Have you o	attended a Dl	LC approved Basic & Management Liquor Law Training Course within the past 3	Yes No
14. Have you b law or ordi	peen <u>cited, ar</u> nance, regard	rested, indicted, convicted, or summoned into court for violation of <u>ANY</u> criminal dless of the disposition, even if dismissed or expunged, within the past five (5) years?	Yes No
		ative law citations, compliance actions or consents, criminal arrests, indictments or ainst you? (Do not include civil traffic tickets.) A.R.S.§4-202,4-210]Yes ⊠ No
16. Has anyon	e <u>EVER</u> obtain	ned a judgement against you the subject of which involved <u>fraud or misrepresentation</u> ?]Yes \ No
		pplication or license rejected, denied, revoked or suspended in or outside of Arizona [3.4.8.5.§4-202(D)	Yes No
		ou are or have been a controlling person had an application or license rejected, pended in or outside of Arizona within the last five years? A.R.S.§4-202(D)	Yes X No
		swered " <u>YES</u> " to any Question-14 through 18 <u>YOU MUST</u> attach a <u>signed statement</u> . <u>Sive complete details</u> including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED	and the second s
		NOTARY	
Premises N	Manager filing	hereby declare that I am the Agent/ Controlling Pothis application. I have read this document and verify the contents and all statements are to the best of my knowledge.	
Signature:	Erna	Harry 11 State of AZ County of Pinal The foregoing instrument was acknowledged before	 me this
My Comm	ission Expires (on: 12/10/23 10 TH Day of June 20	021
	AD NOT	OFFICIAL SEAL Date OFFICIAL SEAL Date AM D ZAHARCHUK FARY PUBLIC - ARIZONA PINAL COUNTY COMMA # 581045	ear
	My	Comm. Expires 12/10/23 Signature of Notary	
		thorized the person named on this questionnaire to act as manager for the above Lic	ense.
PRINT NAME:	ERICK	HARRELL SIGNATURE: EVICK HARRY 11	



I, Erick Harrell, recently sold 55 Newcastle Ln, Sedona, AZ 86336. I have a secondary residence at 207 W Clarendon ave Unit 22A, Phoenix, AZ 86336 in which I receive mail at.

Signature: EVILL MUVV P11

Date: 6/14/ 2021

Print: ERICK HARRELL



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 – A ENT NAME (Print or type)	APPLICANT INFO	MATION
INDIVIDUAL OWNER/AGI	ENT NAME (Print or type) EKIC	KHARREL	
	SECTION II – CITIZENSHIP		
	SECTION II - CHIZENSHIP	OK NATIONAL 3	IAIUS DECLARATION
Are you a citizen or natio	onal of the United States?	Yes	No
If Yes , indicate place of	birth:		
City Port Land	State (or equivalent)_ <i>C</i>	RPgon	Country or Territory
If you answered Yes , 1)	Attach a legible copy of a do	ocument from the c	attached list.
2)	Name of document:		and the Williams

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

SECTION IV - DECLARATION

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 ny howledge.

ERICK HARRELL

Individual Owner/Agent Printed Name

Grin Gurrili

Individual Owner/Agent Signature

6/10/2021

Today's Date

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.

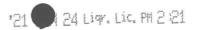
Ľ m 17 Liv.Amin #19:15

Page 1 of 1

ARIZONA GENERAL BILL OF SALE

9

Date:	
1. THE PARTIES.	
1046 N G Ave Douglas, AZ 85607	("Buyer") with a mailing address of "Seller") with a mailing address of
1046 N G Ave Douglas, AZ 85607	·
2. PERSONAL PROPERTY.	
Description: Series 6 Liquor License, Arizon Serial Number (SN) (if any): License number above-described item shall be known	mber : 06020035
3. TRADE/PURCHASE PRICE.	check one (1)
	nt in the amount of \$ 100.00 to be paid on:
□ - The date of this b□ - At a future date n□ - Other	o later than, 20
 □ - Buyer is receiving the Person □ - Seller accepts trade for the 	onal Property as a Gift. Personal Property in exchange for:
4. BUYER AND SELLER DISCLOSU	RE.
is accurate to the best of their knowled this bill of sale and understands that th	e above information about the Personal Property ge. The undersigned Buyer accepts receipt of e above Personal Property is sold on an "as is, or warranties, either expressed or implied.
Seller's Signature:	Date:
Print Name:	
Buyer's Signature: Grah C Mus	
Print Name: ERICKINING HI	
NOTES COUNTY SECULATION OF SECURATION OF SECULATION OF SEC	CERTIFICATE ATTACHED
e STATE CONTINUENT OF THE PROPERTY OF THE PROP	Page 1



ARIZONA GENERAL BILL OF SALE

Date: June 9th, 2001
1. THE PARTIES.
Buyer's Name: 2201 N 7th LLC and/or Erick Harrell ("Buyer") with a mailing address of 1046 N G Ave Douglas, AZ 85607 Seller's Name: 1046 N G Ave Douglas, AZ 85607 ("Seller") with a mailing address of 1046 N G Ave Douglas, AZ 85607
2. PERSONAL PROPERTY
Description: Series 6 Liquor License, Arizona Serial Number (SN) (if any): License number: 06020035 The above-described item shall be known as the "Personal Property." 3. TRADE/PURCHASE PRICE. check one (1)
■ - Seller accepts cash payment in the amount of \$\frac{100.00}{} to be paid on: ■ - The date of this bill of sale. □ - At a future date no later than
The undersigned Seller affirms that the above information about the Personal Property is accurate to the best of their knowledge. The undersigned Buyer accepts receipt of this bill of sale and understands that the above Personal Property is sold on an "as is, where is" condition with no guarantees or warranties, either expressed or implied. Signal Cruste (put Date: 4/2) Print Name: 1050 And 10 per
Buyer's Signature: Date:
Print Name: Print Name: Page 1 of 1

'21 ,11N 24 Ligr. Lic. PM 2 :21
This certificate is attached to a 1 page document dated 6/9/24 entitled THIZOWA FRIERAL SALE
ACKNOWLEDGMENT CERTIFICATE
State of ANZONA
County of Cochice
Before me,
day personally appeared Post HNEL LOPEZ,
Name of signer(s)
to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration therein expressed.
Given under my hand and seal of office this 9th day of INE, 2021.
Hora MANNING
North Public State of the State
Personally known to me
Identity proven on the oath Name of credible witness
Identity proven on the basis of Duccis (LEAS) Identity proven on the basis of Descaption of Identity card or other document Identity proven on the basis of Descaption of Identity card or other document

Copyright ©2020 American Association of Notaries, Inc. PO Box 630601 Houston, TX 77263 1-800-721-2663 www.usnotaries.com

R C S	Given under my hand and seal of office this 9th day of	name(s) is/are subscribed to the f same for the purposes and consi	Before me,	State of MUZOWA County of COCHISE ACKNOWLEDGMENT CE	This certificate is attached to a 1 page document dated 6/6
Signer's Identity verified by: Personally known to me Identity proven on the oath Name of credible witness M. Identity proven on the basis of Music Law serious of the decument	JUNE 2021.	g instrument and acknowledged to me that n therein expressed.	on this	ERTIFICATE	9/21 entitled BUL OF SULF