

# Colorado Liquor Retail License Application

\* **Note that the Division will not accept cash**  Paid by check  Paid online Uploaded to  Date   
**Movelt on**

New License  New-Concurrent  Transfer of Ownership  State Property Only  Master file

• All answers must be printed in black ink or typewritten  
 • Applicant must check the appropriate box(es)  
 • Applicant should obtain a copy of the Colorado Liquor, Beer and Wine Code: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/Liquor)

1. Applicant is applying as a/an  Individual  Limited Liability Company  Association or Other  
 Corporation  Partnership (includes Limited Liability and Husband and Wife Partnerships)

2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation  
**SEXY SAMMIES, LLC** FEIN Number  
**88-3693839**

2a. Trade Name of Establishment (DBA) State Sales Tax Number  
**SEXY SAMMIES** **95408767** Business Telephone  
**(720) 244-6107**

3. Address of Premises (specify exact location of premises, include suite/unit numbers)  
**4904 LARIMER PARKWAY, UNIT 4**

City **JOHNSTOWN** County **WELD** State **CO** ZIP Code **80534**

4. Mailing Address (Number and Street) City or Town  
**912 9TH AVE** **GREELEY** State **CO** ZIP Code **80631**

5. Email Address  
**edie@eatCHG.com**

6. If the premises currently has a liquor or beer license, you **must** answer the following questions

Present Trade Name of Establishment (DBA)	Present State License Number	Present Class of License	Present Expiration Date
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<b>Section A Nonrefundable Application Fees*</b>	<b>Section B (Cont.) Liquor License Fees*</b>
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<input type="checkbox"/> Application Fee for New License ..... \$1,100.00 <input checked="" type="checkbox"/> Application Fee for New License w/Concurrent Review ..... \$1,200.00 <input type="checkbox"/> Application Fee for Transfer ..... \$1,100.00	<input type="checkbox"/> Liquor-Licensed Drugstore (County) ..... \$312.50 <input type="checkbox"/> Lodging & Entertainment - L&E (City) ..... \$500.00 <input type="checkbox"/> Lodging & Entertainment - L&E (County) ..... \$500.00 <input type="checkbox"/> Manager Registration - H & R ..... \$30.00 <input type="checkbox"/> Manager Registration - Tavern ..... \$30.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment ..... \$30.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex ..... \$30.00 <input type="checkbox"/> Optional Premises License (City) ..... \$500.00 <input type="checkbox"/> Optional Premises License (County) ..... \$500.00 <input type="checkbox"/> Racetrack License (City) ..... \$500.00 <input type="checkbox"/> Racetrack License (County) ..... \$500.00 <input type="checkbox"/> Resort Complex License (City) ..... \$500.00 <input type="checkbox"/> Resort Complex License (County) ..... \$500.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (City) ..... \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (County) ..... \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (State) ..... \$160.00 <input type="checkbox"/> Retail Gaming Tavern License (City) ..... \$500.00 <input type="checkbox"/> Retail Gaming Tavern License (County) ..... \$500.00 <input type="checkbox"/> Retail Liquor Store License-Additional (City) ..... \$227.50 <input type="checkbox"/> Retail Liquor Store License-Additional (County) ..... \$312.50 <input type="checkbox"/> Retail Liquor Store (City) ..... \$227.50 <input type="checkbox"/> Retail Liquor Store (County) ..... \$312.50 <input type="checkbox"/> Tavern License (City) ..... \$500.00 <input type="checkbox"/> Tavern License (County) ..... \$500.00 <input type="checkbox"/> Vintners Restaurant License (City) ..... \$750.00 <input type="checkbox"/> Vintners Restaurant License (County) ..... \$750.00
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**Section B Liquor License Fees\***

<input type="checkbox"/> Add Optional Premises to H & R.....\$100.00 X _____ Total _____ <input type="checkbox"/> Add Related Facility to Resort Complex \$75.00 X _____ Total _____ <input type="checkbox"/> Add Sidewalk Service Area..... \$75.00 <input type="checkbox"/> Arts License (City) ..... \$308.75 <input type="checkbox"/> Arts License (County) ..... \$308.75 <input type="checkbox"/> Beer and Wine License (City)..... \$351.25 <input type="checkbox"/> Beer and Wine License (County)..... \$436.25 <input type="checkbox"/> Brew Pub License (City) ..... \$750.00 <input type="checkbox"/> Brew Pub License (County)..... \$750.00 <input type="checkbox"/> Campus Liquor Complex (City)..... \$500.00 <input type="checkbox"/> Campus Liquor Complex (County) ..... \$500.00 <input type="checkbox"/> Campus Liquor Complex (State)..... \$500.00 <input type="checkbox"/> Club License (City)..... \$308.75 <input type="checkbox"/> Club License (County) ..... \$308.75 <input type="checkbox"/> Distillery Pub License (City)..... \$750.00 <input type="checkbox"/> Distillery Pub License (County) ..... \$750.00 <input type="checkbox"/> Hotel and Restaurant License (City)..... \$500.00 <input type="checkbox"/> Hotel and Restaurant License (County) ..... \$500.00 <input checked="" type="checkbox"/> Hotel and Restaurant License w/one opt premises (City) ..... \$600.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County)..... \$600.00 <input type="checkbox"/> Liquor-Licensed Drugstore (City) ..... \$227.50	
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**Questions? Visit: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/Liquor) for more information**

**Do not write in this space - For Department of Revenue use only**

Liability Information

License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$
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## Application Documents Checklist and Worksheet

**Instructions:** This checklist should be utilized to assist applicants with filing all required documents for licensure. **All** documents must be properly signed and correspond with the name of the applicant exactly. **All** documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable. **Questions? Visit:** [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/Liquor) for more information

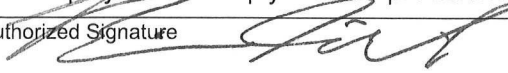
<b>Items submitted, please check all appropriate boxes completed or documents submitted</b>	
<b>I.</b>	<b>Applicant information</b> <input type="checkbox"/> A. Applicant/Licensee identified <input type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input type="checkbox"/> C. License type or other transaction identified <input type="checkbox"/> D. Return originals to local authority (additional items may be required by the local licensing authority) <input type="checkbox"/> E. All sections of the application need to be completed <input type="checkbox"/> F. Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
<b>II.</b>	<b>Diagram of the premises</b> <input checked="" type="checkbox"/> A. No larger than 8½" X 11" <input type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) <input type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2) <input type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant <input type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2)
<b>IV.</b>	<b>Background information (DR 8404-I) and financial documents</b> <input type="checkbox"/> A. Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) <input type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State using code 25YQHT with Identogo. <b>Do not complete fingerprint cards prior to submitting your application.</b> The Vendors are as follows: <b>Identogo</b> – <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Phone: 844-539-5539 (toll-free) <b>Colorado Fingerprinting</b> – <a href="http://www.coloradofingerprinting.com">http://www.coloradofingerprinting.com</a> Appointment Scheduling Website: <a href="http://www.coloradofingerprinting.com/cabs/">http://www.coloradofingerprinting.com/cabs/</a> Phone: 720-292-2722 Toll Free: 833-224-2227 <b>Details about the vendors and fingerprinting in Colorado can be found on CBI's website here:</b> <a href="https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks">https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks</a> <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor/husband and wife partnership (if applicable)</b> <input type="checkbox"/> A. Form DR 4679 <input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input type="checkbox"/> A. Certificate of Incorporation <input type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> <input type="checkbox"/> A. Partnership Agreement (general or limited). <input type="checkbox"/> B. Certificate of Good Standing
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input type="checkbox"/> A. Copy of articles of organization <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Copy of Operating Agreement (if applicable) <input type="checkbox"/> D. Certificate of Authority if foreign LLC (out of state applicants only)
<b>IX.</b>	<b>Manager registration for Hotel and Restaurant, Tavern, Lodging &amp; Entertainment, and Campus Liquor Complex licenses when included with this application</b> <input checked="" type="checkbox"/> A. \$30.00 fee <input type="checkbox"/> B. If owner is managing, no fee required



Name <b>SEXY SAMMIES, LLC</b>	Type of License <b>RESTAURANT &amp; HOTEL</b>	Account Number <b>9548767</b>		
7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):				
a. Been denied an alcohol beverage license?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
b. Had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
c. Had interest in another entity that had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
If you answered yes to 8a, b or c, explain in detail on a separate sheet.				
9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail.		<input type="checkbox"/> <input checked="" type="checkbox"/>		
10. Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
		<b>or</b>		
Waiver by local ordinance?		<input type="checkbox"/> <input type="checkbox"/>		
Other: _____				
11. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.		<input type="checkbox"/> <input type="checkbox"/>		
12. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.		<input type="checkbox"/> <input type="checkbox"/>		
13. a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?		<input type="checkbox"/> <input type="checkbox"/>		
b. Are you a Colorado resident?		<input type="checkbox"/> <input type="checkbox"/>		
14. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any <u>current</u> financial interest in said business including any loans to or from a licensee.		<input checked="" type="checkbox"/> <input type="checkbox"/>		
15. Does the applicant, as listed on line 2 of this application, <b>have legal possession of the premises by ownership, lease or other arrangement?</b>		<input checked="" type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____				
a. If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:				
Landlord	Tenant	Expires		
BELFIORE PROPERTIES WEST LLC	SEXY SAMMIES LLC	05/31/2029		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16.		<input type="checkbox"/> <input checked="" type="checkbox"/>		
c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8½" X 11".				
16. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.				
Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage
N/A				
Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage
N/A				
<b>Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.</b>				
17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises:				
Has a local ordinance or resolution authorizing optional premises been adopted?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Number of additional Optional Premise areas requested. (See license fee chart)		_____		
18. For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include a diagram of the service area and documentation received from the local governing body authorizing use of the sidewalk. Documentation may include but is not limited to a statement of use, permit, easement, or other legal permissions.				

Name <b>SEXY SAMMIES, LLC</b>	Type of License <b>HOTEL RESTAURANT</b>	Account Number <b>9548767</b>		
<b>19. Liquor Licensed Drugstore (LLDS) applicants, answer the following:</b> <b>a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise? <input type="checkbox"/> <input type="checkbox"/></b> <b>If "yes" a copy of license must be attached.</b>				
<b>20. Club Liquor License applicants answer the following: <b>Attach a copy of applicable documentation</b></b> <span style="float:right">Yes No</span> <b>a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/></b> <b>b. Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/></b> <b>c. How long has the club been incorporated? <input type="checkbox"/> <input type="checkbox"/></b> <b>d. Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above? <input type="checkbox"/> <input type="checkbox"/></b>				
<b>21. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:</b> <b>a. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached) <input type="checkbox"/> <input type="checkbox"/></b>				
<b>22. Campus Liquor Complex applicants answer the following:</b> <b>a. Is the applicant an institution of higher education? <input type="checkbox"/> <input type="checkbox"/></b> <b>b. Is the applicant a person who contracts with the institution of higher education to provide food services? <input type="checkbox"/> <input type="checkbox"/></b> <b>If "yes" please provide a copy of the contract with the institution of higher education to provide food services.</b>				
<b>23. For all on-premises applicants.</b> <b>a. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit an Manager Permit Application - DR 8000 and fingerprints.</b>				
Last Name of Manager	First Name of Manager			
<b>24. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number. <input type="checkbox"/> <input type="checkbox"/></b> <span style="float:right">Yes No</span>				
<b>25. Related Facility - Campus Liquor Complex applicants answer the following: <input type="checkbox"/> <input type="checkbox"/></b> <b>a. Is the related facility located within the boundaries of the Campus Liquor Complex?</b> <b>If yes, please provide a map of the geographical location within the Campus Liquor Complex.</b> <b>If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex.</b> <b>b. Designated Manager for Related Facility- Campus Liquor Complex</b>				
Last Name of Manager	First Name of Manager			
<b>26. Tax Information. <span style="float:right">Yes No</span></b> <b>a. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business? <input type="checkbox"/> <input type="checkbox"/></b> <b>b. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.? <input type="checkbox"/> <input type="checkbox"/></b>				
<b>27. If applicant is a corporation, partnership, association or limited liability company, applicant must list all <b>Officers, Directors, General Partners, and Managing Members</b>. In addition, applicant must list any stockholders, partners, or members with <b>ownership of 10% or more in the applicant</b>. <b>All persons listed below</b> must also attach form DR 8404-I (Individual History Record), and make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.</b>				
Name <b>BRIAN F. SEIFRIED</b>	Home Address, City & State <b>3745 W. 16TH ST LN GREELEY, CO</b>	DOB <b>08/04/83</b>	Position <b>MANAGING MEMB</b>	%Owned <b>89%</b>
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned



Name <b>SEXY SAMMIES, LLC</b>	Type of License <b>HOTEL RESTAURANT</b>	Account Number <b>9548767</b>
<p>** If applicant is owned 100% by a parent company, please list the designated principal officer on above.</p> <p>** Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)</p> <p>** If total ownership percentage disclosed here does not total 100%, applicant must check this box:</p> <p><input type="checkbox"/> Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Article 3 or 5, C.R.S.</p>		
<b>Oath Of Applicant</b>		
I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer Code which affect my license.		
Authorized Signature 	Printed Name and Title <b>BRIAN F. SEIFRIED</b>	Date <b>03/25/24</b>
<b>Report and Approval of Local Licensing Authority (City/County)</b>		
Date application filed with local authority	Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application)	
<b>For Transfer Applications Only</b> - Is the license being transferred valid? <span style="float:right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>		
<p>The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) or a DR 8000 (Manager Permit) has been:</p> <p><input type="checkbox"/> Fingerprinted</p> <p><input type="checkbox"/> Subject to background investigation, including NCIC/CCIC check for outstanding warrants</p> <p>That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with and aware of, liquor code provisions affecting their class of license</p> <p>(Check One)</p> <p><input type="checkbox"/> Date of inspection or anticipated date _____</p> <p><input type="checkbox"/> Will conduct inspection upon approval of state licensing authority</p>		
<p><input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1,500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of &gt; 10,0000? <span style="float:right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span></p> <p><input type="checkbox"/> Is the Liquor Licensed Drugstore(LLDS) or Retail Liquor Store (RLS) within 3,000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of &lt; 10,0000? <span style="float:right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span></p> <p><b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.</p> <p><input type="checkbox"/> Does the Liquor-Licensed Drugstore (LLDS) have at least twenty percent (20%) of the applicant's gross annual income derived from the sale of food, during the prior twelve (12) month period? <span style="float:right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span></p>		
The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 44, Article 4 or 3, C.R.S., and Liquor Rules. <b>Therefore, this application is approved.</b>		
Local Licensing Authority for	Telephone Number	<input type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print	Title
Signature	Print	Title
		Date
		Date

**LOCATIONS:**

**WING SHACK ENTERPRISES, INC.**

**BRIAN F. SEIFRIED, PRESIDENT**

**8TH AVE WING SHACK --- 2704 S. 8TH AVENUE, GARDEN CITY, CO 80631  
HOTEL RESTAURANT (CITY) LICENSE 35-04639-0001**

**65TH AVE WING SHACK --- 1815 65TH AVENUE, GREELEY, CO 80634  
HOTEL RESTAURANT (CITY) LICENSE — 03-20345**

**WING SHACK WINDSOR --- 1261 MAIN STREET, WINDSOR, CO 80550  
HOTEL AND RESTAURANT (CITY) LICENSE 03-18815**

**WING SHACK --- 1011 LEMAY AVENUE, FORT COLLINS, CO 80524  
HOTEL RESTAURANT (CITY) LICENSE 03-05758**

**29TH STREET WING SHACK --- 158 E. 29TH STREET, LOVELAND, CO 80538  
BEER AND WINE (CITY) LICENSE 03504639-0007**

**WING SHACK - LONGMONT 1133 FRANCIS STREET, LONGMONT, CO 80501  
BEER AND WINE (CITY) LICENSE 03-12529**

**10TH STREET WING SHACK -- SEXY SAMMIES  
4138 W 9TH ST RD, GREELEY, CO 80634 UNIT A1 & A2  
HOTEL AND RESTAURANT (CITY) LICENSE 03-14392**

**WING SHACK - JOHNSTOWN 21 NORTH PARISH AVE, JOHNSTOWN, CO 80534  
BREW PUB (CITY) LICENSE 03-16338**

**LUNA'S TACOS AND TEQUILA, LLC**

**Luna's Tacos and Tequila, LLC --- 806 9th Street, Greeley, CO 80631  
HOTEL & RESTAURANT (CITY) 03-09903**

**Luna's Tacos and Tequila - Johnstown — 1246 Automation Dr., Johnstown, CO 80535  
HOTEL RESTAURANT (CITY) 03-20334**

**SEXY SAMMIES, LLC**

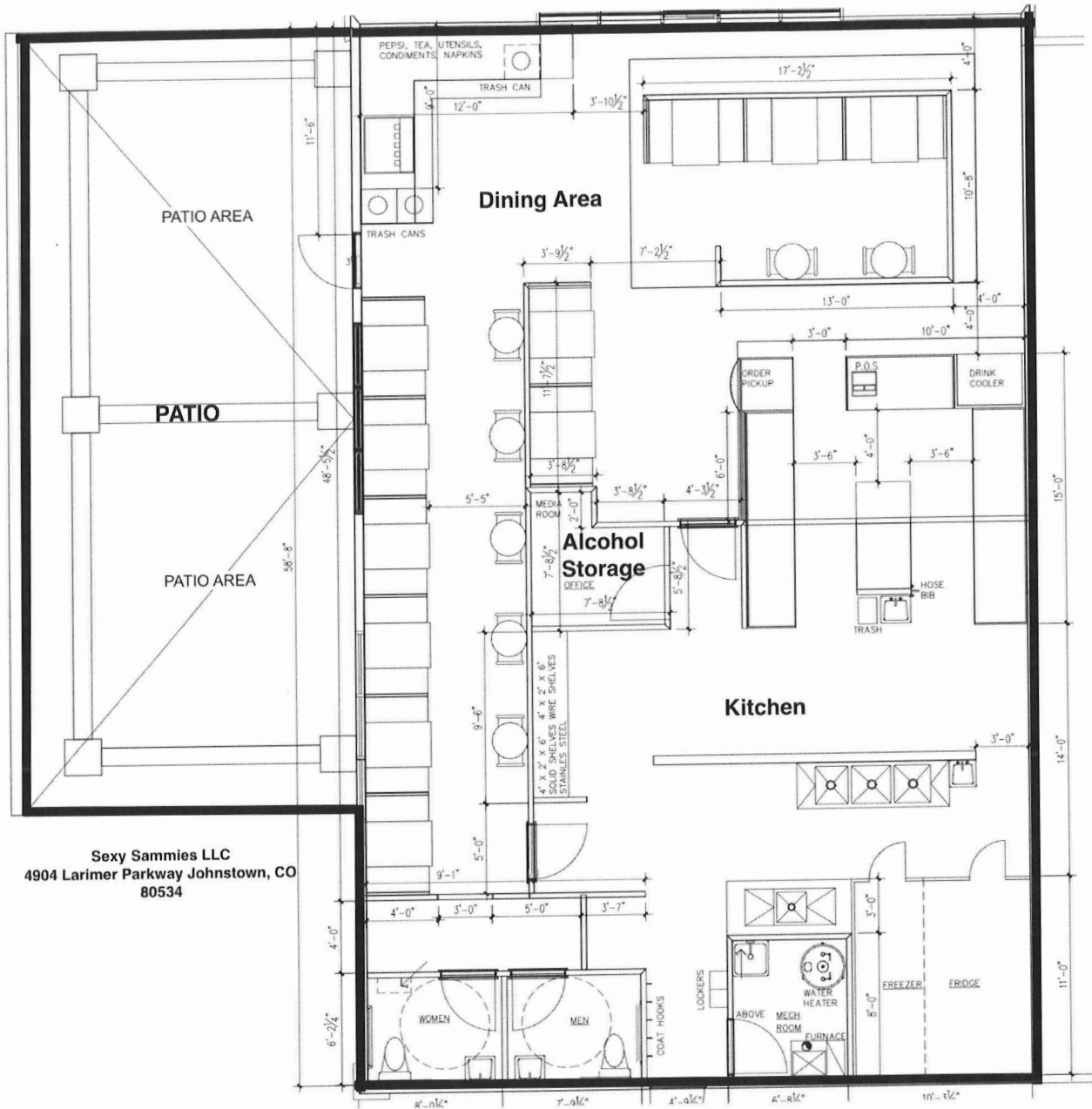
**Sexy Sammies, LLC — 1540 8th Ave, Greeley, CO 80631  
HOTEL & RESTAURANT (CITY) 03-17728**

**Sexy Sammies, LLC – 4904 Larimer Parkway, Unit 4, Johnstown, CO 80535  
APPLIED FOR: HOTEL RESTAURANT (CITY)**

**GREELEY PUBLIC HOUSE, LLC**

**Greeley Public House LLC—819 9th Street, Greeley, CO 80631  
HOTEL & RESTAURANT (CITY) 03-18565**







Hwy 34

Union St

Union St

Union St

North

West

South

Restaurant and Patio  
Dumpsters  
Grease Trap

Fabulous Nails & Bar

Coral Bay Wine & Spirits  
Liquor store

Bello Haven Salon  
+ Extensions

4904 Larimer Parkway  
Johnstown, CO 80534





# Colorado Secretary of State

Colorado Secretary of State

ID#: 20221161377

Document #: 20241151066

Filed on: 02/02/2024 12:46:33 PM

Paid: \$10.00

## Periodic Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

**The entity name is** Sexy Sammies LLC

**The entity ID Number is** 20221161377

**Jurisdiction under the law of which the entity was formed or registered is** Colorado

**The principal office street address is** 912 9th Ave  
Greeley CO 80631  
US

**The principal office mailing address is** 912 9th Ave  
Greeley CO 80631  
US

**The name of the registered agent is** Brian Francis Seifried

**The registered agent's street address is** 912 9th Ave  
Greeley CO 80631  
US

**The registered agent's mailing address is** 912 9th Ave  
Greeley CO 80631  
US

The person above has agreed to be appointed as the registered agent for this entity.

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., and, if applicable, the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

### **Name(s) and address(es) of the individual(s) causing the document to be delivered for filing**

Edith E GEORGE  
912 9th Ave  
Greeley CO CO 80620  
US



OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF FACT OF GOOD STANDING**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Sexy Sammies LLC

is a

Limited Liability Company

formed or registered on 02/16/2022 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20221161377 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/13/2024 that have been posted, and by documents delivered to this office electronically through 03/19/2024 @ 10:59:06 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/19/2024 @ 10:59:06 in accordance with applicable law. This certificate is assigned Confirmation Number 15856567 .



*Jena Griswold*

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, <https://www.coloradosos.gov/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, <https://www.coloradosos.gov> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."*