

# Pima County Clerk of the Board

Melissa Manriquez

**Katrina Martinez**  
Deputy Clerk

Administration Division  
33 N. Stone Avenue, Suite 100  
Tucson, AZ 85701  
Phone: (520)724-8449 • Fax: (520)222-0448

Management of Information & Records Division  
1640 East Benson Highway  
Tucson, Arizona 85714  
Phone: (520) 351-8454 • Fax: (520) 791-6666

July 25, 2024

Amy S. Nations  
Arizona Wine Collective  
P.O. Box 2502  
Chandler, AZ 85244

RE: Arizona Liquor License Job No.: 299805  
d.b.a. Arizona Wine Collective

Dear Ms. Nations:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 10, Beer and Wine Store, which was received in our office on June 28, 2024. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, August 13, 2024, at 9:00 a.m. or thereafter, at the following location:

Pima County Administration Building  
Board of Supervisors Hearing Room  
130 W. Congress, 1st Floor  
Tucson, AZ 85701

Should you have any questions pertaining to this matter, please contact this office at (520)724-8449.

Sincerely,

A handwritten signature in black ink, appearing to read "Melissa Manriquez".

Melissa Manriquez  
Clerk of the Board

Enclosure

7/21/24



# POSTING

Job# \_\_\_\_\_  
DLLC use only

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

Type or Print with Black Ink

Date of Posting: 7 / 1 / 24

Date of Posting Removal: 7 / 23 / 24

Applicant's Name: Arizona Wine Collective  
Nations Amy S.  
Last First Middle

Business Address: 4280 N. Campbell Avenue, Suite No. 155 Tucson 85718  
Street City Zip

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

D R McKillop PCSD 520 288 1358  
Print Name of City/County Official Title Phone Number  
Process Server

[Signature] 7/21/24  
Signature Date Signed

Return this affidavit with your recommendations or any other related documents.  
If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

JUL 24 24 PM 01:04 PC CLK OF ED  
VB



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TO: Development Services, Zoning Division  
FROM: Rosy Millan  
Administrative Specialist I  
DATE: July 1, 2024  
RE: Zoning Report - Application for Liquor License

Attached is the application of:

Amy S. Nations  
d.b.a. Arizona Wine Collective  
4280 N. Campbell Avenue, Suite No. 155  
Tucson, AZ 85718

Arizona Liquor License Job No. 299805  
Series 10, Beer and Wine Store  
New License   
Person Transfer  
Location Transfer

ZONING REPORT

DATE: 7/1/24

Will current zoning regulations permit the issuance of the license at this location?

Yes  No

If No, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pima County Zoning Inspector

When complete, please return to [cob\\_mail@pima.gov](mailto:cob_mail@pima.gov)

JUL 01 24 PM 12:30 PCLK OF BO  
RAM

24-13-9517

State of Arizona  
Department of Liquor Licenses and Control

Created 06/28/2024 @ 03:06:27 PM

Local Governing Body Report

LICENSE

Number: Type: 010 BEER AND WINE STORE  
Name: ARIZONA WINE COLLECTIVE  
State: Pending  
Issue Date: Expiration Date:  
Original Issue Date:  
Location: 4280 N CAMPBELL AVENUE  
STE 155  
TUCSON, AZ 85718  
USA  
Mailing Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (520)329-8595  
Alt. Phone: (480)730-2675  
Email: LIQUORLICENSE@AZLIC.COM

AGENT

Name: AMY S NATIONS  
Gender: Female  
Correspondence Address: PO BOX 2505  
CHANDLER, AZ 85224  
USA  
Phone: (480)730-2675  
Alt. Phone:  
Email: LIQUORLICENSE@AZLIC.COM

OWNER

Name: BOUDREAU INVESTMENTS LLC  
Contact Name: AMY NATIONS  
Type: LIMITED LIABILITY COMPANY  
AZ CC File Number: 23649919 State of Incorporation: AZ  
Incorporation Date: 03/01/2024  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (480)730-2675  
Alt. Phone:  
Email: AMYNATIONS@AZLIC.COM

JUN 28 24 PM 04:02 PC CLK OF BD  
RM

600th day  
08-27-2024  
105th day  
10-11-2024

**Officers / Stockholders**

Name:	Title:	% Interest:
MICHELLE ANDREA BOUDREAU	Member	50.00
DAVID ERNEST KINSLOW BONDREAU	Member	50.00

**BOUDREAU INVESTMENTS LLC - Member**

Name: MICHELLE ANDREA BOUDREAU  
Gender: Female  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (520)667-5205  
Alt. Phone:  
Email: MBOUDREAU75@YAHOO.COM

**BOUDREAU INVESTMENTS LLC - Member**

Name: DAVID ERNEST KINSLOW BONDREAU  
Gender: Male  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (520)667-7126  
Alt. Phone:  
Email: DBOUDREAU67@GMAIL.COM

**APPLICATION INFORMATION**

Application Number: 299805  
Application Type: New Application  
Created Date: 06/20/2024

**QUESTIONS & ANSWERS**

**010 Beer and Wine 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.  
6/24/2024
- 2) Provide name, address, and distance of nearest school.  
(If less than one (1) mile note footage)  
Rio Vista Elementary  
1351 E Limberlost Drive  
Tucson, AZ 85719

- 3) Are you one of the following? Please indicate below.  
 Property Tenant  
 Subtenant  
 Property Owner  
 Property Purchaser  
 Property Management Company  
 Tenant
- 4) Is there a penalty if lease is not fulfilled?  
 Yes  
 What is the penalty?  
 Still owe lease term
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?  
 No  
 If no, in what City, Town, County or Tribal/Indian Community is this business located?  
 Pima County
- 6) What is the total money borrowed for the business not including the lease?  
 Please list each amount owed to lenders/individuals.  
 \$0
- 7) Are there walk-up or drive-through windows on the premises?  
 No
- 8) Does the establishment have a patio?  
 Yes  
 Is the patio contiguous or non-contiguous?  
 Contiguous
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
 No

<b>DOCUMENTS</b>
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DOCUMENT TYPE	FILE NAME	UPLOADED DATE
DIAGRAM/FLOOR PLAN	AZ Wine Collective Diagram.pdf	06/20/2024
INTERIM PERMIT NOTARY PAGE	010100007933 IP.pdf	06/20/2024
QUESTIONNAIRE	David Boudreau Questionnaire.pdf	06/20/2024
QUESTIONNAIRE	Michelle Boudreau Questionnaire.pdf	06/20/2024
MISCELLANEOUS	Michelle Boudreau Training Caertificates.pdf	06/20/2024
QUESTIONNAIRE	David Boudreau Training Certificates.pdf	06/20/2024
QUESTIONNAIRE	010100007933 Agent.pdf	06/20/2024
ALIEN STATUS	A. Nations ASF.pdf	06/20/2024



Name:	Title:	% Interest:
MICHELLE ANDREA BOUDREAU	Member	50.00
DAVID ERNEST KINSLOW BONDREAU	Member	50.00

**BOUDREAU INVESTMENTS LLC - Member**

Name: MICHELLE ANDREA BOUDREAU  
 Gender: Female  
 Correspondence Address: PO BOX 2502  
 CHANDLER, AZ 85244  
 USA  
 Phone: (520)667-5205  
 Alt. Phone:  
 Email: MBOUDREAU75@YAHOO.COM

**BOUDREAU INVESTMENTS LLC - Member**

Name: DAVID ERNEST KINSLOW BONDREAU  
 Gender: Male  
 Correspondence Address: PO BOX 2502  
 CHANDLER, AZ 85244  
 USA  
 Phone: (520)667-7126  
 Alt. Phone:  
 Email: DBOUDREAU67@GMAIL.COM

**APPLICATION INFORMATION**

Application Number: 299820  
 Application Type: New Application  
 Created Date: 06/20/2024

**QUESTIONS & ANSWERS**

**INP Interim Permit**

- 1) Enter License Number currently at location **010100007933**
- 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**

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.

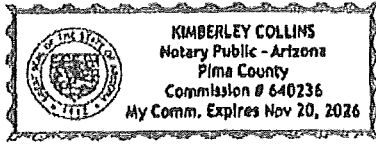
- 1. Current license number at the location: 010100007933 2. Is the license currently in use?  Yes  No
- 2. If the license is NOT currently in use, how long has it been since the license was last used at this location? \_\_\_\_\_

AMENDMENT

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

Sign in front of Notary: \_\_\_\_\_

(Current Agent/individual as listed on the license certificate)

State of <u>ARIZONA</u>	 <p>Notary Seal</p>
County of <u>PIMA</u>	
Signed before me on this <u>4<sup>th</sup></u> day of <u>JUNE</u> , 20 <u>24</u> .	
Notary Signature <u>Kim Collins</u>	
My commission expires on <u>11 / 20 / 2026</u>	

**SECTION 6 Background Check**

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

1. If the applicant is an entity, and not an individual, answer questions 1 a-b.

a) Date Incorporated/Organized: \_\_\_\_\_ State where Incorporated/Organized: \_\_\_\_\_

b) AZ Corporation or AZ L.L.C. Entity No: \_\_\_\_\_ Approval Date: \_\_\_\_\_

2. 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)



**Interim Permit (INP)  
Notary Page**

**FOR DLLC USE ONLY**

INP number:	INP100028903
Date Approved:	06-28-2024
Expiration:	0-11-2024
CSR:	SG
Fee:	\$100.00

**SECTION 5 page 2 of the license application**

**For approval of an interim permit:**

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. §4-203.01 (A)

1. Enter license number currently at the location: 010100007933

2. Is the license currently in use?  Yes  No If no, how long has it been out of use? \_\_\_\_\_

I, (Print Full Name) Peter A. Snell hereby declare that I am the Individual, Owner, Agent, or Controlling Person on the stated license and location.

Signature: \_\_\_\_\_

State of _____	Notary Seal
County of _____	
Signed before me on this ____ day of _____, 20____.	
Notary Signature _____	
My commission expires on ____ / ____ / ____	

EXHIBIT A

