



Pima County Clerk of the Board

Robin Brigode

Mary Jo Furphy
Deputy Clerk

Administration Division
130 W. Congress, 5th Floor
Tucson, AZ 85701
Phone: (520)724-8449 • Fax: (520) 222-0448

Document and Micrographics Mgt. Division
1640 East Benson Highway
Tucson, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 791-6666

October 24, 2014

Thomas Robert Aguilera
Nox
4554 E. Camp Lowell Drive
Tucson, AZ 85712

RE: Application for Agent Change/Acquisition of Control/Restructure
Arizona Liquor License No.: 12104047
Nox

Dear Mr. Aguilera:

Notice is hereby given that the Pima County Board of Supervisors will hold a hearing in reference to the above application. Please be advised that the hearing has been scheduled for Tuesday, November 18, 2014, at 9:00 a.m. or thereafter, to be held at the following location:

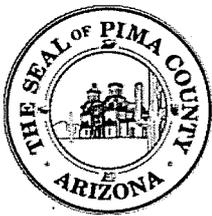
Pima County Administration Building
Board of Supervisors Hearing Room
130 West Congress, 1st Floor
Tucson, Arizona 85701

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

Sincerely,

A handwritten signature in cursive script that reads "Robin Brigode".

Robin Brigode
Clerk of the Board



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TO: Pima County Sheriff's Department
Investigative Support Unit

FROM: Bernadette Russell *MJR*
Administrative Support Specialist *Jo*

DATE: October 7, 2014

RE: Sheriff's Report - Application for Agent Change/Acquisition of Control/
Restructure

Attached is the application of:

Thomas Robert Aguilera
d.b.a. Nox
6370 N. Campbell Avenue, No. 160 Tucson, AZ 85718

Arizona Liquor License No. 12104047

SHERIFF'S REPORT

DATE: 10/21/14

Is there any reason this application should not be recommended for approval?

NOTHING NOTED


Investigative Support Unit Supervisor *1226*

OCT 23 14 PM 12:41 POC:KCF:JD *BK*

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W. Washington 5th Floor
Phoenix AZ 85007-2934
www.azliquor.gov
(602) 542-5141

14-08-0054

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

Check Appropriate Box

Agent Change
Complete Sections 1,2,3,4,6
(See Note 1 on back)

Acquisition of Control
Complete Sections 1,2; (3,4 if changing Agent); 6

Restructure
Complete Sections 1,2,(3,4 if changing Agent), 5,6
(See Note 2 on back)

SECTION 1 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name (INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER)

AULLENZA	Thomas	ROBERT	12104047
Last	First	Middle	Liquor License #
2. Corporation L.L.C. N/A: YSL RESTAURANT, LLC Corp. File #: L-1597950-1
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: NOX
4. Business Address: 6370 N. CAMPBELL AVE. #160 TUCSON PIMA 85718
(Do not use P.O. Box Number) City COUNTY Zip
5. Is the business located within the incorporated limits of the above city or town? Yes No
6. Mailing Address: 4554 E. CAMP LOWELL DR. TUCSON, AZ 85712
City State Zip
7. Business Phone: (520) 529-5849 Residence Phone: (520) 622-1557
8. Does this transaction involve the sale of any portion of the corporate stock? YES NO N/A If yes, submit a certified copy of minutes.
9. Has there been any change of officers? YES NO N/A If yes, submit a certified copy of minutes.

SECTION 2 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each person listed in Section II must submit a personal questionnaire (Form LIC0101) and a Department approved fingerprint card which may be obtained at the Dept. A person appearing in both lists need only submit one questionnaire and fingerprint card.

1. List individual owner or partners or all directors, officers in corp., members in LLC:

Last	First	Middle	Title	Residence Address	City	State	Zip
SOL HOSPITALITY, LLC			man.	4554 E. CAMP LOWELL DR.	TUCSON	AZ	85712

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

2. List stockholders or controlling members owning 10% or more of Corp/LLC:

Last	First	Middle	% Owned	Residence Address	City	State	Zip
SOL HOSPITALITY, LLC			100%	4554 E. CAMP LOWELL DR.	TUCSON	AZ	85712
SEE ATTACHED FLOWCHART							

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

Disabled individuals requiring special accommodations please call the Department

Date Received 9.20.14

CSR EU

14-08-0054-1

SECTION 3 (COMPLETE THIS SECTION FOR AGENT CHANGE)

1. If the corporation/L.L.C. is owned by another entity, ATTACH AN OWNERSHIP AND DIRECTOR / OFFICER / MEMBER DISCLOSURE for the parent entity. Attach additional sheets as necessary in order to disclose real people.

As an Agent, will you be physically present and operating the licensed premises? YES NO

If you answered YES, you must provide proof of attendance of a Department approved Liquor Law Training Course within the last five years before your application for Agent can be submitted. If "no" a manager with approved training must be submitted.

14 SEP 30 4:49 PM '14

SECTION 4 (COMPLETE THIS SECTION FOR AGENT CHANGE)

To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License Number: 12104047 Date of last renewal:
2. Current Licensee or Agent: Levy Yoram Shmuel
(Exactly as it appears on license) Last First Middle

I, Yoram Shmuel Levy, hereby consent to the agent appointment named herein and agree to immediately assign a new agent in the event of the death, resignation, or discharge of this agent. I also understand that if the background report shows that I, the corporation, or any officer, director, member, or stockholder have been convicted of a felony in the past five (5) years, I will immediately surrender the license to the Arizona Department of Liquor Licenses and Control and hereby waive all rights to appeal such action.

X (Signature of INDIVIDUAL OR CORPORATE OFFICER/MEMBER)
SARA M MOORE
NOTARY PUBLIC, ARIZONA
PIMA COUNTY
My Commission Expires June 1, 2018

State of Arizona County of Pima
The foregoing instrument was acknowledged before me this 28 day of August 2014
Day Month Year
(Signature of NOTARY PUBLIC)

SECTION 5 (COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved? YES NO If yes, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

- J.T.W.R.O.S.
 INDIVIDUAL
 PARTNERSHIP
 CORPORATION
 LIMITED LIABILITY CO.
 TRUST
 OTHER Explain

Type of new ownership:

- J.T.W.R.O.S.
 INDIVIDUAL
 PARTNERSHIP
 CORPORATION
 LIMITED LIABILITY CO.
 TRUST
 OTHER Explain

SECTION 6 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER as listed in Question 1 Section 1:

I, Thomas Robert Davila, hereby declare that I am the APPLICANT filing this application.
(Print full name)
have read the application and the contents and all statements are true, correct and complete.

X (Signature of INDIVIDUAL OR AGENT)

State of Arizona County of Pima
The foregoing instrument was acknowledged before me this 28 day of SEPT. 2014
Day Month Year
(Signature of NOTARY PUBLIC)

My commission expires on:
APRIL S. MCMAHON
Notary Public - Arizona
Pima County
My Comm. Expires Apr 21, 2016

NOTE 1: The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H)

NOTE 2: The \$100.00 fee for restructure/acquisition of control MUST be submitted with this application. (A.R.S. 4-209.A)

YSL RESTAURANT, LLC



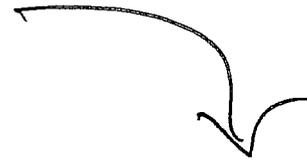
SOL HOSPITALITY,
LLC - B1652905
(MEM - 100%)



- B1052039
ANDERSON
HOSPITALITY,
LLC
(MEM - 50%)



JASON
ANDERSON
(MANAGER - 0%)



JOFFROY
HOSPITALITY
GROUP, LLC - B10529106
(MEM - 50%)



JASON
ANDERSON
(MEM/MAN - 100%)



ANDREW
JOFFROY
(MEM - 100%)