

Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez
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

April 13, 2018

James William Boyd Jr.
Ice Cream Bar
7345 E. Evans Road No. 16
Scottsdale, AZ 85260

RE: Arizona Liquor License No.: 06100070
d.b.a. Ice Cream Bar

Dear Mr. Boyd Jr.:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 6, Bar, which was received in our office on March 15, 2018. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, May 1, 2018, 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 "Julie Castañeda".

Julie Castañeda
Clerk of the Board

Enclosure



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

AFFIDAVIT OF POSTING

Date of Posting: 3-22-18 Date of Posting Removal: 4-10-18

Applicant's Name: Ice Cream Bar
Boyd Jr. James William
Last First Middle

Business Address: 1135 W. Hoover Street Ajo 85321
Street City Zip

License #: 06100070

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.

RAY BENSLEY #8095 DEPUTY 520-235-7243
Print Name of City/County Official Title Phone Number

[Signature] 4-10-18
Signature Date Signed

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

APR 12 10 11 53 POC/KCF RD



Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez
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

TO: Development Services, Zoning Division
FROM: Alina Bárcenas *AB*
Administrative Support Specialist Senior
DATE: 3/16/2018
RE: Zoning Report - Application for Liquor License

Attached is the application of:

James William Boyd Jr.
d.b.a. Ice Cream Bar
1135 W. Hoover Street
Ajo, AZ 85321

Arizona Liquor License No. 06100070
Series 6, Bar
New License
Person Transfer
Location Transfer

ZONING REPORT

DATE: 4/4/18

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

Yes No

If No, please explain:

[Signature]
Pima County Zoning Inspector

When complete, please return to cob_mail@pima.gov

APR 04 18 PM 01 25 PCC CLK/FPD

AFB

18-02-9316

State of Arizona
Department of Liquor Licenses and Control

Created 03/14/2018 @ 10:54:06 AM

Local Governing Body Report

LICENSE

Number:	06100070	Type:	006 BAR
Name:	ICE CREAM BAR		
State:	Pending		
Issue Date:		Expiration Date:	09/30/2018
Original Issue Date:	11/15/1961		
Location:	1135 W HOOVER STREET AJO, AZ 85321 USA		
Mailing Address:	7345 E EVANS ROAD #16 SCOTTSDALE, AZ 85260 USA		
Phone:	(520)777-4390		
Alt. Phone:	(602)531-7144		
Email:			

Currently, this license has pending applications.

AGENT

Name:	JAMES WILLIAM BOYD JR.
Gender:	Male
Correspondence Address:	4647 N 32ND STREET #240 PHOENIX, AZ 85018 USA
Phone:	(602)531-7144
Alt. Phone:	
Email:	SWFINANCIAL@COX.NET

OWNER

MAR 15 10:54:06 AM 2018 PCLKOF 90 *BL*

Name: SOUTHWEST FINANCIAL HOLDINGS LLC
Contact Name: JAMES WILLIAM BOYD JR
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: L09940151 State of Incorporation: AZ
Incorporation Date: 06/27/2001
Correspondence Address: 7345 E EVANS ROAD
#16
SCOTTSDALE, AZ 85260
USA
Phone: (602)531-7144

Alt. Phone:
Email: SWFINANCIAL@COX.NET

Officers / Stockholders

Name:	Title:	% Interest:
VICTOR LIMA BRAVO TRUST	MEMBER	100.00

**SOUTHWEST FINANCIAL HOLDINGS LLC -
MEMBER**

Name: VICTOR LIMA BRAVO TRUST
Contact Name: VICTOR LIMA BRAVO TRUST
Type: TRUST
AZ CC File Number: State of Incorporation:
Incorporation Date:
Correspondence Address: 7345 E EVANS ROAD
#16
SCOTTSDALE, AZ 85260
USA
Phone: (602)531-7144
Alt. Phone:
Email: SWFINANCIAL@COX.NET

VICTOR LIMA BRAVO TRUST - Trustee

Name: JAMES WILLIAM BOYD JR.
Gender: Male
Correspondence Address: 4647 N 32ND STREET
#240
PHOENIX, AZ 85018
USA
Phone: (602)531-7144
Alt. Phone:
Email: SWFINANCIAL@COX.NET

APPLICATION INFORMATION

Application Number: 11976
Application Type: Location / Owner Transfer
Created Date: 03/14/2018

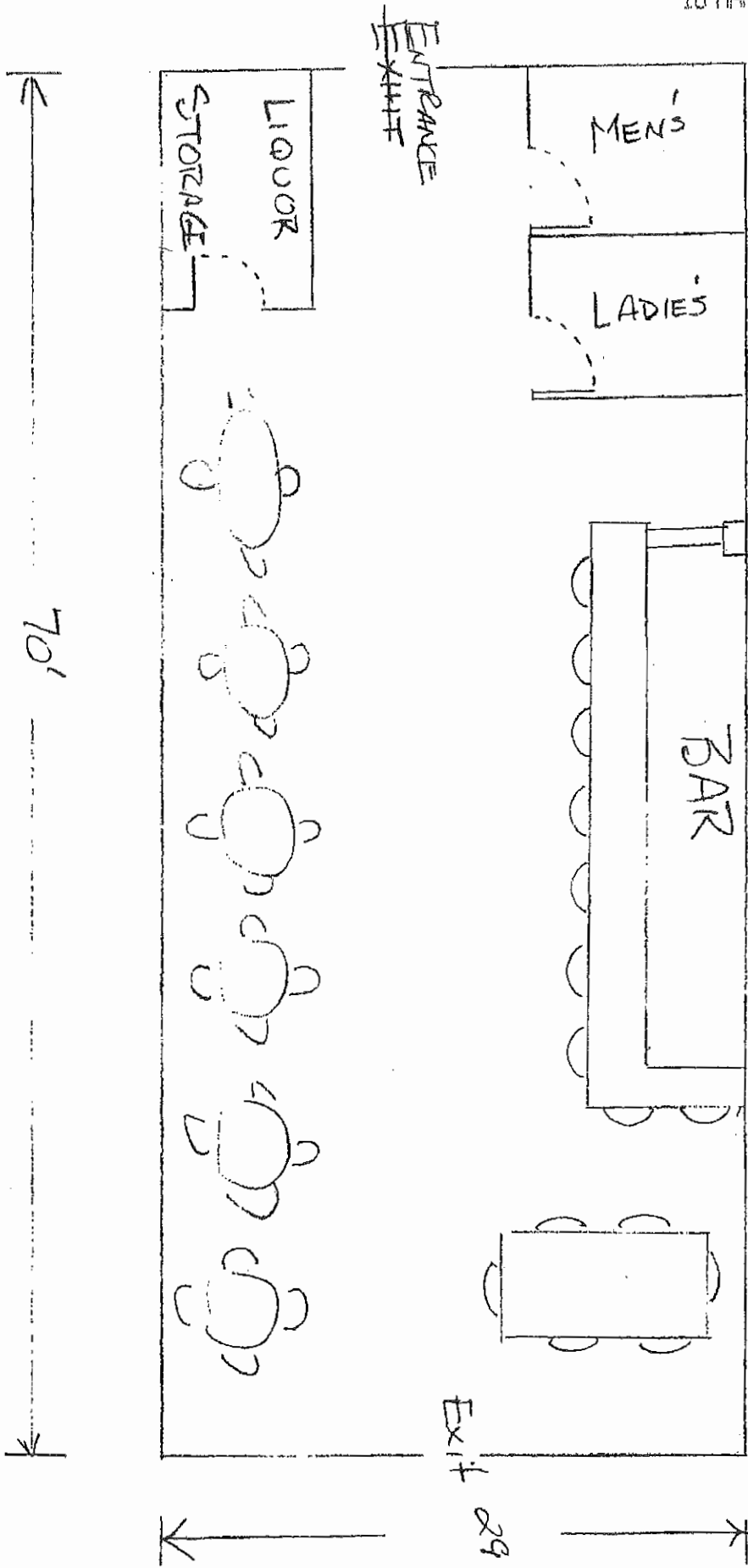
QUESTIONS & ANSWERS

006 Bar

- 1) If you intend to operate business while your application is pending you will need an interim permit pursuant to A.R.S.§4-203.01. Would you like to apply for an Interim Permit?
No
- 4) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.
Yes
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
No

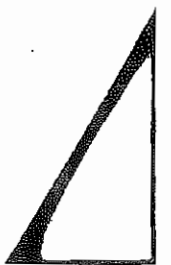
- 6) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?
No
- 17) Please provide name, address, and Distance of nearest school.
ST TITUS INSTITUTE 1211 N 2ND AVE AJO AZ 85321 2,161 FT
- 18) Please provide name, address, and distance of nearest church.
AJO CALVARY BAPTIST CHURCH 740 ROCALLA AVE AJO AZ 85321 1,238 FT
- 19) Are you a tenant? (A person who holds the lease of a property; a lessee)
Yes
A Document of type SUPPLEMENTAL INFO is required.
- 20) Is there a penalty if lease is not fulfilled?
No
- 21) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)
No
- 22) Are you the owner?
No
- 23) Are you a purchaser?
No
- 24) Are you a management company?
No
- 25) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
0.00
- 26) Is there a drive through window on the premises?
No
- 27) Have you provided a diagram of your premises?
Yes
- 28) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
- 29) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
07/01/2018

2,030 Sq. Ft.



Exit 29

70'

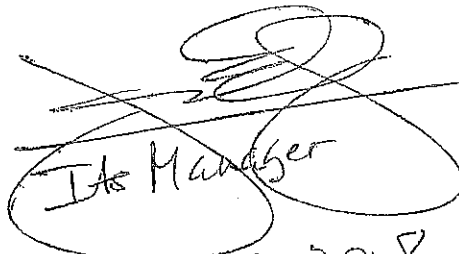


18 MAR 14 LIQ. LIC. #M11114

AZIZ Holdings (the "Seller"), for valuable consideration paid by Southwest Financial Holdings, LLC (the "Buyer"), the receipt and sufficiency of which is hereby acknowledged, does hereby sell, transfer and assign all of its right, title and interest in and to Arizona Liquor License No. 06100070 (the "License") to Buyer.

AZIZ Holdings, LLC
an Arizona
limited liability company

By:


Its Manager

March 14, 2018



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

18 MAR 14 Lic. Lic. #ML11115

NON-JUDICIAL FORECLOSURE AFFIDAVIT

18 APR 21 Lic. Lic. #ML10115

STATE OF ARIZONA)
)
 COUNTY OF MARICOPA)

ss.

I, James W. Boyd, having been duly sworn, do hereby state that I am:

1. A secured party and have a perfected security interest in liquor license # 06100070

The attorney for the secured party _____
 (Name of secured party you represent)

2. The financing statement with liquor license # 06100070 as collateral was filed with the Secretary of State (SOS) on 2/4/2014 (copy attached).
 (Date filed with SOS)

3. Debtor, party Najera, LLC is in default under the security agreement.
 (Name of debtor)

4. A notice of proposed disposition of collateral was sent to the debtor on 4/7/2016.
 (Date sent to debtor)

5. A public private sale was held on 4/21/2016 located at: 7345 E. Evans Rd., #16, Scottsdale, AZ 85260
 (Date sale was held) (Street address, city, state, zip)
 and the sale was conducted in a commercially reasonable manner with notice of the sale having been published on N/A in N/A (copy of sale notice attached).
 (Date sent to debtor) (Name of publication)

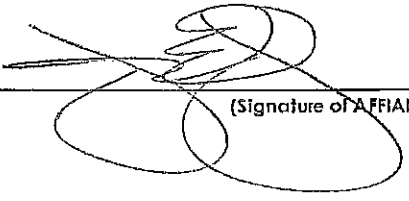
6. Liquor license # _____ was sold to _____ of _____
 (Street address, city, state, zip)

Liquor license # 06100070 was retained in satisfaction of the obligation and notice was given to the debtor on _____ (copy of notice attached).
 (Date of notification)

7. Affiant further states that all things required to be done under A.R.S. §47-9010 et. Seq. (Uniform Commercial Code - Secured Transactions), have been done to entitle the affiant to lawfully dispose of or otherwise act with respect to liquor license # 06100070. Affiant further states he/she is aware that the Department of Liquor Licenses and Control is making no determination of the secured party's property interest in liquor license # 06100070 but is relying on affiant's documentation and this affidavit solely for the purpose of allowing the affiant to take action with the department as to liquor license # 06100070. Affiant agrees to hold the Department of Liquor Licenses and Control harmless from any liability incurred by the department in reliance on the affiant's representations and documentation.

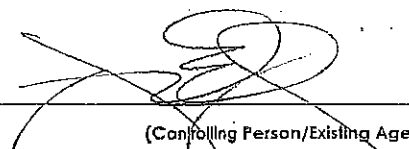
Wherefore, Affiant further saith not.

(print name) James W. Boyd, declare that I have read this Affidavit and the contents and all statements are true, correct and complete.


(Signature of AFFIANT)

16 APR 21 14:06:00

NOTARY

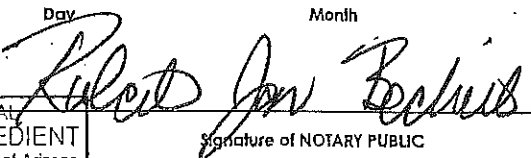
X 
(Controlling Person/Existing Agent)

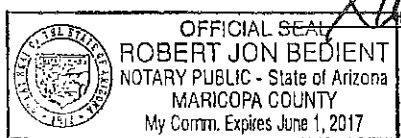
State of ARIZONA County of MARICOPA

The foregoing instrument was acknowledged before me this

21 of APRIL, 2016
Day Month Year

My commission expires on: JUNE 1, 2017


Signature of NOTARY PUBLIC



ARIZONA
SECRETARY OF STATE
02/04/14 14:52
FILED

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
Thomas R. Aguilera (520) 622-1557

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Thomas R. Aguilera
Aguilera Law Group, PC
4554 E. Camp Lowell Dr.
Tucson, AZ 85712



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME (insert only one debtor name (1a or 1b) - do not abbreviate or combine names)

1a. ORGANIZATION'S NAME
Najera, LLC

OR 1b. INDIVIDUAL'S LAST NAME

FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
5358 S. Nogales Highway Tucson AZ 85706 USA

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any
LLC Arizona NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME (insert only one debtor name (2a or 2b) - do not abbreviate or combine names)

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME

FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any
 NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR (S/P) - insert only one secured party name (3a or 3b))

3a. ORGANIZATION'S NAME
Sakkara, LLC

OR 3b. INDIVIDUAL'S LAST NAME

FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
6121 S. 6th Avenue Tucson AZ 85706 USA

4. This FINANCING STATEMENT covers the following collateral:

Arizona State Liquor License #06100070 (Bar License); All furniture, fixtures and equipment used in connection with the business operated at 5358 S. Nogales Highway, Tucson, Arizona 85706, replacements and accessories thereto, including, but not limited to: 30 small tables and 2 large tables, 95 chairs, 1 ice machine, bottle coolers, 6 storage racks, 1 dish machine, 3 office desks, computer, microwave ovens, walk-in and reach-in coolers and freezers.

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BALEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS (Attach Affidavit) 7. Check to REQUEST SEARCH REPORT (S) on Debtor(s) (collateral) All Debtors Debtor 1 Debtor 2 (ADDITIONAL FEE)

8. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) James Boyd (602)531-7144
B. E-MAIL CONTACT AT FILER (optional) azizholdings@cox.net
C. SEND ACKNOWLEDGMENT TO: (Name and Address) AZIZ Holdings, LLC 7345 E. Evans Road Suite 16 Scottsdale AZ 85260



16 APR 21 09:14:00

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 201400040961	1b. <input type="checkbox"/> THE FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. File: attach Amendment Acknowledgment (Form UCC3Ad) and provide Debtor's name in item 13.
--	--

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes: Debtor or Secured Party of record

AND Check one of these three boxes to: CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME	AZIZ Holdings, LLC			
OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7345 E. Evans Rd., Suite 16	Scottsdale	AZ	85260	USA

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

State of Arizona Liquor License No. 06100070 (Bar License)

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME	Sakkara, LLC			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
James Boyd (602)531-7144

B. E-MAIL CONTACT AT FILER (optional)
azizholdings@cox.net

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**AZIZ Holdings, LLC
7345 E. Evans Road
Suite 16
Scottsdale, AZ 85260**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2014-000-4096-1

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. **PARTY INFORMATION CHANGE:**
Check one of these two boxes: Debtor or Secured Party of record
AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
---------------------	------	-------	-------------	---------

8. **COLLATERAL CHANGE:** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

This UCC-3 is being filed in connection with a Notification of Disposition of Collateral as described on the addendum attached hereto.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
AZIZ Holdings, LLC

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as Item 1a on Amendment form 2014-000-4096-1	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as Item 9 on Amendment form	
12a. ORGANIZATION'S NAME AZIZ Holdings, LLC	
OR	
12b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

15 APR 21 11:49 AM 10/20

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction Item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME Najera, LLC			
OR			
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

To: **Najera, LLC, 5338 S Nogales Hwy, Tucson, AZ 85706**
Yanel Nunez Najera, Statutory Agent, 5338 S. Nogales Hwy, Tucson, AZ 85706

From: **AZIZ Holdings, LLC, 7345 E. Evans Road, Suite 16, Scottsdale, AZ 85260**

NOTICE OF DISPOSITION OF COLLATERAL

AZIZ Holdings, LLC hereby gives notice that it will sell State of Arizona Class 6 Liquor License Number 06100070 privately sometime after April 20, 2016.

You are entitled to an accounting of the unpaid indebtedness secured by the property at that AZIZ Holdings, LLC intends to sell for a charge of two hundred fifty dollars (\$250.00). You may request an accounting by calling (602)531-7144.

<p>15. This FINANCING STATEMENT AMENDMENT:</p> <p><input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing</p> <p>16. Name and address of a RECORD OWNER of real estate described in Item 17 (If Debtor does not have a record interest):</p>	<p>17. Description of real estate:</p>
---	--

18. MISCELLANEOUS:

18 MAR 14 14:47. Lic. #M1143

AZIZ Holdings, LLC
7345 E. Evans Road #16
Scottsdale, AZ 85260

VIA CERTIFIED MAIL

Item #7015 0640 0002 1431 3012

April 7, 2016

NAJERA, LLC
5338 S. Nogales Hwy
Tucson, AZ 85706

VIA CERTIFIED MAIL

Item #7015 0640 0002 1431 3029

April 7, 2016

YANEL NUNEZ NAJERA
Statutory Agent
Najera, LLC
5338 S. Nogales Hwy
Tucson, AZ 85706

18 APR 21 14:47. Lic. #M1019

RE: State of Arizona Bar Liquor License Number 06100070

NOTICE OF DEFAULT

NOTICE OF DISPOSITION OF COLLATERAL

Pursuant to an Assignment of Security Interest filed April 7, 2016 from Sakkara, LLC, AZIZ Holdings, LLC hereby gives Notice that Najera, LLC, an Arizona limited liability company, is in default of that certain Lease, Promissory Note and Security Agreement dated December 20, 2013.

AZIZ Holdings, LLC also gives Notice hereby that State of Arizona Bar Liquor License Number 06100070 will be disposed of in accordance with provisions of the Uniform Commercial Code as adopted in Arizona.

210E TEHT 2000 0490 ST02

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

TUCSON AZ 85706

OFFICIAL USE

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.49
Total Postage and Fees	\$6.74

Postmark Here
 0631 03
 04/07/2016

Sent To: Najera LLC
 Street and Apt. No., PO Box No.: 5338 S. Nogales Hwy
 City, State, ZIP+4: Tucson AZ 85706

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

210E TEHT 2000 0490 ST02

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

TUCSON AZ 85706

OFFICIAL USE

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.49
Total Postage and Fees	\$6.74

Postmark Here
 0631 03
 04/07/2016

Sent To: Yanel Jones Najera
 Street and Apt. No., PO Box No.: 5338 S. Nogales Hwy
 City, State, ZIP+4: Tucson AZ 85706

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

15 APR 21 11:49 AM '19