

## **Pima County Clerk of the Board**

Robin Brigode

Administration Division 130 W. Congress, 5<sup>th</sup> 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

March 3, 2015

Scott Robert Kilpatrick Sauce Pizza and Wine 4455 E. Camelback Road, Suite No. D236 Phoenix, AZ 85018

RE: Application for Agent Change/Acquisition of Control/Restructure

Arizona Liquor License No.: 12103501

Sauce Pizza and Wine

Dear Mr. Kilpatrick:

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, March 17, 2015, 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,

Robin Brigode

Clerk of the Board



## **Pima County Clerk of the Board**

### Robin Brigode

Mary Jo Furphy Deputy Clerk Administration Division 130 W. Congress, 5<sup>th</sup> 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

7	J
	1
•	$\checkmark$
	^
1	Ē
1.	-l
	l.,
-	:::-
0.00	:::  -   
0	)
I.	J
ŧ.	II
L	Ď
•	Ť
1	ಾ
	Œ.
ĺ	
	۵, ۱
	I
;	ŧ

TO:	Pima County Sheriff's Department Investigative Support Unit					
FROM:	Bernadette Russell BK- Administrative Support Specialist					
DATE:	February 11, 2015					
RE:	Sheriff's Report - Application for Agent Change/Acquisition of Control/ Restructure					
Scott Rob d.b.a. Sau 7117 N. C Tucson, A	s the application of: ert Kilpatrick ice Pizza and Wine Pracle Road Z 85704 quor License No. <u>12103501</u>					
	S REPORT DATE: 03/02/15  by reason this application should not be recommended for approval?					
1	HING NOTES.					
	De la companya della companya della companya de la companya della					

Investigative Support Unit Supervisor

When completed, please return to cob mail@pima.gov.

## ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

CITY OF MICSE RECEIVED

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

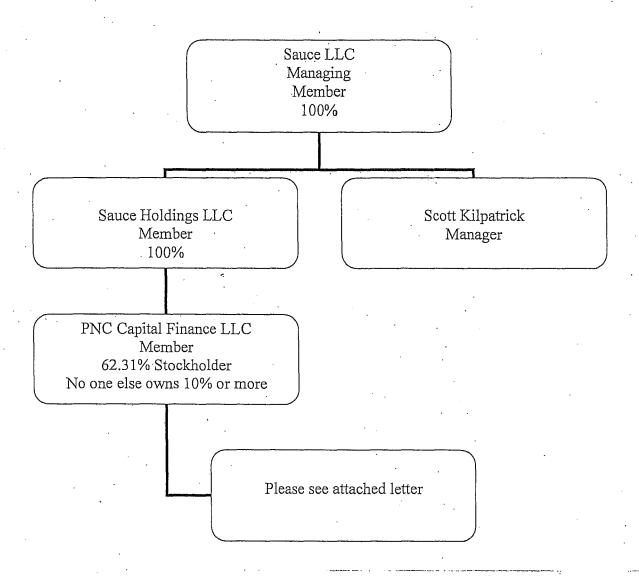
15-01-006

170491

15 FEB -9 /NO :28

#### APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

Check	# 73 F 15	·				N PA				
Appropriate Box	∠ Ag Complete S	ent Change Sections 1,2,3,4,6 e 1 on back)	Acquisiti				Complete S	Restructu Sections 1,2,(3, se Note 2 on ba	4 if chang	ing Agent) ,5,6
SECTION 1	(COMF	PLETE THIS SEC	TION FOR AGENT C	HANGE,	ACQ	UISITION OF	CONTRO	L OR REST	RUCTUF	RE)
	NVIDUAL O Kilpatrick	R EXISTING AGEN	T (if no agent change) Scott	OR NEW A	(GEN	T OR CORPO	RATE OFFI Robert	CER OR L.L.C	:. CONTR 12103	•
2. Corpora	Last ation ⊠ L	L.C. 🗌 N/A:_	First Fox Fast Casual LLC (Exactly as it appea	rs on Articl	es of		Middle 38459	Corp. File		r License # 705688
3. Business N	Name: S	auce Pizza & Win		15 OII AILIG	CS OI I	nc. or Atticles	ur Org.)			
		7117 N Oracle Ro	d		s it app	pears on licens	e) . F	Pima	85704	
		not use P.O. Box N			City		C	OUNTY	Zip	
5. Is the busin	ness loca	ted within the in	corporated limits of	the abov	e cit	y or town?	⊠Yes [	∃No		
6. Mailing Ad	ldress: '	4455 E Camelbac	k Rd Ste D236			Phoenix		AZ		85018
	· <del>-</del>					City		State		Zip 🙃
7. Business F	Phone: (	520 <sub>)</sub> 297-857	75		Resi	dence Phon	ie: (602	) 578-2754		
8. Does this transaction involve the sale of any portion of the corporate stock? XYES NO N/A If yes, submit a certified copy of minutes.										
9. Has there	been any	change of office	ers? XYES NO	N/A	If y	es, submit a	certified o	copy of minu	utes.	\ \
SECTION 2	(COMPL	ETE THIS SECTI	ON FOR AGENT CH	IANGE, A	CQUI	SITION OF C	CONTROL	OR RESTRU	JCTURE	)
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 individ	lual owner	r or partners or a	all directors, officers	s in corp.,	, mer	nbers in LL(	O:			
Last		First	Middle	Title		Residence	e Address		City	State Zip
Sauce LLC				Mng Me	em	4455 E Cam	elback Rd	Ste D236 Ph	oenix A	Z 85018
						-				
<u> </u>			(ATTACH ADDI	L TIONAL SH	IEET(	S) IF NECESS	ARY)		<del></del>	
2. List stockh	olders or	controlling mem	bers owning 10% o	or more c	of Co	p/LLC:	•			
Last		First	Middle	% Owned		Residence	e Address		City	State Zip
Sauce LLC				100	445	5 E Camelba	ck Rd Ste I	D236 Phoen	ix AZ 850	018
	No. all /									
		<b>S</b> ,					_			
1/7/2013		D	(ATTACH ADDIT isabled individuals requiring					ent Date Pe		7-5-15



Sauce Holdings LLC 4455 E. Camelback Rd. Ste. D236 Phoenix, Arizona 85018

PNC Capital Finance LLC 4455 E. Camelback Rd. Ste. D236 Phoenix, Arizona 85018



January 23, 2015

#### VIA EMAIL

Miranda Bustamante Arizona Liquor Industry Consultants 1811 S. Alma School Road, Suite 268 Mesa, Arizona 85210

Re: Acquisition of Control Filings for Sauce Liquor Licenses - PNC Capital Finance, LLC Ownership

Dear Miranda;

Sauce Holdings, LLC is owned by PNC Capital Finance, LLC and its co-investors. PNC Capital Finance, LLC is the only owner of Sauce Holdings, LLC with an ownership interest that is greater than ten percent. PNC Capital Finance, LLC is a direct wholly-owned subsidiary of PNC Holding, LLC, which is a direct wholly-owned subsidiary of The PNC Financial Services. Group, Inc., a publicly traded company on the New York Stock Exchange,

If you have any questions regarding this corporate structure, please contact me.

Sincerely,

PNC Capital Finance, LLC

By: Y

B. Douglas Phillips,

Managing Director, PNC Mezzanine Capital division 5 2 1 6 Pr - C

# (COMPLETE THIS SECTION FOR AGENT CHANGE)

<ol> <li>If the corporation/L.L.C. is owned by another entity, <u>DISCLOSURE</u> for the parent entity. Attach addition</li> </ol>				
As an Agent, will you be physically present and operati	ing the licensed premises?	•		
If you answered YES, you must provide proof of att within the last five years before your application for training must be submitted.				
SECTION 4 (COMPLETE THIS SECTION FOR A To be completed by the INDIVIDUAL OR EXISTING AGEN		NG MEMBER:		
1. License Number: 12103501	Date of last renewal: 09/2014			
2. Current Licensee or Agent: Nations	Randy D	•		
(Exactly as it appears on license) Last	First N	liddle		
I, Randy D. Nations	, hereby consent to the appointment of agent	t for this license.		
(Print full name) I agree to immediately assign a new agent in the event the not been convicted of a felony in the last five (5) years.	nat I am unable to discharge the duties of agent for	this license. I have		
(Signature of INDIVIDUAL) ORPORATE/CLUB OFFICER/MEMBER)	State of Michael County of Michael County of Michael County of Menth	ed before me this		
My commission expires on:	(Signature of NOTARY PUBLIC)			
SECTION 5 (COMPLETE THIS SECTION FOR RES	STRUCTURE)			
Is there more than one licensed premises involved? $\square$ Y paid for each license/location.	∕ES ☐ NO If yes, <u>SEPARATE APPLICATIONS</u> m	ust be filed and fees		
Type of current ownership:	Type of new ownership:			
☐ J.T.W.R.O.S. ☐ INDIVIDU AL ☐ PARTNERSHIP ☐ CORPORATION ☐ LIMITED LIABILITY CO. ☐ TRUST ☐ OTHER Explain	☐ J.T.W.R.O.S. ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION ☐ LIMITED LIABILITY CO. ☐ TRUST ☐ OTHER Explain			
SECTION 6 (COMPLETE THIS SECTION FOR AGENT To be completed by INDIVIDUAL OR EXISTING AGENT (if no agent of MEMBER as listed in Question 1 Section 1:	CHANGE, ACQUISITION OF CONTROL OR RESTRUCT CHANGE, OR NEW AGENT OR CORPORATE OFFICER OR L.L., hereby declare that I am the APPLICANT filing to	.C. CONTROLLING		
have read the application and the contents and all states	M. Acresic	40.04		
× /	State of The foregoing instrument was acknowledge	red before me this		
(Signature of INDIVIDUAL OR AGENT)		2015		
My commission expires on: June 10,2014	Day Cay of Junuary  Month  (Signature of NOTARY PUBLIC)	Year		
NOTE 1: The fee for an agent change MUST be subm for each additional application, not to exceed \$1,000.00.	nitted with this application: \$100.00 for the first ap	plication and \$50.00		

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

