

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) 351-8456

May 16, 2014

Mr. Randy D. Nations
Blanco Restaurant
4455 E. Camelback Road, Ste. B100
Phoenix, AZ 85018

RE: Application for Agent Change/Acquisition of Control/Restructure
License No.: 12103800
Blanco Restaurant

Dear Mr. Nations:

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, June 3, 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: Brian Turco *BT*
Administrative Support Specialist

DATE: April 29, 2014

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

Attached is the application of:

Randy D. Nations
d.b.a. Blanco Restaurant
2905 E. Skyline Drive, No. 246 Tucson, AZ 85718

Pima County Liquor License No. 14-05-0051

SHERIFF'S REPORT

DATE: 05/13/14

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

NOTHING NOTED.

[Signature]
Investigative Support Unit Supervisor

MAY 15 14 PM 01:14 PC CLK OF BD

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

14-05-0051

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)
NATIONS RANDY D. 12103800

2. ☐ Corporation ☒ L.L.C. ☐ N/A: LA ENCANTADA GROUP LLC B1036353 Corp. File #: L-1242012-7
(Exactly as it appears on Articles of Inc. or Articles of Org.)

3. Business Name: BLANCO RESTAURANT

4. Business Address: 2905 E SKYLINE DR #246 TUCSON PIMA 85718 B1036354
(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: 4455 E CAMELBACK ROAD, STE B100 PHOENIX ARIZONA 85018
City State Zip

7. Business Phone: (520) 232-1007 Residence Phone: (480) 813-1364

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
FOX RESTAURANT CONCEPTS LLC			MEMBER	4455 E CAMELBACK ROAD, STE B100, PHOENIX, AZ	85018
CHRISTOPHER CRISTIANO			MEMBER	4632 E ROBERT E LEE ST, PHOENIX, AZ	85032
SAMUEL W. FOX			MEMBER	4816 E EXETER, PHOENIX, AZ	85018
(see attached chart for additional information)					

(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
FOX RESTAURANT CONCEPTS LLC			55%	4455 E CAMELBACK ROAD, STE B100, PHOENIX, AZ	85018
CHRISTOPHER CRISTIANO			15%	4632 E ROBERT E LEE ST, PHOENIX, AZ	85032
SAMUEL W. FOX			10%	4816 E EXETER, PHOENIX, AZ	85018
(see attached chart for additional information)					

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

Disabled individuals requiring special accommodations please call the Department

1/7/2013

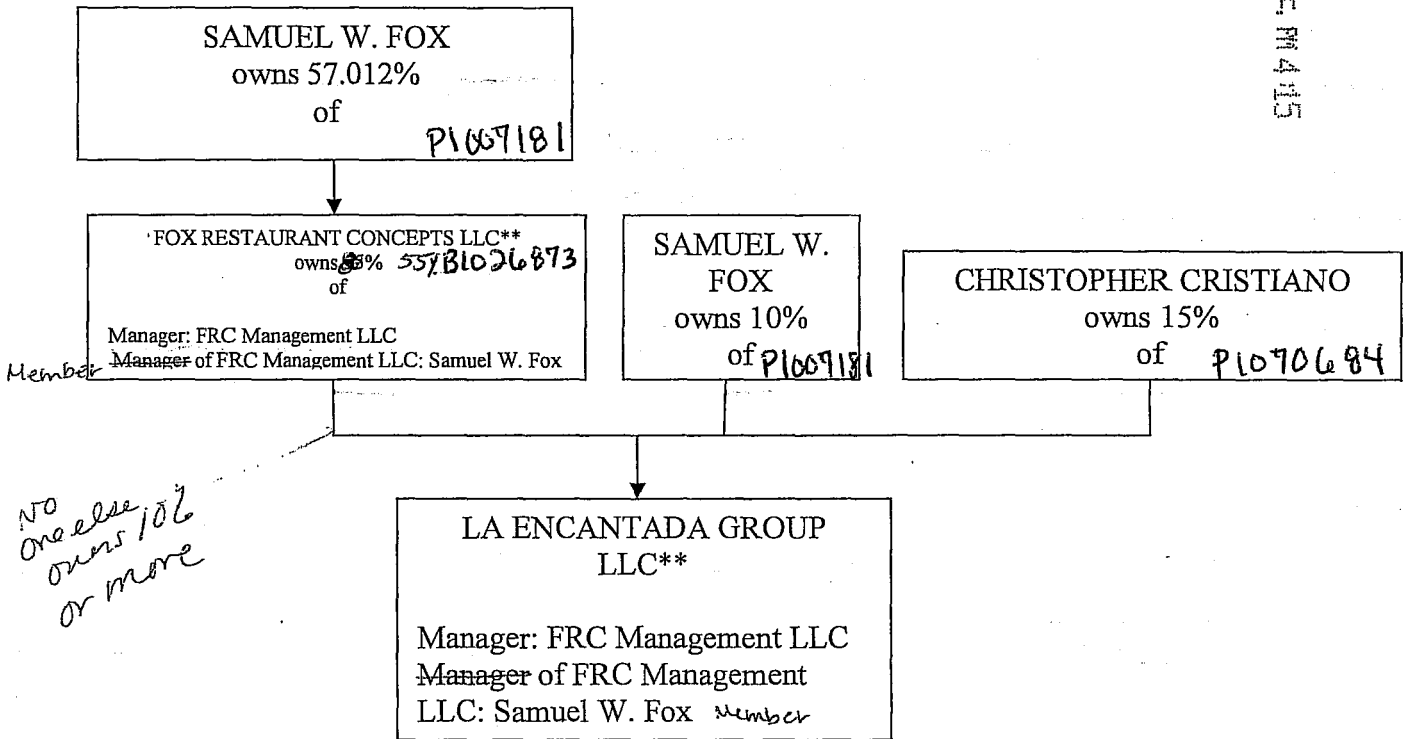
Date Received

CSR

APR 29 14 PM 01 CH PC CLK OF HD

BT

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****no other person or entity owns 10% or more**

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.

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: _____ Date of last renewal: _____

2. Current Licensee or Agent: _____
(Exactly as it appears on license) Last First Middle

I, _____, hereby consent to the agent appointment named herein and
(Print full name)
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 _____ State of _____ County of _____
(Signature of INDIVIDUAL / CORPORATE / CLUB OFFICER / MEMBER) The foregoing instrument was acknowledged before me this
_____ day of _____, _____
Day Month Year

My commission expires on: _____
(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 _____

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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, RANDY D. NATIONS, 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 _____ State of ARIZONA County of Maricopa
(Signature of INDIVIDUAL OR AGENT) The foregoing instrument was acknowledged before me this
15th day of March, 2014
Day Month Year

My commission expires on: _____
MIRANDA BUSTAMANTE
Notary Public - Arizona
Maricopa County
My Commission Expires
January 9, 2016

15th day of March, 2014
Day Month Year
(Signature of NOTARY PUBLIC)

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)