

## **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) 351-8456

July 24, 2013

Ms. Priscilla Storm Old Tucson Co. 201 S. Kinney Road Tucson, AZ 85735

RE:

Application for Agent Change/Acquisition of Control/Restructure

License No.: 06100230

Old Tucson Co.

Dear Ms. Storm:

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, August 6, 2013, 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



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TO:	Pima County Sheriff's Department Investigative Support Unit		
FROM:	TE: June 21, 2013		
DATE:			
RE:			
Attached	is the application of:		
	Storm Tucson Co. nney Road Tucson, AZ 85735		
Pima Cou	inty Liquor License No. <u>13-02-0039</u>		
SHERIFF	'S REPORT	DATE: 1/24/13	
Is there a	ny reason this application should not be re-		
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Investigative Support Unit Supervisor

JUL 23/13\*\*01:36 FC QL(\(\frac{1}{2}\))

### ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

### NOTIFICATION TO LOCAL GOVERNING BODY

Liquor License No. 06100230 Application accepted by	
ACQUISITION OF CONTROL	
ACQUISITION OF CONTROL AND AGENT CHANGE	$\boxtimes$
AGENT CHANGE	

### A.R.S. § 4-203.F

If a person other than those persons originally licensed acquires control over a license or licensee, the person shall file notice of the acquisition with the Director within fifteen business days after such acquisition of control and a list of officers, directors or other controlling persons on a form prescribed by the Director. All officers, directors or other controlling persons shall meet the qualifications for licensure as prescribed by this title. On request, the director shall conduct a preinvestigation prior to the assignment, sale or transfer of control of a license or licensee, the reasonable costs of which, not to exceed one thousand dollars, shall be borne by the applicant. The preinvestigation shall determine whether the qualifications for licensure as prescribed by this title are met. On receipt of notice of an acquisition of control or request of a preinvestigation, the Director shall forward the notice within fifteen days to the local governing body of the city or town, if the licensed premises is in an incorporated area, or the county, if the licensed premises is in an unincorporated area. The Local Governing Body of the city, town or county may protest the acquisition of control within sixty days based on the capability, reliability and qualification of the person acquiring control. If the Director does not receive any protests, the Director may protest the acquisition of control or approve the acquisition of control based on the capability, reliability and qualification of the person acquiring control Any protest shall be set for a hearing before the Board. Any transfer shall be approved or disapproved within one hundred five days of the filing of the notice of acquisition and control. The person who has acquired control of a license or licensee has the burden of an original application at the hearing, and the board shall make its determination pursuant to section 4-202 and this section with respect to capability, reliability and qualification.

#### 800 W.Washington 5th Floor 13 JUN 6 Ligr. Dept M1111 Phoenix AZ 85007-2934 www.azliguor.gov. \*13 MAR 13 Lig. Jept PH 1 31 (602) 542-5141 APPLICATION FOR AGENT CHANGE - AGQUISITION OF CONTROL - RESTRUCTURE Check · **Appropriate** X Agent Change Acquisition of Control-Box Complete Sections 1.2.3.4.6 Complete Sections 1;2, (3,4 if changing Agent), 6 Complete Sections 1,2,(3,4 if changing Agent) (See Note 2 on back) (See Note 1 on back) (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE) SECTION 1 1. Name (INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER) P1069521 / Priscilla Liquor License # Last First Middle B1003394 Corp. File #: -0511040-3 2. X Corporation L.L.C. N/A: 01d Tucson Company (Exactly as it appears on Articles of Inc. or Articles of Org.) Old Tucson Co 3. Business Name: \_ (Exactly as it appears on license) 85735 B1003393 Pima 4. Business Address: 201 S Kinney RB Tucson COUNTY (Do not use P.O. Box Number) 5. Is the business located within the incorporated limits of the above city or town? □Yes 6. Mailing Address: 201 S Kinney Rd Tucson 7. Business Phone: (520) 883-0100 Residence Phone: (520 8. Does this transaction involve the sale of any portion of the corporate stock? XYES NO N/A If yes, submit and certified copy of minutes. 9. Has there been any change of officers? XYES NO N/A If yes, submit a certified copy of minutes. (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: Middle City State Zip 🖾 Title Residence Address Storm, Priscilla President 13645 W. Sagebrush Rd, Marana AZ85653 9501 E. Birch Tree Circle Director 9501 E. Birch Ti-Secy/Trea Tucson, AZ 85749 Smith, Theo Burton 14250 S. Avenida Stallion Deatherage, Brian Keith Sahuarita, AZ 85629 (ATTACH ADDITIONAL SHEET(S) IF NECESSARY) 2. List stockholders or controlling members owning 10% or more of Corp/LLC: Residence Address City State Zip % Owned OTC Irrevocable Trust 1476 E. Canyon Spring Ct. 50% Helaine Levy, Trustee Tucson, AZ 85718 Window Pane Irrevocable Trust 2415 E. 3rd St., Tucson, AZ 85719 30% Dana Pitt, Trustee Herndon OTC Trrevocable 445 S. Via Golondrina, Tucson, AZ 85716 20% Susan Pitt, Trustee (ATTACH ADDITIONAL SHEET(S) IF NECESSARY) LICO102 4/2009 Disabled individuals requiring special accommodations please call the Department Date Received

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

The state of the s	dditional sheets as necessary in order to disclose real people.			
As an Agent, will you be physically present and or	· — — — — — — — — — — — — — — — — — — —			
If you answered YES, you must provide proof of attendance of a Department approved Liquor Law Training Course within the last five years <u>before your application for Agent can be submitted</u> . If "no" a manager with approved <u>training must be submitted</u> .				
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: <u>06100230</u>	Date of last renewal: 9/11/2012 Exp 9/30/2			
Current Licensee or Agent: <u>Levy</u> (Exactly as it appears on license) Last	Helaine Diamond First Middle			
, Helaine Diamond Levy	, hereby consent to the agent appointment named herein and			
the background report shows that I, the corporation, of	t of the death, resignation, or discharge of this agent. I also understand that if or any officer, director, member, or stockholder have been convicted of a render the license to the Arizona Department of Liquor Licenses and Control  State of Arizona County of Dimensional County of Dim			
(Signature of INDIVIDUAL) CORPORATE/CLUB OFFICER/MEMBE	The foregoing instrument was acknowledged before me this			
OFFICIAL SEAL  TINA L. RAYMOND  My CHARLES AND PLANT OF THE PLANT OF T	Day day of tepruary DDB  Day Month Year  (Signature of NOTARY PUBLIC)			
SECTION 52 My CORD EXP JULY 25, 2014 SECTION FOR				
Is there more than one licensed premises involved? I paid for each license/location.  Type of current ownership:	☐ YES ☐ NO If yes, <b>SEPARATE APPLICATIONS</b> must be filed and fees  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			
	ENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE) gent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING			
ı, Priscilla Storm (Print full name)	, hereby declare that I am the APPLICANT filing this application.			
have read the application and the contents and all sta	atements are true, correct and complete.			
× Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q	State of Arizpha County of Vima  The foregoing instrument was acknowledged before me this			
(Signature of INDIVIDUAL OR AGENT)	26th day of February 2013			
My doministrative Avidance RAYMONDS, 2014	Day Month Year			

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