

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

March 25, 2014

Mr. Daniel Dominic Scordato Vivace Restaurant 6440 N. Campbell Avenue Tucson, AZ 85718

RE: Pima County Liquor License No.: 14-04-9172 d.b.a. Vivace Restaurant

Dear Mr. Scordato:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 12, Restaurant, which was received in our office on February 26, 2014. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, April 8, 2014, 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,

Robin Brigode

Robin Brigode ⁽ Clerk of the Board

Enclosure

🐼 Print Form

.....

	ARIZONA DEPART	MENT OF LIQUOR LIC	ENSES AND C	ONTROL	
		00 W Washington 5th Flc Phoenix AZ 85007-2934 www.azliquor.gov (602) 542-5141			
		AFFIDAVIT OF POSTING			
Date of Posting:	3-3-74 Vivace Restaura		osting Removal:	3-24-14	-
Applicant Name: _		Daniel		Dominic	
	Last	First	····	Middle	
14-04	6440 N. Campbell A Street	Avenue T	ucson, AZ ^{City}	85718 _{Zip}	
	that pursuant to A.R.S.§ licensed by the above ap	4-201, I posted notice in a oplicant and said notice w Process Server Title	vas posted for a	•	MAR 25'14m0343 PC QLK OF BL
	ty/County Official	Title		Telephone #	- K
ali-	Signeture		3-6	スピーノイ Date Signed	
Return this affidavi documents.	it with your recommenda	ation (i.e., Minutes of Mee	ting, Verbatim, e	etc.) or any other related	d

If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

Individuals requiring special accommodations please call (602) 542-9027

Lic0119 4/2009



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 Micrograph is Mgt. Division 1640 East Benson (ighway Tucson, Arizona 5714 Phone: (520) 351-8454 • Faz (520) 351-8456

TO:Development Services, Zoning DivisionFROM:Brian Turco BT
Administrative Support SpecialistDATE:February 27, 2014RE:Zoning Report - Application for Liquor License

Attached is the application of:

Daniel Dominic Scordato d.b.a. Vivace Restaurant 6440 N. Campbell Avenue Tucson, AZ 85718

Pima County Liquor License No. <u>14-04-9172</u> Series <u>12, Restaurant</u> New License <u>X</u> Person Transfer_ Location Transfer

ZONING REPORT

DATE:

PR 05714W1156 PC 0

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

Yes No

If No, please provide the following:

Pursuant to Pima County Zoning Code, Section:__

the applicant must:_

Pima Zohing Inspector



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

TO:	Pima County Sheriff's Department Investigative Support Unit
FROM:	Brian Turco Administrative Support Specialist
DATE:	February 27, 2014
RE:	Sheriff's Report - Application for Liquor License

Attached is the application of:

Daniel Dominic Scordato d.b.a. Vivace Restaurant 6440 N. Campbell Avenue Tucson, AZ 85718

Pima County Liquor License No. <u>14-04-9172</u> Series <u>12, Restaurant</u> New License <u>X</u> Person Transfer_ Location Transfer

SHERIFF'S REPORT

DATE: <u>_____3/15/17</u>____

1991 17 14 MOLEO PC QUA

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

NOTAWE NOTED.

+220

Investigative Support Unit Supervisor

Vacket 2 14-04-9172 Arizona Department of Liquor Licenses and Control 800 West Washington, 5th Floor Phoenix, Arizona 85007 www.azliguor.gov 602-542-5141 **PPLICATION FOR LIQUOR LICENSE** TYPE OR PRINT WITH BLACK INK Notice: Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements. بتبله SECTION 1 This application is for a: SECTION 2 Type of ownership: ☐ MORE THAN ONE LICENSE ☑ INTERIM PERMIT Complete Section 5 J.T.W.R.O.S. Complete Section 6 - J X NEW LICENSE Complete Sections 2, 3, 4, 13, 14, 15, 16 □ INDIVIDUAL Complete Section 6 PARTNERSHIP Complete Section 6 PERSON TRANSFER (Bars & Liquor Stores ONLY) Complete Sections 2, 3, 4, 11, 13, 15, 16 X CORPORATION Complete Section 7 LOCATION TRANSFER (Bars and Liquor Stores ONLY) Complete Sections 2, 3, 4, 12, 13, 15, 16 CLUB Complete Section 8 H PROBATE/WILL ASSIGNMENT/DIVORCE DECREE GOVERNMENT Complete Section 10 0 5 TRUST Complete Section 6 Complete Sections 2, 3, 4, 9, 13, 16 (fee not required) GOVERNMENT Complete Sections 2, 3, 4, 10, 13, 15, 16 OTHER (Explain) まろろろ 1710 4789 **SECTION 3** Type of license and fees LICENSE #(s): 1. Type of License(s): 12, Restaurant Department Use Only $\underline{\infty}$ 2. Total fees attached: \$ APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE. The fees allowed under A.R.S. 44-6852 will be charged for all dishonored checks. SECTION 4 Applicant P1010635 Mr. Scordato Dominic Daniel 1. Owner/Agent's Name: Ms. (Insert one name ONLY to appear on license) First Middle Last , 2. Corp./Partnership/L.L.C.: GDL Restaurants, INC. B101219 (Exactly as it appears on Articles of Inc. or Articles of Org.) 3. Business Name: Vivace Restaurant BIDII94 (Exactly as it appears on the exterior of premises) 4. Principal Street Location _____ North Campbell Avenue Tucson Pima 85718 (Do not use PO Box Number) City County Zip Daytime Phone: 520-661-2228 Email: junna.vivace@comcast.net 5. Business Phone: 520-795-7221 6. Is the business located within the incorporated limits of the above city or town? **M**YES 7. Mailing Address: 6440 North Campbell Avenue ΑZ 85718 Tucson State City Zip 8. Price paid for license only bar, beer and wine, or liquor store: Type Type -\$ ~ \$ DEPARTMENT USE ONLY Fees: Application Site Inspection Finger Prints **OF ALL FEES** Is Arizona Statement of Citizenship & Alien Status For State Benefits complete? 💆 YES 🗌 NO 12104289 Lic. # Accepted by: Date

1/7/2013

*Disabled individuals requiring special accommodation, please call (602) 542-9027.

SECTION 5 Interim Permit:

 If you intend to operate business when your application is pe 4-203.01. 	ending you will need an Interim Permit pursuant to A.R.S.
2. There MUST be a valid license of the same type you are appl	ying for currently issued to the location.
3. Enter the license number currently at the location.	
4. Is the license currently in use? \Box YES \Box NO If no, ho	w long has it been out of use?
ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCA	TION TO THIS APPLICATION.
<pre>I ,, declare that I am the CURRE</pre>	which applies) of the stated license and location, State of County of The foregoing instrument was acknowledged before me this day of,Year
AMENDMENT	(Signature of NOTARY PUBLIC)
SECTION 6 Individual or Partnership Owners: EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LICOT FOR EACH CARD.	101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$22 PROCESSING FEE

1. Individual:

Last			Middle	% Owned	Mailing Address	City State Zip				
	-						ч ;й 			
Partnership Na	Partnership Name: (Only the first partner listed will appear on license)									
General-Limited	Last	First	Middle	% Owned	Mailing Address	City State Zip	<u>U1</u>			
							1			
	<u> </u>	<u></u>			· · · · · · · · · · · · · · · · · · ·		ы Сй Сй			
					······································					
		***)	YRASSECE	NFI			

2. Is any person, other than the above, going to share in the profits/losses of the business? If Yes, give name, current address and telephone number of the person(s). Use additional sheets if necessary.

. .

··· . .

Last	First	Middle	Mailing Address	City, State, Zip	Telephone#
				. • .	
			· · · · · · · · · · · · · · · · · · ·		
	•		a		
			,		

SECTION 5 Interim Permit:

- 1. If you intend to operate business when your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203.01.
- 2. There **MUST** be a valid license of the same type you are applying for currently issued to the location.
- 3. Enter the license number currently at the location. 12100137
- If no, how long has it been out of use? 9-18-13**see attached 4. Is the license currently in use? □ YES ☑ NO

ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION. PLEASE SEE PROV prodence. , declare that I am the CURRENT OWNER, AGENT, CLUB MEMBER, PARTNER, (Print full name)

MEMBER, STOCKHOLDER, OR LICENSEE (circle the title which applies) of the stated license and location.

(Signature) Official Sea PUBLIC My commission expires o ٥NΔ Commission Expires Novemb

State of HRIZONA, County of Pi ma The foregoing instrument was acknowledged before me this

day of 5

(Signature of NOTARY PUBLIC)

SECTION 6 Individual or Partnership Owners: FOR EACH CARD. Š

1. Individual:

Last	First	Middle	% Owned	Mailing Address	City State Zip

Partnership Name: (Only the first partner listed will appear on license)

General-Limited	Last	First	Middle	% Owned	Mailing Address	City State Zip
	·······					
) Y 5	ASSECENE

2. Is any person, other than the above, going to share in the profits/losses of the business? □ YES □ NO If Yes, give name, current address and telephone number of the person(s). Use additional sheets if necessary.

Last	First	Middle	Mailing Address	City, State, Zip	Telephone#

State of Arizona Department of Liquor Licenses and Control Alcoholic beverage license License 12100137

Issue Date: 1/6/1993

Issued To:

THOMAS ROBERT AGUILERA, Agent AM RESTAURANT CORP, Owner

Location: ANTHONY'S IN THE CATALINAS 6440 N CAMPBELL AVE TUCSON, AZ 85718 Expiration Date: 9/30/2014 Restaurant

Mailing Address:

THOMAS ROBERT AGUILERA AM RESTAURANT CORP ANTHONY'S IN THE CATALINAS 4554 E CAMP LOWELL DR TUCSON, AZ 85712

POST THIS LICENSE IN A CONSPICUOUS PLACE

FEE FOR EACH CARD.	SUBMITA COMPLE ATION Coi	eted questionnaire (), AN "APPLICANT" TYPE FINGERPRI	NT CARD, AND \$22 PROCESSING
L.L.C. Col 1. Name of Corporatio	-				
	(Exa	ctly as it appears on Art	icles of Incorp	oration or Articles of Organization)	· · · · · · · · · · · · · · · · · · ·
2. Date Incorporated/C	Organized: 11/	10/1992 S	tate where	Incorporated/Organized:	
3. AZ Corporation Cor	nmission File N	lo.:	······································	Date authorized to do t	business in AZ:
4. AZ L.L.C. File No: _		,,,,	C	ate authorized to do busines	s in AZ:
5. Is Corp./L.L.C. Non	profit? 🗆 YES			a a a po a tres o a	Family 18. D reserve
6, List all directors, offi	cers and mem	bërs in Corporatio	n/L.L.C.:	AMENDM	
Last	First	Middle	Title	Mailing Address	City State Zip
· · · ·		· · · · · · · · · · · · · · · · · · ·			
					••
L		(ATTACH A		L	······································
7. List stockholders wh	io are controllir	•		or more:	
Last	First	Middle	% Owned	Mailing Address	City State Zip
					Pij
	•				المربية الحيار
		·····			ហ
		(ΔΤΤΔΩΗ Δ	DDITIONALS	HEET IF NECESSARY)	
8. If the corporation/L	.L.C. is owned				and a director/officer/member
disclosure for the p	arent entity. /	Attach additional s	heets as ne	eded in order to disclose pe	rsonal identities of all owners.
SECTION 8 Club A					
EACH PERSON LISTED MUST S FOR EACH CARD.	UBMIT A COMPLET	ED QUESTIONNAIRE (FO	RM LICO101), A	N "APPLICANT" TYPE FINGERPRINT	CARD, AND \$22 PROCESSING FEET
1. Name of Club:				Date Charte	
	Actly as it appears	on Club Charter or Byla	iws)	(Atta	ch a copy of Club Charter or Bylaws)
 Is club non-profit? List officer and direct 					
Last	First	Middle	Title	Mailing Address	City State Zip
		······································	•		
		·····			
		- · · · · · · · · · · · · · · · · · · ·			·
	· · · · ·		<u> </u>	<u> </u>	
(ATTACH AD	DITIONAL SHEET	FIF NECESSARY)	3		

.

•

	•	nited Liability Co.: MPLETED QUESTIONNAIRE	E (FORM LIC0101	i), AN	"APPLICANT" TYPE FINGERPRINT C	ARD, AND \$22 PROCESSING
	RPORATION .C. <i>Complete 1,</i> 3	<i>Complete question</i> 2, 4, 5, 6, 7, and 8.	s 1, 2, 3, 5, (6, 7,	and 8.	
1. Name of Co	prporation/L.L.C.:	GDL Restaurants, INC. (Exactly as it appears on /	Articles of Incorp	porati	on or Articles of Organization)	
2. Date Incorpo	orated/Organized:	11-6-92	State where	Inco	orporated/Organized: Arizona	l
3. AZ Corporat	tion Commission F	ile No. 0527 545 - 3			Date authorized to do bus	iness in AZ: 11-10-92
4. AZ L.L.C. Fil	le No:		[Date	authorized to do business in	AZ:
5. Is Corp./L.L.	.C. Non-profit? 🛙	YES 🖾 NO			•	
		nembers in Corporati	•		. Mailing Addroop	City State 7in
Last	First	Middle	Title		Mailing Address	City State Zip
Scordato	Daniel	Dominic	Pres./Tro	es.	6440 North Campbell Ave.	Tucson, AZ 85718
Scordato	Daniel	Dominic	V.P./ Sec		6440 North Campbell Ave.	Tucson, AZ 85718
	<u></u>					<u></u>
				·		Liqr, Dept
7 List stockhol	Iders who are con	(ATTACH trolling persons or wh			ET IF NECESSARY)	
Last	First	Middle	% Owned		Mailing Address	City State Zip 😤
Scordato	Daniel	Dominic	100	644	0 North Campbell Ave.	Tucson, AZ 85718 5
			· · · · · · · · · · · · · · · · · · ·			
		(ATTACH	ADDITIONAL	SHEE	ET IF NECESSARY)	
					ntage of ownership chart, and ed in order to disclose perso	
	Club Applicants			•		
			(FORM LIC0101),	AN "/	APPLICANT" TYPE FINGERPRINT CA	RD, AND \$22 PROCESSING FEE
1. Name of Clu	ub:	- *			Date Chartere	d:
	(Exactly as it ap	pears on Club Charter or B	ylaws)		(Attach a	a copy of Club Charter or Bylaws)
2. Is club non-p	profit? 🛛 YES	□ NO				
3. List officer a		N 81-1-12-	T 41 -			Otto Ototo Zin
Last	First	Middle	Title		Mailing Address	City State Zip
					· · · · · · · · · · · · · · · · · · ·	
	•					

erson/designee:	. Current Licensee's Name: Exactly as it appears on license)	Last	First	Middle	··
License Type: License Number: Date of Last Renewal: TACH TO THS APPLICATION. CERTIFIED COPY OF THE VILL PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE EGREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION. TION 10 Government: (for cities, towns, or counties only) iowernmental Entity:	2. Assignee's Name:			· · · · · · · · · · · · · · · · · · ·	
TIACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE ECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THE APPLICATION. TIION 10 Government: (for cities, towns, or counties only) tevernmental Entity:			First		
ECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THE SAPPLICATION. 2TION 10 Government: (for cities, towns, or counties only) isovernmental Entity:					
iovernmental Entity:					RCE
erson/designee:	SECTION 10 Government: (for c	cities, towns, or counties	only)		
Last First Middle Contact Phone Number A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED,	. Governmental Entity:				
Last First Middle Contact Phone Number A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED,	Person/designee:				
CTION 11 Person to Person Transfer: sitions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09). current Licensee's Name:		First	Middle	Contact Phone Nur	mber
CTION 11 Person to Person Transfer: Image: Completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09). surrent Licensee's Name:	A SEPARATE LICENSE MUST E	BE OBTAINED FOR EACH I	PREMISES FROM WHIC	H SPIRITUOUS LIQUOR IS	SERVED.
Stions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09). Sturrent Licensee's Name:					
strong to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series O,U/, and U9).	SECTION 11 Person to Person	Transfer:			
xactly as it appears on license) Last First Middle (Indiv., Agent, etc.) orporation/L.L.C. Name:	Questions to be completed by CUR	RENT LICENSEE (Bars an	d Liquor Stores ONLY	-Series 06,07, and 09).	2
increases in the interest holders, interest holders, etc. been notified of this transfer? YES INO if this application, attach fee, and current license to this application. If yes, complete Section I,	. Current Licensee's Name:		NA:-J-J-	Entity:	
(Exactly as it appears on license) burrent Business Name: (Exactly as it appears on license) (Exactly as it appears on license) orgen (Exactly as it appears on license) (City, State, Zip urrent Mailing Address: Street (Dirth that applications, license holders, interest holders, etc. been notified of this transfer? Other than business) City, State, Zip (ave all creditors, lien holders, interest holders, etc. been notified of this transfer? Other than business (City, State, and current license to this application is pending? I y =					Agent, etc.) - *
intrem Business Name:	. Corporation/L.L.C. Name:(Exac	ctly as it appears on license)			
hysical Street Location of Business: Street	. Current Business Name:				ι. C
City, State, Zip	(Exac	ctly as it appears on license)			
icense Type:	. Physical Street Location of Busine	ss: Street			
imore than one license to be transfered: License Type: License Number:	City, S	State, Zip		· · · · · · · · · · · · · · · · · · ·	
urrent Mailing Address: Street	. License Type:	License Number:			
Other than business) City, State, Zip	If more than one license to be tran	sfered: License Type:	Licen	se Number:	
Other than business) City, State, Zip	. Current Mailing Address:	Street			
ave all creditors, lien holders, interest holders, etc. been notified of this transfer? Does the applicant intend to operate the business while this application is pending? I YES NO If yes, complete Section of this application, attach fee, and current license to this application. I,, hereby authorize the department to process this application to transfer (print full name) Drivilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of the conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue. (print full name) STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are ue, correct, and complete. State ofCounty of	(Other than business)				
boes the applicant intend to operate the business while this application is pending? I,, hereby authorize the department to process this application to transfer (print full name) privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of the conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue. , declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNE (print full name) STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are rue, correct, and complete. 	-				
is of this application, attach fee, and current license to this application. I,, hereby authorize the department to process this application to transfer (print full name) privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of the conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNE (print full name) STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are rue, correct, and complete					
(print full name) privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of the conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNE, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNE				☐ YES ☐ NO If yes, com	plete Section
brivilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of the conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue. , declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNE (print full name) STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are rue, correct, and complete. State ofCounty of		, hereby	authorize the departme	nt to process this application	on to transfer
STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are rue, correct, and complete. State of County of	privilege of the license to the applic	ant now owns or will own th	e property rights of the	license by the date of issue	Ē
STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are rue, correct, and complete. State of County of	l,	, declare t	hat I am the CURRENT	OWNER, AGENT, MEMB	ER, PARTNE
State ofCounty of	STOCKHOLDER, or LICENSEE o	of the stated license. I have	read the above Section	11 and confirm that all sta	tements are
	true correct and complete				
(organization of the mean section of the mean	true, correct, and complete.		01-1	^f	
	STOCKHOLDER, or LICENSEE o	f the stated license. I have	read the above Section	11 and confirm that all sta	⊏rx, r iteme

SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY) APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE

.

•

1.	Current Business:	N	ame			· · · · · · · · · · · · · · · · · · ·
	(Exactly as it appears or	n license)				
2.	New Business:	N	ame			
	(Physical Street Locatio	n)				
3.	License Type:					
4.	If more than one licer	se to be trans	sferred: Licen	se Type:	License Number:	
5.	What date do you pla	n to move? _			What date do you plan to open?	
	ECTION 13 Ques	tions for all		icants <u>excludin</u>	g those applying for government, hotel/	
the d	lirector, within three hundre	ed (300) horizon es one (1) throug	tal feet of a chur	ch, within three hund	emises which are at the time the license application is dred (300) horizontal feet of a public or private schoo horizonal feet of a fenced recreational area adjacen	l building with to such school building.
	a) Restaurant license (§	4-205.02)		c)	Government license (§ 4-205.03)	
	b) Hotel/motel license (§	4-205.01)		d)	Fenced playing area of a golf course (§ 4-207 (B)(5)	JAN 30 Liy, Jept
1	. Distance to neares	t school:	ft.	Name of school		
			Ad	dress	City, State, Zip	LÔ
2	Distance to nearest	church:	ft	Name of church		
۷.		Church				
			A	ddress	City, State, Zip	
3.	I am the: 🛛 🖾 Less	ee 🗆 S	ublessee] Owner 🛛 🏾	urchaser (of premises)	
4.	If the premises is leas	ed give lesso	rs: Name ^{Joe}	P. Tassone Trust		
		-		0 West Main Stree		
	 () () () ()	4 ± 1200€)	-	City, State, Zip	
	. Monthly rental/lease	•			ning length of the lease 7_yrs. ~mos. or other Please see attached lease, section (give details - attach additional sheet in	n 127 Nard Der
4b.	. What is the penalty	If the lease is	s not fulfilled?	\$ <u></u>	(give details - attach additional sheet i	necessary)
	What is the total <u>busin</u> Please list lenders you			ense/location exc	luding the lease? \$	(Lease - 4 pages
La	ast	First	Middle	Amount Owed	Mailing Address City State	tip 4 pages
		·····	<u></u>			
<u> </u>						
			·····			
ا						i

(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for (be specific)? <u>full service restaurant</u>

. .

COMMERCIAL LEASE

This Commercial Lease (the "Lease"), dated October ___, 2013, is made by and between JOSEPH P. TASSONE TRUST, (the "Landlord") and GDL RESTAURANTS, INC., an Arizona corporation (the "Tenant").

1. **Premises.** Landlord hereby leases to Tenant and Tenant leases from Landlord for the term, at the rental, and upon all of the conditions set forth herein, that certain real property situated in Pima County, Arizona, commonly known as: 6440 North Campbell Avenue, Tucson, Arizona 85718, also known as Lot 56 of Catalina Foothills Estates No. 6, except the South 228.76 feet thereof (the "Premises").

2. Term. The term of this Lease shall be for ninety (90) months, commencing on <u>SEPTEMBER 9</u>, 2013 (the "Commencement Date") and subject to the terms and conditions of this Lease, expiring on last day of the ninetieth (90th) month thereafter, unless extended as further provided herein in paragraph 20. (the "Term"). The Commencement date shall be determined as set forth in paragraph 3.3 following.

3. Rent.

- :

3.1 Base Rent. Tenant shall pay Landlord initial monthly base rental on the first day of each month, which monthly rental shall be the sum of Ten Thousand and no/100 Dollars (10,000.00) net, net, net of all insurance, taxes, and expenses and shall continue for the first full year of the Lease. The regular base monthly rental of Twelve Thousand and no/100 Dollars (\$12,000) shall commence on the first day of the thirteenth month of the Lease, net, net, net and shall continue for the remaining 78 months of the initial term of the Lease. The base rental sums described in this paragraph are hereinafter described as the Base Rent.

Additional Rent. Tenant further agrees to pay to Landlord, in addition to the 3.2 Base Rent, Tenant's proportionate share of all privilege, sales, excise, rental, Real Estate Taxes (as defined in Section 9.2 below), Landlord's Insurance (as defined in Section 7.1 below), and other taxes (except income taxes) imposed now or hereafter imposed by any governmental authority upon the rentals and all other amounts herein provided to be paid by Tenant (the "Additional Rent"). The Additional Rent shall be in addition to and accompanying each monthly payment of the Base Rent made by Tenant to Landlord. Tenant agrees to impound each month and pay to the Landlord with the Base Rent the Additional Rent. In the event that the impound is more or less than the actual amount of Real Estate Tax and Landlord's Insurance due, there shall be an adjustment made to the Additional Rent within thirty (30) days of the determination of the actual amount of Real Estate Tax and Landlord's Insurance due. In the event additional Real Estate Tax and/or Landlord's Insurance is due, Tenant shall make an additional payment equal to the amount due as Additional Rent within thirty (30) days of receipt of notice of the determination of the actual amount due to the Landlord by the Tenant. In the event there has been an overpayment, Tenant shall be entitled to a credit against future payments of Additional Rent or, if no future Additional Rent is due, to a refund of any excess payment from the Landlord.

1

"13 DEC 20 Livr. pert PM 1 19

Lease over +

section 13.2

13. Defaults; Remedies.

13.1 Defaults by Tenant. The occurrence of any one or more of the following events shall constitute a material default and breach of this Lease by the Tenant:

13.1.1 The vacating or abandonment of the Premises by Tenant; provided, however, that if Tenant makes best efforts to find a subtenant and pays for the costs of a broker retained by Landlord to release the Premises and the Premises is leased to another tenant, then the vacating or abandonment of the Premises shall not be an event of default.

13.1.2 The failure by the Tenant to make any payment of Base Rent, Additional Rent or any other payment required to be made by Tenant hereunder, as and when due, however, Landlord shall first give Tenant ten (10) days written notice of such failure and Tenant shall then fail to cure said failure within said 10 day period.

13.1.3 The failure by Tenant to observe or perform any of the covenants, conditions, provisions of this Lease to be observed or performed by Tenant, other than described in subsection 13.1.2 above, where such failure shall continue for a period of thirty (30) days after written notice hereof from Landlord to Tenant, provided, however, that if the nature of Tenant's default is such that more than thirty (30) days are reasonably required for its cure, then Tenant shall not be deemed to be in default if Tenant commenced such cure within said thirty (30) days period and thereafter diligently prosecutes such cure to completion.

13.1.4 (i) The making by Tenant of any general assignment, or general arrangement for the benefit of creditors; (ii) the filing by or against Tenant of a petition to have Tenant adjudged a bankrupt or a petition for reorganization or arrangement under any law relating to bankruptcy (unless, in the case of a petition filed against Tenant, the same is dismissed within sixty (60) days); (iii) the appointment of a trustee or receiver to take possession of substantially all of Tenant's assets located at the Premises or of Tenant's interest in this Lease, where possession is not restored to Tenant within thirty (30) days; or (iv) the attachment, execution or other judicial seizure of substantially all of Tenant's assets located at the Premises or of Tenant's date the Premises date the Premises or of Tenant's date the Premises date the Premises or of Tenant's date the Premises date the Premi

13.2 Remedies upon Tenant's Breach. In the event of any such material default or breach by Tenant, Landlord may at any time thereafter, with or without notice or demand and without limiting Landlord in the exercise of any right or remedy which Landlord may have by reason of such default or breach:

13.2.1 Terminate this Lease, or from time to time, without terminating this Lease, relet the Premises or any part thereof on such terms and conditions as Landlord, in its sole discretion, shall determine with the right to make alterations and repairs to said Premises; provided, however, that Landlord shall in no way be responsible or liable for any failure to relet the Premises or any part thereof or for any failure to collect any rent due upon any such reletting. In the event Landlord relets the Premises from time to time, the rentals so received shall be applied first to the payment of any obligation other than rent due hereunder from Tenant to Landlord, then to the payment of the cost of such reletting, including attorney's fees and broker's commission that Landlord may have paid or incurred in connection with such repossession and

Jease 13.2 (3/1) be deemed to have terminated this Lease or the liability of Tenant for the total rent reserved hereunder unless Landlord shall give to Tenant written notice of Landlord's election to terminate this Lease. In the event that Landlord shall terminate this Lease as provided herein, Landlord shall thereupon be entitled to recover from Tenant the worth, at the time of such termination, or the excess, if any, of the Base Rent, Additional Rent and other charges required to be paid by Tenant hereunder for the balance of the Term (if this Lease had not been so terminated) over the then reasonable rental value of the Premises for such period.

13.2.6 The remedies of the Landlord as set forth in Section 13.2 shall be deemed cumulative and not exclusive.

13.3 Late Charges. Tenant hereby acknowledges that late payment by the Tenant to the Landlord of Base Rent and/or Additional Rent due hereunder will cause the Landlord to incur costs not contemplated by this Lease, the exact amount of which will be extremely difficult to ascertain. Such costs include, but are not limited to, processing and accounting charges and late charges which may be imposed on Landlord by the terms of any mortgage or trust deed covering the Premises. Accordingly, if any installment of Base Rent and/or Additional Rent due from Tenant shall not be received by Landlord or Landlord's designee within ten (10) days after such amount shall be due, Tenant shall pay to Landlord a late charge equal to 10% of such overdue amount. The parties hereby agree that such late charge represents a fair and reasonable estimate of the costs Landlord will incur by reason of late payment by Tenant. Acceptance of such late charge by Landlord shall in no event constitute a waiver of Tenant's default with respect to such overdue amount, nor prevent Landlord from exercising any of the other rights and remedies granted hereunder.

13.4 Default by Landlord and Remedies upon Landlord's Breach. The Landlord shall not be deemed in default of this Lease unless Landlord fails to perform obligations required of Landlord within a reasonable time, but in no event later than thirty (30) days after written notice by Tenant to Landlord and to the holder of any mortgage or deed of trust covering the Premises whose name and address shall have theretofore been furnished to the Tenant in writing specifying wherein Landlord has failed to perform such obligations; provided, however, that if the nature of the Landlord's obligations is such that more than thirty (30) days are required for performance, then Landlord shall not be in default if Landlord commence performance within such 30-day period and thereafter diligently prosecutes the same to completion. If the Landlord does not perform, Landlord's mortgagee may perform in Landlord's place and the Tenant must accept such performance. In no event shall the Tenant have the right to terminate this Lease as a result of the Landlord's default, and the Tenant's remedies shall be limited to damages and/or an injunction.

14. Condemnation. If the Premises or any portion thereof are taken under the power of eminent domain, or sold under the threat of the exercise of said power (all of which are herein called "condemnation"), this Lease shall terminate as to the part so taken as of the date the condemning authority takes title or possession, whichever first occurs. If more than 20% of the floor area of the improvements on the Premises, or more than 20% of the land area of the Premises that is not occupied by any improvements, is taken by condemnation, Tenant may, at Tenant's option, to be exercised in writing only within thirty (30) days after Landlord shall have given Tenant written notice of such taking (or in the absence of such notice, within thirty (30) days after the condemning authority shall have taken possession) terminate this Lease as of the

"13 DEC 20 Ligr. Nept PM 1 20

ease 13,2

reletting, then to the payment of the costs of any alteration or repair to the Premises to make them tenantable or acceptable to a new tenant, then to the payment of Base Rent or Additional Rent due and unpaid hereunder, and the residue, if any, shall be held by the Landlord and applied in payment of future rent as the same may become due and payable hereunder. Whether or not the Premises are relet, Tenant shall pay Landlord all amounts required to be paid by Tenant up to the date of Landlord's re entry and thereafter Tenant shall pay Landlord until the end of the term the amount of all rentals and other charges required to be paid by Tenant hereunder, less the proceeds of such reletting during the term hereof, if any, after payment of the foregoing expenses. Unpaid installments of Base Rent or Additional Rent or other sums shall bear interest from the date due at the rate of 15% per annum. In the event the Tenant shall have abandoned the Premises, Landlord shall have the option of (i) retaking possession of the Premises and recovering from Tenant the amount specified in this Subsection13.2.1, or (ii) proceeding under Subsection 13.2.2 below.

13.2.2 Maintain Tenant's right to possession in which case this Lease shall continue in effect whether or not Tenant shall have abandoned the Premises. In such event, Landlord shall be entitled to enforce all of Landlord's rights and remedies under this Lease, including the right to recover the Base Rent and Additional Rent as it becomes due hereunder.

13.2.3 Terminate Tenant's right to possession of the Premises by any lawful means, in which case this Lease shall terminate and the Tenant shall immediately surrender possession of the Premises to the Landlord. In such event, the Landlord shall be entitled to recover from the Tenant, all damages incurred by the Landlord by reason of the Tenant's default including, but not limited to, the cost of recovering possession of the Premises; expenses of releting, including necessary renovation and alteration of the Premises, reasonable attorney's fees, and any real estate commission actually paid; the "worth at the time of the award" established by the court having jurisdiction thereof the amount by which the unpaid Base Rent, Additional Rent and other charges due for the balance of the Term after the time of Tenant's default exceeds the amount of such rental loss for the same period that Tenant proves by clear and convincing evidence could have been reasonably avoided; and that portion of the leasing commission, if any, paid by Landlord applicable to the unexpired Term of this Lease. Unpaid installments of Base Rent, Additional Rent and all other charges and sums shall bear interest from the date due until paid in full at the rate of 15% per annum.

13.2.4 Re-enter the Premises, without terminating this Lease, and remove any property from the Premises in which case the Landlord shall be entitled to enforce all of the Landlord's rights and remedies under this Lease, including the right to recover the Base Rent, Additional Rent and all other charges and amounts due hereunder as they become due. No reentry or taking possession of the Premises by the Landlord pursuant to this Subsection 13.2 or other action on the Landlord's part shall be construed as an election to terminate this Lease unless a written notice of such intention is given to the Tenant or unless the termination thereof is decreed by a court of competent jurisdiction. The Landlord's election not to terminate this Lease shall not preclude the Landlord from subsequently electing to terminate this Lease or pursuing any of its other remedies available to it.

13.2.5 Pursue any other remedy now or hereafter available to Landlord under the laws and decisions of the State of Arizona. Landlord shall not by such re-entry or any other act

Lose B.Z

SECTION 13 - continued

7.	Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year?					
8.	Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business?					
9.	Is the premises currently licensed with a liquor license? 🛛 YES 🛛 NO If yes, give license number and licensee's name:					
	cense #_12100137 (exactly as it appears on license) Name THOMAS ROBERT AGUILERA					
LI	cense #(exactly as it appears on incense) Name					
ċ	ECTION 14 Restaurant or hotel/motel license applicants:					
_						
1	1. Is there an existing restaurant or hotel/motel liquor license at the proposed location?					
	Last First Middle					
2	 If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application. 					
.3	All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.					
4	4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this ☐ hotel/motel ☐ restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records. Required for Audit (form LIC 1013) with this application.					
	applicant's signature					
	As stated in A.R.S § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patie harriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be preperly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is pecessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliquor.gov and click drift the "Information" tab, applicants initials					
	an and a second					
	ECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form) $\qquad \qquad \qquad$					
	□ Entrances/Exits □ Liquor storage areas Patio: □ Contiguous □ Service windows □ Drive-in windows □ Non Contiguous					
2.	Is your licensed premises currently closed due to construction, renovation, or redesign? YES NO If yes, what is your estimated opening date? month/day/year					
3.	Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including					
	the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.					
4.	The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).					
5,	Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, living quarters, etc.					
	As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses					
	and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows,or increase or decrease to the square footage after submitting this initial drawing.					

applicants initials

AMENDMENT

SECTION 13 - continued

7. Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year?					
8. Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? 🔲 YES 🖄 NO					
9. Is the premises currently licensed with a liquor license? YES INO If yes, give license number and licensee's name:					
License #12100137 please see attched (exactly as it appears on license) Name Aguilera, Thomas					
SECTION 14 Restaurant or hotel/motel license applicants:					
1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? 🔀 YES 🔲 NO If yes, give the name of licensee, Agent or a company name:					
Aguilera Thomasand license #: 12100137					
Last First Middle					
 If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application. 					

- 3. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.
- 14 JAN 30 Liv. Jept 4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue Ŧ from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed U) premises. By applying for this 🗌 hotel/motel 🔀 restaurant license, I certify that I understand that I must maintain a S minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application.

applicant's signature

As stated in A.R.S § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is necessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliguor.gov and click on the "Information" tab.

applicants initials

SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)

1. Check ALL boxes that apply to your business:

X	Entrances/Exits	X	Liquor storage areas

□ Service windows Drive-in windows

Patio: 🔀 Contiguous Non Contiguous

- 2. Is your licensed premises currently closed due to construction, renovation, or redesign? X YES
- February 26, 2014 If yes, what is your estimated opening date? month/day/year
- 3. Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.
- 4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).
- 5. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, living quarters, etc.

As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows or increase or decrease to the square footage after submitting this initial drawing.

applicants initials

SECTION 15 Diagram of Premises

4. In this diagram please show only the area where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, bar stools, hi-top tables, dining tables, dining chairs, the kitchen, dance floor, stage, and game room. Do not include parking lots, living quarters, etc. When completing diagram, North is up 1.

If a legible copy of a rendering or drawing of your diagram of premises is attached to this application, please write the words "diagram attached" in box provided below.

PLEASE SEE DIAGRAM ATTACHED DIAGRAM A ENTIRE RESTAURANT WITH THÈ LIQUOR STURAGE AREA'S KRUCK SOLA/ CONSUMED AREAS igr. nept. pp. 9.43 ENTRANCE EXIT W/ACI ARS DIAGRAM CHAIR DRAWING OF B' ATTACHED SEE

SECTION 16 Signature Block

anie bcord with , hereby declare that I am the OWNER/AGENT filing this (print full name of applicant)

application as stated in Section 4, Question 1. I have read this application and verify all statements to be true, correct and complete.

Official Seal NOTARY PUBLIC OF ARIZONA INDA D. PARI Commission Expires Novem My commission expires on :

ina HROZAND State of County of

The foregoing instrument was acknowledged before me this

