

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 Management of Information & Records Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

June 29, 2018

Andrea Dahlman Lewkowitz Coco's No. 176 2600 N. Central Avenue, Suite 1775 Phoenix, AZ 85004

RE: Application for Agent Change/Acquisition of Control/Restructure Arizona Liquor License No.: 07100224 Coco's No. 176

Dear Ms. Lewkowitz:

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 7, 2018, 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,

Julie Castañeda Clerk of the Board



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

)

JUN 291 RANDOV R. O. K. R.

TO: Pima County Sheriff's Department Investigative Support Unit

FROM: Bernadette Russell *BL* Administrative Support Specialist Senior

DATE: June 7, 2018

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

Attached is the application of:

Andrea Dahlman Lewkowitz d.b.a. Coco's No. 176 7250 N. Oracle Road Tucson, AZ 85704

Arizona Liquor License No. 07100224

SHERIFF'S REPORT

DATE: 06/28/18

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

OTHING NOTEN

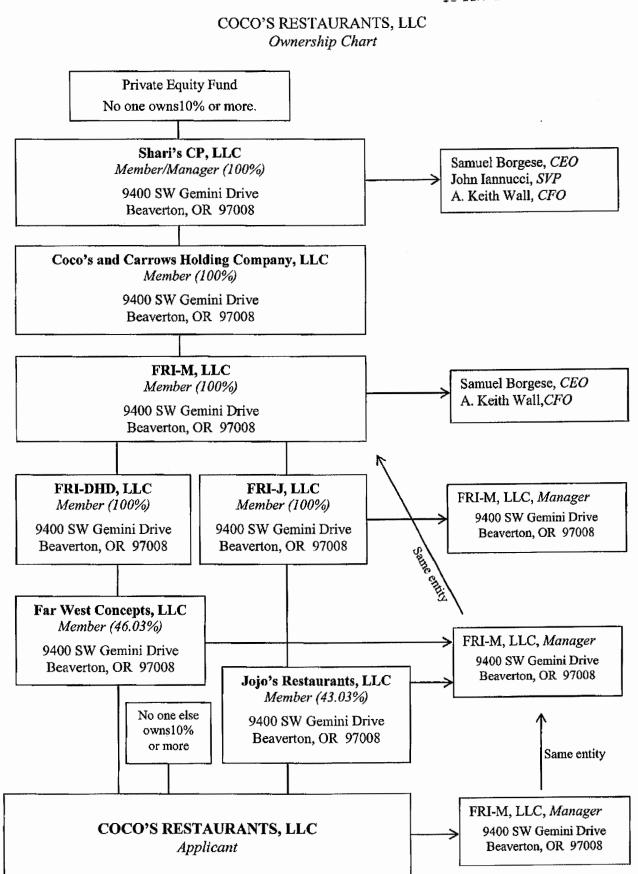
Investigative Support Unit Supervisor

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

				DMENT	DLLC USE ONL	Y
		Donartmont	State of Arizon		Date Processed:	
		-	N. Washington (ses and Control 5th Floor	CSR:	
	CONTRACTOR		Phoenix, AZ 850	07	60 th Day:	
	ARIZONA		(602) 542-514	1	·	
				TION OF CONTROL		sta aa for each
dditional appli	cation, not to excee	d \$1,000.00. (A.R.S be submitted v	, 4-209.H) NOTE 2) with this applicatio	the \$100.00 fee for re n. (A.R.S. 4-209.A)	first application and estructure/acquisition	of control MUST
heck the ppropriate oxes	X Agent Complete Section			ion of Control ctions 1,2, 3 & 7	Restruc Complete Section	
CTION 2	(COMPLETE THIS	SECTION FOR AGE	I NT CHANGE ACQ	JISITION OF CONTRO	L OR RESTRUCTURE)	
	•		ANDREA	DAHLMAN	07100224	u
(E)			First	Middle	Liquor Lic	
	ame: COCO'S REST	(Exactly as it appe	ars on Liquor License)	Corp File	#:(# applic	able)
3. Business N	lame: <u>COCO'S #176</u>	(Exactly as it appe	ars on Liquor License)	Ema	ii:	
	1	ON. ORACLE		TUCSON	PIMA	85704
4. Business Lo	ocation Address; <u>***</u>		C Constant and a state	City	COUNTY	Zip
5. is the Busin 6. Does the Bu	ness located within the usiness location addres	e incorporated limit: ss have a street add	s of the above City Iress for a City or Tow	or Town? Yes X No	boundaries of another (ed in: <u>PIMA COUNTY</u>	
 5. Is the Busin 6. Does the Busin 6. Does the Busin 6. Does the Busin 6. Does the Busin 7. Mailing Activity 	ness located within the usiness location addre vation? X res No t ddress:	ss have a street add Yes, what City, Tow	s of the above City Iress for a City or Tow In or Tribal Reservatio	or Town? YesXNo m but is actually in the on is this Business locate Ctty	boundaries of another (ed in: <u>PIMA COUNTY</u> Stole	Tip
 5. Is the Busin 6. Does the Busin 6. Does the Busin 6. Does the Busin 7. Mailing Act 8. Business Ph 9. Does this t 	ness located within the usiness location addre vation? X res No t ddress: none: ransaction involve the	to nor use r. e incorporated limit: ss have a street add f Yes, what City, Tow e sale of any portion	s of the above City Iress for a City or Tow In or Tribal Reservation	or Town? YesXNo m but is actually in the on is this Business locate City tact Phone	boundaries of another (ed in: <u>PIMA COUNTY</u>	
 5. Is the Busin 6. Dres the Busin 6. Dres the Busin 7. Mailing Act 8. Business Ph 9. Does this to compare the submit o compare the submit ocompare t	ness located within the usiness location addre vation? XYes No t ddress: none: ransaction involve the certified copy of minut	e sale of any portion controlling Persons?	s of the above City Iress for a City or Tow In or Tribal Reservation Daytime Com Daytime Com	or Town? YesXNo n but is actually in the on is this Business locate City tact Phone e of ownership or corp	boundaries of another (ed in: <u>PIMA COUNTY</u> stole	Zip
 5. Is the Busin 6. Dress the Busin 6. Dress the Busin 7. Mailing Act 8. Business Ph 9. Does this t submit a c 10. Has there organization 	ness located within the usiness location addre vation? X res No t dress: none: ransaction involve the cerlified copy of minut been any change of on and/or amended	e sale of any portion controlling Persons operating agreeme	s of the above City Iress for a City or Tow In or Tribal Reservation Daytime Com Daytime Com of the percentage Presson of the percentage Change Acou	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone of ownership or corp submit a copy of the	boundaries of another (ed in:	Tip
 5. Is the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 11. List all Co 	tess located within the usiness location addre vation? X res No t dress: none: ransaction involve the erlified copy of minut been any change of on and/or amended (COMPLETE THIS s son listed in section III n the Department of Lique ontrolling Persons to b	e sale of any portion controlling Persons controlling Persons cont	s of the above City tress for a City or Tow on or Tribal Reservation Daytime Com Daytime Com of the percentage Present showing change NT CHANGE, ACQU onnaire (form LIC0101 son already disclosed t and new.	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp s submit a copy of the HISITION OF CONTROL and a Department of to the Department is n	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. Is the Busin 6. Dies the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this the submit a constraint of the submit a constraint of the submit and the	tess located within the usiness location addre vation? X res No t ddress: none: ransaction involve the certified copy of minut been any change of on and/or amended (COMPLETE THIS S son listed in section III n the Department of Ligue	e sale of any portion estate of any portion	s of the above City tress for a City or Tow on or Tribal Reservation Daytime Com Daytime Com of the percentage VI CHANGE, ACQU onnaire (form LIC0101 son already disclosed t and new.	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone of ownership or corp submit a copy of the	boundaries of another (ed in:	Tip
 5. Is the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 11. List all Co 	tess located within the usiness location addre vation? X res No t dress: none: ransaction involve the erlified copy of minut been any change of on and/or amended (COMPLETE THIS s son listed in section III n the Department of Lique ontrolling Persons to b	e sale of any portion controlling Persons controlling Persons cont	s of the above City tress for a City or Tow on or Tribal Reservation Daytime Com Daytime Com of the percentage Present showing change NT CHANGE, ACQU onnaire (form LIC0101 son already disclosed t and new.	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp s submit a copy of the HISITION OF CONTROL and a Department of to the Department is n	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. Is the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 11. List all Co 	tess located within the usiness location addre vation? X res No t dress: none: ransaction involve the erlified copy of minut been any change of on and/or amended (COMPLETE THIS s son listed in section III n the Department of Lique ontrolling Persons to b	e sale of any portion controlling Persons controlling Persons cont	s of the above City tress for a City or Tow on or Tribal Reservation Daytime Com Daytime Com of the percentage Present showing change NT CHANGE, ACQU onnaire (form LIC0101 son already disclosed t and new.	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp s submit a copy of the HISITION OF CONTROL and a Department of to the Department is n	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. Is the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 11. List all Co 	tess located within the usiness location addre vation? X res No t dress: none: ransaction involve the erlified copy of minut been any change of on and/or amended (COMPLETE THIS s son listed in section III n the Department of Lique ontrolling Persons to b	e sale of any portion controlling Persons controlling Persons cont	s of the above City Iress for a City or Tow Iress for a City or Tow Iress for a City or Tow In or Tribal Reservation Daytime Com Daytime Com I of the percentage Pres No if yes Pres	or Town? YesXNo n but is actually in the on is this Business locate City tact Phone e of ownership or corp submit a copy of the submit a copy of the comment of the Department of the Address	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this to a construct of the submit a construction 10. Has there organization 10. Has there organization 10. Has there organization 11. List all Construct of the submit of the	tess located within the usiness location address vation? X res No is different of the section involve the serified copy of minute been any change of on and/or amended (COMPLETE THIS State of the Department of Lique ontrolling Persons to b	E sale of any portion e sale of any portion e sale of any portion es. Controlling Persons operating agreeme SECTION FOR AGEN nust submit a question or. A Controlling Pers e disclosed, current Middl	s of the above City ress for a City or Tow rn or Tribal Reservation Daytime Com Daytime Com n of the percentage Pres No if yes Pres No if yes No if yes No if yes No if yes No if yes No if yes A CQU mainer (form LIC0101 son already disclosed t and new. Title CH ADDITIONAL SHEET (S)	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the HISITION OF CONTROL and a Department of to the Department is in Address	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this to a construct of the submit a construction 10. Has there organization 10. Has there organization 10. Has there organization 11. List all Construct of the submit of the	tess located within the usiness location addre vation? X res No t dress: none: ransaction involve the erlified copy of minut been any change of on and/or amended (COMPLETE THIS s son listed in section III n the Department of Lique ontrolling Persons to b	E sale of any portion e sale of any portion e sale of any portion es. Controlling Persons operating agreeme SECTION FOR AGEN nust submit a question or. A Controlling Pers e disclosed, current Middl	s of the above City Iress for a City or Tow Iress for a City or Tow Iress for a City or Tow Daytime Com Daytime Com Daytime Com of the percentage Pres No if yes Pres	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the HISITION OF CONTROL and a Department of to the Department is in Address	boundaries of another (ed in:	Zip Zip No If yes, icles of which may be uestionnaire.
 5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 10. Has there organization 11. List all Constrained at taut 12. List stock 	hess located within the usiness location addre vation? X res No I dress: none: ransaction involve the certified copy of minut been any change of on and/or amended (COMPLETE THIS S son listed in section III r he Department of Lique ontrolling Persons to b First	E sale of any portion e sale of any portion e sale of any portion tes. Controlling Persons operating agreeme SECTION FOR AGEN nust submit a question or. A Controlling Pers e disclosed, current Middle (ATTAC owners and/or Con	s of the above City Iress for a City or Tow rn or Tribal Reservation Daytime Com Daytime Com n of the percentage Pres No if yes and showing change NT CHANGE, ACQU bonaire (form LIC0101 son already disclosed t and new. tent the percentage transformation of the percentage to a showing change to a showing chang	or Town? Yes X No on but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the submit a copy of the d to the Department of to the Department is in Address	boundaries of another (ed in:	Zip No If yes, icles of which may be juestionnaire. Zip
 5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 10. Has there organization 11. List all Constrained at taut 12. List stock 	hess located within the usiness location addre vation? X res No I dress: none: ransaction involve the certified copy of minut been any change of on and/or amended (COMPLETE THIS S son listed in section III r he Department of Lique ontrolling Persons to b First	E sale of any portion e sale of any portion e sale of any portion tes. Controlling Persons operating agreeme SECTION FOR AGEN nust submit a question or. A Controlling Pers e disclosed, current Middle (ATTAC owners and/or Con	s of the above City Iress for a City or Tow rn or Tribal Reservation Daytime Com Daytime Com n of the percentage Pres No if yes and showing change NT CHANGE, ACQU bonaire (form LIC0101 son already disclosed t and new. tent the percentage transformation of the percentage to a showing change to a showing chang	or Town? Yes X No on but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the submit a copy of the d to the Department of to the Department is in Address	boundaries of another (ed in:	Zip No If yes, icles of which may be juestionnaire. Zip
 5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business Ph 9. Does this taubmit a co 10. Has there organization 10. Has there organization 10. Has there organization 11. List all Constrained at taut 12. List stock 	hess located within the usiness location addre vation? X res No I dress: none: ransaction involve the certified copy of minut been any change of on and/or amended (COMPLETE THIS S son listed in section III r he Department of Lique ontrolling Persons to b First	E sale of any portion e sale of any portion e sale of any portion tes. Controlling Persons operating agreeme SECTION FOR AGEN nust submit a question or. A Controlling Pers e disclosed, current Middle (ATTAC owners and/or Con	s of the above City Iress for a City or Tow rn or Tribal Reservation Daytime Com Daytime Com n of the percentage Pres No if yes and showing change NT CHANGE, ACQU bonaire (form LIC0101 son already disclosed t and new. tent the percentage transformation of the percentage to a showing change to a showing chang	or Town? Yes X No on but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the submit a copy of the d to the Department of to the Department is in Address	boundaries of another (ed in:	Zip No If yes, icles of which may be juestionnaire. Zip
5. s the Busin 6. Dies the Busin 6. Dies the Busin 7. Mailing Act 8. Business PH 9. Does this t submit a c 10. Has there organizatio CTION 3 Each new pers obtained at t 1. List all CA New Last 2. List stock New Last	hess located within the usiness location addre vation? X res No to ddress:	(ATTAC	s of the above City Iress for a City or Tow Iress for a City or Tow Iress for a City or Tow Iress for a City or Tow Daytime Con Daytime Con a Daytime Con In of the percentage Part showing change Irest showing c	or Town? Yes X No n but is actually in the on is this Business locate City tact Phone e of ownership or corp , submit a copy of the blue of the Department of the compared of the Department of the Address NF NECESSARY) vning 10% or more Address	boundaries of another (ed in:	Zip No If yes, icles of which may be uestionnaire. Zip Tip

	800 V		A A Control Floor 7 ON OF CONTROL	- RESTRUCTURE	251 8 10 10 10 10 10 10 10 10 10 10
SECTION 1 Check the appropriate	In agein change Most be sobmitted with a submitted with a su	. 4-209.H) NOTE 2) th vith this application. XAcquisitio Complete Sect	(A.R.S. 4-209.A) n of Control	estructure/acquisition Restruc Complete Section	ture
boxes					
SECTION 2	(COMPLETE THIS SECTION FOR AGE				
1. Name:	LEWKOWITZ	ANDREA		07100224 Liquor Li	
•	,	First		•	ی در اندان ا
2. Owner Na	me: COCO'S RESTAURANTS, LLC	ars on Uquor License)	Corp File	#: <u>R-2274303-1</u>	able)
3 Rusiness M	ame: <u>COCO'S #176</u>	and on aquot licensey	Fmg	il: ANDREA@LEWKL	
	(Exactly as it appe	ors on Liquor License)			•
4. Business Lo	cation Address: 7250 N. ORACLE		. TUCSON	PIMA COUNTY	85704- ¹¹
	(Do not use P.	O. Box Number)	CHy		jų. į
5. Is the Busin	ess located within the incorporated limit	s of the above City o	r Town? X Yes No		1
6. Does the Bu	usiness location address have a street add	ress for a City or Town	but is actually in the	boundaries of another (City, Town or
	vation? Yes X No If Yes, what City, Tow				<u> </u>
			PHOENIX	AZ	85004
7. Mailing Ad	dress: 2600 N. CENTRAL AVENUE, SU		City	State'	Zip
8. Business Ph	ione: (520) 742-2840	Daytime Conto	act Phone (602) 20	00-7222	
9. Does this ti submit a c	ransaction involve the sale of any portion ertified copy of minutes.	n of the percentage (of ownership or corp	oorate stock?XYes	No If yes,
10. Has there been any change of Controlling Persons? YesXNo if yes, submit a copy of the minutes, amended articles of organization and/or amended operating agreement showing change					
_					· · · · · · · · · · · · · · · · · · ·
SECTION 3 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE) Each new person listed in section III must submit a questionnaire (form LIC0101) and a Department approved fingerprint card which may be obtained at the Department of Liquor. A Controlling Person already disclosed to the Department is not required to submit a questionnaire.					
). Listall Co New Last	ontrolling Persons to be disclosed, current First Middl		Address	City State	Zip
	TACHED				
				a second and a second	
(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)					
New Last	holders, percentage owners and/or Con First Middl		ning 10% or more Address	City State	Zip
SEE AT	TACHED				

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY) If the ownership is owned by another entity, <u>ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND</u> 10% OR MORE OWNERS FOR THE ENTITIES. Attach additional sheets as necessary in order to disclose all persons.



If you answered YES, you must p Liquor Law training provider <u>BEF</u> answered NO, go to question 2. 2. Is there a current Manager a Certificate? XYes No If yes, Name of current Manage Basic Training X If "NO" for 1 and 2. a Manager y	t this license premises disclosed to the PITTS	nsed premise? Yes XNo nagement Training Certificate of ACQUISITION OF CONTROL OR RE Department with the current Ba KENDRA First Management Training X Yes at Training Certificate obtained fr	AMALIE Middle es No om a Department approved Liquor
 License # 07100224 Current Agent Name:	(COMPLETE THIS SECTION FOR the INDIVIDUAL OR EXISTING AGENT LEMRICK ears on license) Last ER KEITH WALL , he wagent in the event that I am unable start live (5) years. disting Agent)	EARL First reby consent to the appointmer e to discharge the duties of Age State of WWWW	BASIL Middle Int of Agent for this license. I agree ant for this license. I have not been County of Way Markon ument was acknowledged before me glis
My commission expires on:	inell, 2021	ofV	Alexandress and a second secon
SECTION 6 Is there more their one licensed (If YES, <u>SEPARATE APPLICATIONS or</u> Type of current ownership: J.T.W.R.O.S. INDIVIDUAL PARTNERSHIP CORPORATION LIMITED LIABILITY CO. MANAGEMENT CO. TRIBE TRUST OTHER (Explain)	nust be filed and fees paid for each lic	ense/location. of new ownership:	OFFICIAL STAMP JODENNE KAY SCOTT NOTARY PUBLIC-OREGON COMMISSION NO. 963410 IY COMMISSION EXPIRES JUNE 11, 2001

SECTION 7 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE) To be completed by Controlling Person or existing Agent (if no agent changes) <u>OR NEW</u> Agent if applying for Agent change as listed in Section 2 Question 1.

I, (Print full name) <u>ANDREA DAHLMAN LEWKOWITZ</u> , here the application and the contents and all statements are true, co	by declare that I am the APPLICANT filing this applic rrect and complete.	ation. I have read
X(Controlling Person/Existing Agent)	- -	COPA before me this
My commission expires on:	<u></u> of <u>MAY</u> Day of <u>Manih</u>	2018 Year
Amy L. Setvoft Notary Public - Artaona Martaopa County My Commission Expires February 12, 2021	amu Hanuat Signature of NOTAN (USUC	·
	Page 2 of 3	

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



*18 JUN 5 Ligr. Lic. AM10/32 2600 North Central Avenue Suite 1775 Phoenix, Arizona 85004 **(** 602.200.7222

■ 602.200.7234 www.lewkowitzlaw.com

Andrea D. Lewkowitz H.J. Lewkowitz

May 14, 2018

Jennifer Benson, Licensing Manager Department of Liquor Licensing & Control 800 West Washington Street, 5th Floor Phoenix, Arizona 85007

Re: Alien Status Form and Passport

Dear Ms. Benson:

My completed Alien Status form and a copy of my passport are on file at the Arizona Department of Liquor Licenses and Control.

If you require more information from me, please call. Thank you!

Sincerely,

Intrem Andrea D. Lewkowitz

ADL/als