

OHIO DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD, P.O. BOX 4005

REYNOLDSBURG, OHIO 43068-9005 (614)644-2360 FAX(614)644-3166

TO

7641682	STCK	SJG INC DBA ALEXANDRIA MARKET				
		7602 MADISON AV WEST SIDE 1ST FL CLEVELAND OHIO 44102				
08 11 2022						
C2 C2X PERMIT CLASSES						
	093 IPT NO.					
		FROM 09/22/2023				
PERMIT NUMBER	TYPE					
ISSUE DATE						
FILING DATE						
PERMIT CLASSES						
TAX DISTRICT RECE	IPT NO.					



MAILED 09/22/2023

RESPONSES MUST BE POSTMARKED NO LATER THAN.

10/23/2023

IMPORTANT NOTICE

PLEASE COMPLETE AND RETURN THIS FORM TO THE DIVISION OF LIQUOR CONTROL

WHETHER OR NOT THERE IS A REQUEST FOR A HEARING.

REFER TO THIS NUMBER IN ALL INQUIRIES

(TRANSACTION & NUMBER)

(MUST MARK ONE OF THE FOLLOWING)

(IVIUST WARK ONE OF THE	FOLLOWING)
WE REQUEST A HEARING ON THE ADVISABILITY OF IS: THE HEARING BE HELD IN OUR COUNTY SE	
WE DO NOT REQUEST A HEARING. DID YOU MARK A BOX? IF NOT, THIS WILL BE CO	NSIDERED A LATE RESPONSE.
PLEASE SIGN BELOW AND MARK THE APPROPRIATE B	OX INDICATING YOUR TITLE:
(Signature) (Title)- Clerk of Co	ounty Commissioner (Date)
Clerk of Cit	ty Council

Township Fiscal Officer

CLERK OF CLEVELAND CITY COUNCIL ATTENTION CLERK 601 LAKESIDE AV RM 216 CLEVELAND OHIO 44114 For Questions call (614) 644-3162 Office Hours -8:00 a.m. - 5:00 p.m. Ohio Department of Commerce - Division of Liquor Control 6606 Tussing Road, Reynoldsburg, Ohio 43068-9005

www.com.ohio.gov/liqr APPLICATION FOR CHANGE OF CORPORATE STOCK OWNERSHIP PROCESSING FEE \$100.00 CAUTION: ALLOW 10 TO 12 WEEKS FOR PROCESSING



PERMIT HOLDER REQUESTS APPROVAL OF THE DIVIS	SION OF LIQUOR CON	TROLOF THE FOLLOWING TR	ANSEER	S) OF STOCK	
Permit Holder Name	SIGN OF ERQUOR COL	Liquor Permit Number(s)	OANSI EK(s) of Grock	
SJG INC	(3,2,C2X #7641682	F3	0093	
Permit Premises Address 7602 MADISON AVE,	CLEVELAND (DH 44102	무금	E202	
Email Address: E W I D A E N T E R P R I S E	E S @ G M A I	L.COM	אם אום	2 2	
Attorney's Name, Address and Telephone Number (If represent	ted)		QUOR	0	
Is Stock Traded on a National Exchange? YES NO	If YES, give Nan	If YES, give Name of Exchange and Symbol			
Please be advised that any social security numbers provide Department of Public Safety, the Ohio Department of Taxa agency if the agency requests the social security number to	ation, the Ohio Attor	ney General, or to any other s	tate or lo	al law enforcement	
SECTION A: PREVIOUS 5% OR MORE STOCKHOLDERS			7-	Number of Shares	
Name	BIRTHDATE	Social Security Number/FTI#	IS	sued For Stock Transfer Only (NOT Percentages)	
1) SAMIR S EWIDA			o Mowaylay L	50	
2) SAMY EWIDA				50	
3)					
4)	•				
5)		, ,		3° 8	
SECTION B: REVISED 5% OR MORE STOCKHOLDERS		1 2 4 1		Number of Shares d For Stock Transfer Only	
Name		<u> </u>		(NOT Percentages)	
1) SAMIR S EWIDA			.6. "	100	
2)					
3)					
4)	1 22		1		
5)					
NOTE: If any Stockholder is a business entity, that en	tity must list it's fa	deral TOTAL NUM	PER OF		
tax identification number (FTI #) above.		SHARES ISSU		100	
LIST THE TOP FOUR OFFICERS OF THE CAPTIONED CORPORATION. IF AN OFFICE IS NOT HELD, PLEASE INDICATE BY WRITING "NONE"	Socia	l Security Number	TO SECURE THE PROPERTY OF THE PARTY OF THE P	Birthdate	
1) CEO/President SAMIR S EWIDA		y	à	1 8	
2) Vice-President NONE	,	1			
3) Secretary SAMIR S EWIDA					
4) Treasurer SAMIR S EWIDA					
DLC4158 EOE/ADA SERVICE PROVIDER	\				



Department of Commerce

6606 Tussing Road, P.O. Box 4005 Reynoldsburg, Ohio 43068-9005 Division of Liquor Control



US POSTAGE MPHNEY BOWES

7641682 CLERK OF CLEVELAND CITY COUNCIL 601 LAKESIDE AV RM 216

CLEVELAND, OH 44114