

FILE NO. 785-2023

NOTICE TO LEGISLATIVE AUTHORITY

OHIO DIVISION OF LIQUOR CONTROL  
6606 TUSSING ROAD, P.O. BOX 4005  
REYNOLDSBURG, OHIO 43068-9005  
(614)644-2360 FAX(614)644-3166

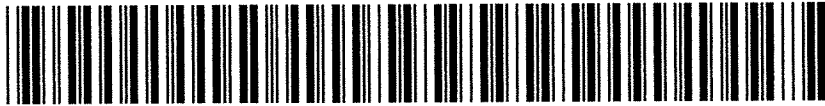
*WARD Mr SLIFE*

TO

4226365 <small>PERMIT NUMBER</small>		STCK <small>TYPE</small>	JAI SIYA RAM INC DBA EZ MART FOOD STORE 4163-65 ROCKY RIVER DR CLEVELAND OH 44135	
ISSUE DATE				
10	05	2022		
FILING DATE				
C1 C2 D6 <small>PERMIT CLASSES</small>				
18	154	C	F29647	
<small>TAX DISTRICT</small>			<small>RECEIPT NO.</small>	

FROM 06/05/2023

<small>PERMIT NUMBER</small>		<small>TYPE</small>			
ISSUE DATE					
FILING DATE					
PERMIT CLASSES					
<small>TAX DISTRICT</small>			<small>RECEIPT NO.</small>		



MAILED 06/05/2023

RESPONSES MUST BE POSTMARKED NO LATER THAN.

~~07/06/2023~~

*6/16/2023*

*7/17/2023*

*(R)*

**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

**C STCK 4226365**

(TRANSACTION & NUMBER)

(MUST MARK ONE OF THE FOLLOWING)

WE REQUEST A HEARING ON THE ADVISABILITY OF ISSUING THE PERMIT AND REQUEST THAT  
THE HEARING BE HELD  IN OUR COUNTY SEAT.  IN COLUMBUS.

WE DO NOT REQUEST A HEARING.

DID YOU MARK A BOX? IF NOT, THIS WILL BE CONSIDERED A LATE RESPONSE.

PLEASE SIGN BELOW AND MARK THE APPROPRIATE BOX INDICATING YOUR TITLE:

(Signature)

(Title)-  Clerk of County Commissioner

(Date)

Clerk of City 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  
<http://www.com.ohio.gov/liqr>

*CR# 1206*  
*Amf \$100*  
*Only 1 check*



**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 DIVISION OF LIQUOR CONTROL OF THE FOLLOWING TRANSFER(S) OF STOCK

Permit Holder Name <b>JAI SIYA RAM INC</b>	Liquor Permit Number(s) <b>4226365</b> <i>F29647</i>
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Permit Premises Address **4163-65 ROCKY RIVER DR., CLEVELAND, OH 44135**

Email Address: **d r a b e r @ L R E L a w . c o m**

Attorney's Name, Address and Telephone Number (If represented)  
**Lumpe, Raber & Evans - 37 W. Broad St., Ste. 1140, Columbus, OH 43215**

Is Stock Traded on a National Exchange?  YES  NO If YES, give Name of Exchange and Symbol

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

**SECTION A: PREVIOUS 5% OR MORE STOCKHOLDERS**

Name	Social Security Number/FIT#	Number of Shares Issued For Stock Transfer Only (NOT Percentages)
1) SANDEEP ARORA	[REDACTED]	27.50
2) SWETABEN PATEL	[REDACTED]	30.00
3) RAJIV SALDHI	[REDACTED]	27.50
4) PURVESH PATEL	[REDACTED]	15.00
5)		

**SECTION B: REVISED 5% OR MORE STOCKHOLDERS**

Name	Social Security Number/FIT#	Number of Shares Issued For Stock Transfer Only (NOT Percentages)
1) SANDEEP ARORA	[REDACTED]	35.00
2) SWETABEN PATEL	[REDACTED]	30.00
3) RAJIV SALDHI	[REDACTED]	35.00
4)		
5)		

NOTE: If any Stockholder is a business entity, that entity must provide its tax identification number (FIT #) above.

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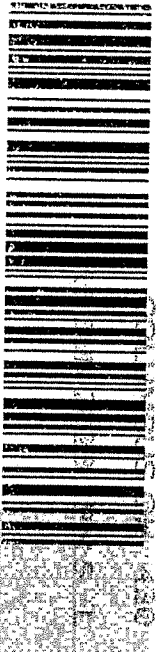
LIST THE TOP FOUR OFFICERS OF THE CAPTIONED CORPORATION. IF AN OFFICE IS NOT HELD, PLEASE INDICATE BY WRITING "NONE".	Social Security Number	Birthdate
1) CEO/President <b>RAJIV SALDHI</b>	[REDACTED]	[REDACTED]
2) Vice-President <b>NONE</b>	[REDACTED]	[REDACTED]
3) Secretary <b>SANDEEP ARORA</b>	[REDACTED]	[REDACTED]
4) Treasurer <b>NONE</b>	[REDACTED]	[REDACTED]



**Department  
of Commerce**

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

**CERTIFIED MAIL™**



9214 7969 0099 9790 1647 9357 55

POSTAGE & FEES PAID  
ZIP 43215-0087  
02 4M  
0000983899 JUN 15 2023

4226365  
CLERK OF CLEVELAND CITY COUNCIL  
ATTENTION CLERK  
601 LAKESIDE AV RM 216  
CLEVELAND, OH 44114

44114-107655

