

FILE NO. 100-2024

**NOTICE TO LEGISLATIVE
AUTHORITY**

Ward 5 - Starr
OHIO DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD, P.O. BOX 4005
REYNOLDSBURG, OHIO 43068-9005
(614)644-2360 FAX(614)644-3166

TO

6417545 PERMIT NUMBER		STCK TYPE	921 TAVERN LLC 921 HURON RD 1ST FLR BSMT/MEZZ & PATIO CLEVELAND OH 44115
ISSUE DATE			
09 14 2023			
FILING DATE			
D5J D6			
PERMIT CLASSES			
18 TAX DISTRICT	154	C	F30555 RECEIPT NO.

FROM **12/29/2023**

PERMIT NUMBER		TYPE
ISSUE DATE		
FILING DATE		
PERMIT CLASSES		
TAX DISTRICT		RECEIPT NO.



MAILED *01/05/2024*
12/29/2023 mg

RESPONSES MUST BE POSTMARKED NO LATER THAN.

02/05/2024
01/29/2024 mg

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 6417545**

(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

1 chW/#5224/\$100.00

Office Hours
8:00 a.m. - 5:00 p.m.
For Questions call
(614) 644-3156

Ohio Department of Commerce - Division of Liquor Control
6606 Tussing Road, Reynoldsburg, Ohio 43068-9005
<http://www.com.ohio.gov/liqr>



APPLICATION FOR CHANGE OF LLC MEMBERSHIP INTERESTS
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:

Permit Holder Name:
92I Tavern, LLC

Permit Premises Address:

Liquor Permit Number(s):
6417545

Federal Tax ID Number:

921 Huron Road
Cleveland, Ohio 44115

Email Address:

j n e a l @ w a i t e r h a v . c o m

Attorney's Name, Address and Telephone Number (If represented):

John N. Neal, Esq. | 1301 E. 9th St., Suite 3500, Cleveland, Ohio 44114

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.

PLEASE COMPLETE ALL AREAS OF SECTION A & B BELOW

Section A - **PREVIOUS** List of managing members and all persons with a 5% or greater membership or voting interest in the LLC

NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) Gregory Geis	[REDACTED]		<input checked="" type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest 100 % <input checked="" type="checkbox"/> Membership interest 100 %	[REDACTED]
2)			<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	
3)			<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	
4)			<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	

Section B - **REVISED** List of managing members and all persons with a 5% or greater membership or voting interest in the LLC

NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) Wild Eagle, LLC	[REDACTED]		<input type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest 100 % <input checked="" type="checkbox"/> Membership interest 100 %	
2) Gregory Geis	[REDACTED]	Manager	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest 0 % <input type="checkbox"/> Membership interest 0 %	[REDACTED]
3)			<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	
4)			<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	



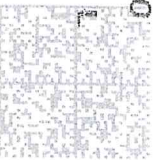
**Department
of Commerce**

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

POSTNET MAIL™



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6417545
CLERK OF CLEVELAND CITY COUNCIL
601 LAKESIDE AV RM 216
CLEVELAND, OH 44114

44114-107639

