

Mike DeWine, Governor Jim Tressel, Lt. Governor Sherry Maxfield, Director

## NOTICE TO LEGISLATIVE AUTHORITY

TO

10003952-1		TRFO	BLACK MAGICK LLC
PERMIT NUMBER		TYPE	BLACK MAGICK LLC
			3908 DENISON AVE
ISSUE DATE			_ 1ST FLOOR + BASEMENT
7/8/2025 FILING DATE			Cleveland CLEVELAND OH 44109
	RMIT CLASS	ES	
18154	ОСТ	5505157.110	
TAX DISTRICT		RECEIPT NO	
			FROM <b>7/9/2025</b>
08081492-1			SHERRY PERRY INC
PERMIT NUMBER		TYPE	3908 DENISON AVE
T LET (WITT TO (VIII D LET) X T T T T T LET		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1ST FL & BSMT
ISSUE DATE			Cleveland
			CLEVELAND OH 44109
FILING DATE			OLL TELETHOOTH 147700
PERMIT CLASSES		ES	
18154	OCT		
TAX DISTRICT		RECEIPT NO	
MAD 7/0/2021		DECD	ONSES MUST BE POSTMARKED NO LATER THAN 08/09/2025
MAILED 7/9/202	)	RESPC	UNSES MUST BE POSTMARKED NO LATER THAN 00/03/2023
			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: OCT TRFO 10003952-1 (TRANSACTION & NUMBER)			
			(TRANSACTION & NUMBER)
(MUST_MARK ONE OF THE FOLLOWING)			
		Villa III	
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 DEC	IFOT 4 ! !!	- A DINO	
WE DO NOT REQ			
DID YOU MARK A	BOX?	IF NO	T, THIS WILL BE CONSIDERED A LATE RESPONSE.
PLEASE SIGN BE	LOW AND	MARK THE APPE	ROPRIATE BOX INDICATING YOUR TITLE:
(Signature)			(Title) - ☐ Clerk of County Commissioner (Date)
(5/3//2/3/0)			,
			☐ Clerk of City Council
			☐ Township Fiscal Officer

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