

FILE NO. 285-2025

NOTICE TO LEGISLATIVE  
AUTHORITY

*Howse-Jones* *Ward 7*

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

TO

90530790003		TRFL		TRIPLE THREAT INC DBA CLUB ODYSSEY 1ST FL & BSMT 6400-02 ST CLAIR AVE CLEVELAND OH 44103
PERMIT NUMBER		TYPE		
10	01	2019		
ISSUE DATE				
03	09	2022		
FILING DATE				
D2 D2X D3 D3A				
PERMIT CLASSES				
18	154	C	F27205	
TAX DISTRICT		RECEIPT NO.		

FROM 02/10/2025 SAFEKEEPING

90530790002				TRIPLE THREAT INC DBA CLUB ODYSSEY 7513 ST CLAIR AV 1ST FL & BSMT CLEVELAND OH 44103
PERMIT NUMBER		TYPE		
10	01	2019		
ISSUE DATE				
03	09	2022		
FILING DATE				
D2 D2X D3 D3A				
PERMIT CLASSES				
18	154			
TAX DISTRICT		RECEIPT NO.		



MAILED 02/19/2025 *mg*

RESPONSES MUST BE POSTMARKED NO LATER THAN.

03/20/2025 *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 TRFL 9053079-0003

(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  
ATTN CLERK  
601 LAKESIDE AV RM 216  
CLEVELAND OHIO 44114