

FILE NO. 1488-18

NOTICE TO LEGISLATIVE  
AUTHORITY

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

2808241		STCK		TO	
PERMIT NUMBER		TYPE		FOODFY AND GORCIFY LLC	
ISSUE DATE				3608 WOODLAND	
09 14 2018				CLEVELAND OH 44115	
FILING DATE					
C1					
PERMIT CLASSES					
18	154	C	F21399	FROM 11/23/2018	
TAX DISTRICT			RECEIPT NO.		

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



MAILED 11/23/2018

RESPONSES MUST BE POSTMARKED NO LATER THAN. 12/24/2018

**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 2808241**

(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

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



ICK  
#1681  
\$100

PERMIT HOLDER REQUESTS APPROVAL OF THE DIVISION OF LIQUOR CONTROL OF THE FOLLOWING:

Permit Holder Name:

*Fooly and Corcity, LLC*

Permit Premises Address:

*3608 Woodland Ave.  
Cleveland, OH 44115  
FD21399*

Liquor Permit Number(s):

Federal Tax ID Number:

Email

Address:

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

*AR YEH I. DORT ESQ., P.O. Box 18075, Cleveland, OH 44115*

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) <i>GM FAHAD</i>		<i>Member</i>	<input checked="" type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest <u>40</u> % <input checked="" type="checkbox"/> Membership interest <u>40</u> %	
2) <i>Sheikh RAHAMAN</i>		<i>Member</i>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest <u>40</u> % <input checked="" type="checkbox"/> Membership interest <u>40</u> %	
3) <i>GM Riad</i>		<i>Member</i>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest <u>20</u> % <input checked="" type="checkbox"/> Membership interest <u>20</u> %	
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

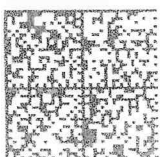
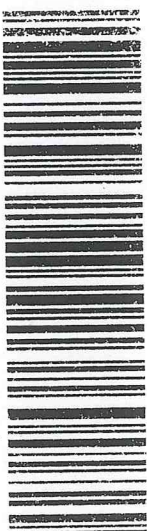
NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) <i>GM FAHAD</i>		<i>Managing Member</i>	<input checked="" type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest <u>60</u> % <input checked="" type="checkbox"/> Membership interest <u>60</u> %	
2) <i>GM Riad</i>		<i>Member</i>	<input type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest <u>40</u> % <input checked="" type="checkbox"/> Membership interest <u>40</u> %	
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

**CERTIFIED MAIL™**



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2808241  
CLERK OF CLEVELAND CITY COUNCIL  
601 LAKESIDE AV RM 216  
CLEVELAND, OH 44114