FILE NO. 38-2019

NOTICE TO LEGISLATIVE AUTHORITY

Word 12- Brancatelli

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

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4957324 STCK PERMIT NUMBER TYPE ISSUE DATE 09 17 2018 FILING DATE D2 D2X D3 D3A PERMIT CLASSES 18 154 C F21483 TAX DISTRICT RECEIPT NO.	LA VIDA INC DBA STEELYARD TAVERN 4497 BROADVIEW RD 1ST FL & BSMT CLEVELAND OHIO 44109
34	FROM 12/06/2018
PERMIT NUMBER TYPE ISSUE DATE FILING DATE PERMIT CLASSES	
TAX DISTRICT RECEIPT NO.	



MAILED 12/06/2018

RESPONSES MUST BE POSTMARKED NO LATER THAN.

01/07/2019

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

(TRANSACTION & NUMBER)

(<u>MUS</u>	ST MARK ONE OF THE FOLLOWING)	
WE REQUEST A HEARING ON THE THE HEARING BE HELD	ADVISABILITY OF ISSUING THE PEI	RMIT AND REQUEST THAT IN COLUMBUS.
WE DO NOT REQUEST A HEARING DID YOU MARK A BOX? IF NO	G OT, THIS WILL BE CONSIDERED A L.	ATE RESPONSE.
PLEASE SIGN BELOW AND MARK	THE APPROPRIATE BOX INDICATING	G 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 ce¹] (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

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 DI	VISION OF LIQUOR	CONTROL OF THE F	OI I OWING TO A	SELLO COM
and the state of t		Liquor Per	mit Number(s)	ISFER(S) OF STOCK
LA VIDA INC/DBA STEELYAR	D TAVERN	Liquoi i Gr		
Permit Premises Address			49573	29
Email (+	021487
Address:				
Attorney's Name, Address and Telephone Number (If represe	ented)			
Is Stock Traded on a National Exchange? YES X N	O If YES, give N	Name of Exchange a	nd Symbol	
Diagon he addied a				
Please be advised that any social security numbers provid Department of Public Safety, the Ohio Department of Tar	led to the Division o	f Liquor Control in	n this application	may be released to the Obio
agency if the agency requests the social security number t	o conduct an invest	forney General, or igation, implement	to any other state	or local law enforcement
SECTION A: PREVIOUS 5% OR MORE STOCKHOLDERS			and thiorecaseint	
Name	BIRTHDATE	Social Security Nu	mber/FTI#	Number of Shares Issued For Stock Transfer Only
1) MELISSA FUENTES				(NOT Percentages)
TERESITA MATEO				400
" SILUIA FUENTES	1	Annual Control of Cont		700
4)		W		
5)				2 -9
CTION B: REVISED 5% OR MORE STOCKHOLDERS				7 33
Name	BIRTHDATE	Social Security Number/FT1#		Number of Shares Issued For Stock Transfer Only (NOT Percentages)
1) MELISSA FUENTES			1000000	14-29
2) SILVIA FUENTES				400
3)	-			1 N ==
4)		-		S > P
5)				
TE YE C.				
TE: If any Stockholder is a business entity, that ent tax identification number (FTI #) above.	ity must list it's fo		OTAL NUMBER O	F
LIST THE TOP FOUR OFFICERS OF THE CAPTIONED				
CORPORATION. IF AN OFFICE IS NOT HELD, PLEASE INDICATE BY WRITING "NONE"	Socia	cial Security Number		Birthdate
1) CEO/President MELISSA FUENTES				
2) Vice-President SILVIA FUENTES				
3) Secretary				
4) Treasurer				

Department of Commerce

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



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4957324 CLERK OF CLEVELAND CITY COUNCIL 501 LAKESIDE AV RM 216 CLEVELAND, OH 44114

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