

**TOWN OF NEW CASTLE
Town Clerk**

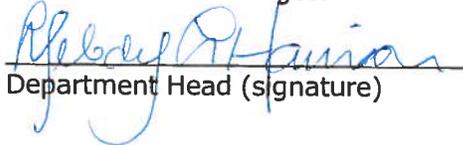
MEMO

To: Tom Baker
From: Melody Harrison, Town Clerk
Date: February 14, 2014
Re: Maud's On Main, LLC

Recommendation: Staff recommends that Council approve Resolution TC-2014-7, approving an application from Maud's On Main for a Beer and Wine Liquor License.

Policy Implications: Adopting this recommendation would be consistent with the requirements of the State Liquor Code.

Budget Implications: Adopting this recommendation would allow Maud's On Main, LLC to serve malt and vinous liquors for on-premises consumption and Town sales tax would be collected on sales of these beverages.


Department Head (signature)

Finance Director (signature)

Town Administrator (signature)

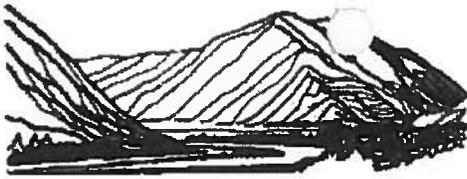
Background: Maud's On Main, LLC has applied for a beer and wine liquor license for 316 West Main Street.

The applicant requested that the State Liquor Enforcement Division review its application concurrently with the Town's review of the application. Concurrent review can reduce the amount of time between the date that the Town completes its review and the date that the State Liquor Enforcement Division completes its review.

Colorado Revised Statutes Section 12-47-307(3)(c) requires the applicant to submit to fingerprinting and requires that Council, as the local licensing authority, "use the information resulting from the fingerprints-based criminal history record check to investigate and to determine if an applicant is qualified for a license." The purpose of the check is to determine whether the applicant is one of the seven categories of persons who are prohibited from having a license (outlined in CRS Section 307(1)).

The applicant applied for the license in December 2013. All application fee have been paid, and all pertinent documentation submitted. The premises is currently under remodel construction. Staff will not issue the liquor licenses until such time that the applicant passes a final building inspection for occupancy by the Building Inspector and Fire Marshall, and the Colorado Liquor Enforcement Division approves the application.

See also attached reports from the Police Department.



The New Castle Police Department
450 West Main - Post Office Box 90
New Castle, Colorado 81647
(970) 984-2302

"Burning Mountain" - 1888

01/22/14

To: Town Clerk Melody Harrison
From: Chief Chris Sadler
NCPD 601
Re: New Liquor License – Maud's On Main

Dear Melody,

I have received a three page application for a retail liquor license submitted by Molly Mogavero and Jeff Ellis. I have also received the background check/criminal history material for Molly Mogavero and a review revealed no prior arrests.

I have attached the standard requirement list provided to all establishments involved with the sales of liquor within the Town. I would like to request Maud's On Main be held to this same standard as follows:

1. Management, and all employees tasked with dispensing alcohol are to be TIPS or otherwise trained/certified in the responsible service of alcohol. The initial certification is to be provided to the police department as well as the Town Clerk - prior to the service of alcohol. TIPS classes (or their equivalent) are to be repeated yearly with associated certification forwarded to the PD and Town Clerk- prior to the license renewal.
2. A notebook is to be kept behind the bar/service counter for the purpose of immediate employee documentation of any and all disturbances or incidents occurring on, or near the licensed premise. (names, description of subject, date, time, nature of incident, police called, etc.) This notebook is to be readily available to the police department upon request.
3. The applicant is responsible for the employment of security personnel to deter unruly criminal behavior in and around the premises. The number of personnel required should be determined by volume, at a rate of one per thirty patrons.
4. The applicant is responsible for the sidewalk in front of or adjacent to the establishment. All trash, cigarette butts or other waste should be cleaned from the sidewalk (and gutter) when necessary, and, at the end of each business day.
5. A telephone must be kept in working order at all times for employee use in case of emergency in an easily accessible location.
6. The occupancy load of the premise must be posted. The applicant will not allow the occupancy load to exceed the posted limit.
7. Doors should remain shut after sunset and at any time it is believed the noise level emanating from the interior of the establishment is, or is becoming, excessive. (such as live bands)

Respectfully submitted,

Chief Chris Sadler

6. Is the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation) or manager under the age of twenty-one years? Yes No

7. Has the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation) or manager ever (in Colorado or any other state);
 (a) been denied an alcohol beverage license?
 (b) had an alcohol beverage license suspended or revoked?
 (c) had interest in another entity that had an alcohol beverage license suspended or revoked?
 If you answered yes to 7a, b or c, explain in detail on a separate sheet.

8. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes," explain in detail.

9. Are the premises to be licensed within 500 feet of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?

10. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current or former financial interest in said business including any loans to or from a licensee.

11. Does the Applicant, as listed on line 2 of this application, have legal possession of the premises by virtue of ownership, lease or other arrangement?
 Ownership Lease Other (Explain in Detail) _____

a. If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:

Landlord <u>Molly Mogavero / Jeff Ellis</u>	Tenant <u>Maud's on Main, LLC</u>	Expires <u>Dec 1, 2018</u>
------------------------------------------------	--------------------------------------	-------------------------------

Attach a diagram and outline or designate the area to be licensed (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11". (Doesn't have to be to scale)

12. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies), will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business. Attach a separate sheet if necessary.

NAME	DATE OF BIRTH	FEIN OR SSN	INTEREST

Attach copies of all notes and security instruments, and any written agreement, or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.

13. **Optional Premises or Hotel and Restaurant Licenses with Optional Premises** Yes No
 Has a local ordinance or resolution authorizing optional premises been adopted?

Number of separate Optional Premises areas requested. _____ (See License Fee Chart)

14. **Liquor Licensed Drug Store applicants, answer the following:** Yes No
 (a) Does the applicant for a Liquor Licensed Drug Store have a license issued by the Colorado Board of Pharmacy? COPY MUST BE ATTACHED.

15. **Club Liquor License applicants answer the following and attach:** Yes No
 (a) Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?
 (b) Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain?
 (c) How long has the club been incorporated? _____ (d) Has applicant occupied an establishment for three years that was operated solely for the reasons stated above?
 (Three years required)

16. **Brew-Pub License or Vintner Restaurant Applicants answer the following:** Yes No
 (a) Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)

17a. **Name of Manager (for all on-premises applicants)** Molly Mogavero (If this is an application for a Hotel, Restaurant or Tavern License, the manager must also submit an Individual History Record (DR 8404-I). Date of Birth 09-25-1972

17b. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number. Yes No

18. **Tax Distraint Information.** Does the applicant or any other person listed on this application and including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue? If yes, provide an explanation and include copies of any payment agreements. Yes No

19. If applicant is a corporation, partnership, association or limited liability company, applicant must list ALL OFFICERS, DIRECTORS, GENERAL PARTNERS, AND MANAGING MEMBERS. In addition applicant must list any stockholders, partners, or members with OWNERSHIP OF 10% OR MORE IN THE APPLICANT. ALL PERSONS LISTED BELOW must also attach form DR 8404-I (Individual History record), and submit finger print cards to their local licensing authority.

NAME	HOME ADDRESS, CITY & STATE	DOB	POSITION	% OWNED*
Molly Mojaverro	316W. Main St - PO Box 453 New Castle, CO	09-25-72	Manager	100%

*If total ownership percentage disclosed here does not total 100% applicant must check this box

Applicant affirms that no individual other than these disclosed herein, owns 10% or more of the applicant

Additional Documents to be submitted by type of entity

- CORPORATION Cert. of Incorp. Cert. of Good Standing (if more than 2 yrs. old) Cert. of Auth. (if a foreign corp.)
 PARTNERSHIP Partnership Agreement (General or Limited) Husband and Wife partnership (no written agreement)
 LIMITED LIABILITY COMPANY Articles of Organization Cert. of Authority (if foreign company) Operating Agrmt.
 ASSOCIATION OR OTHER Attach copy of agreements creating association or relationship between the parties

Registered Agent (if applicable)

Address for Service

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer Code which affect my license.

Authorized Signature

Title

Date

Molly Mojaverro

Manager

Dec 16, 2013

REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY/COUNTY)

Date application filed with local authority

December 16, 2013

Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application 12-47-311 (1) C.R.S.)

January 21, 2014

THE LOCAL LICENSING AUTHORITY HEREBY AFFIRMS:

That each person required to file DR 8404-I (Individual History Record) has:

Yes No

- Been fingerprinted Yes No
 Been subject to background investigation, including NCIC/CCIC check for outstanding warrants Yes No

That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with, and aware of, liquor code provisions affecting their class of license Yes No

(Check One)

- Date of Inspection or Anticipated Date _____
 Upon approval of state licensing authority.

The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 12, Article 46 or 47, C.R.S. **THEREFORE, THIS APPLICATION IS APPROVED.**

Local Licensing Authority for

Telephone Number

- TOWN, CITY
 COUNTY

Signature

Title

Date

Signature (attest)

Title

Date

INDIVIDUAL HISTORY RECORD

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant or Tavern class of retail license.

NOTICE: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". Any deliberate misrepresentation or material omission may jeopardize the license application.

1. Name of Business
MAUD'S ON MAIN

2. Your Full Name (last, first, middle) 3. List any other names you have used.
Mogavero, Molly A.

4. Mailing address (if different from residence)
P.O. Box 453 New Castle, CO 81647

5. List current residence address. Include any previous addresses within the last five years (attach separate sheet if necessary).

STREET AND NUMBER	CITY, STATE, ZIP	FROM	TO
Current 316 W. Main St.	New Castle, CO 81647	03-2011	Present
Previous 36 Gambel Oak Way	Carbondale, CO 81623	06-2005	02-2011

6. List all employment within the last five years. Include any self employment. (Attach separate sheet if necessary)

NAME OF EMPLOYER OR BUSINESS	ADDRESS (STREET, NUMBER, CITY, STATE, ZIP)	POSITION HELD	FROM	TO
Molly Mogavero	417 W Main St. Carbondale, CO 81623	Massage Therapist	Dec 22, 2002	present

7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.

NAME OF RELATIVE	RELATIONSHIP TO YOU	POSITION HELD	NAME OF LICENSEE

8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? If yes, answer in detail.

Yes No

9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? If yes, explain in detail.

Yes No

10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.)

Yes No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (if yes, explain in detail.)

Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.)

Yes No

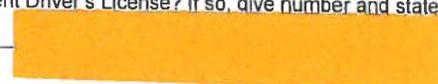
PERSONAL AND FINANCIAL INFORMATION

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13.  c. Place of Birth Gowanda, New York d. U.S. Citizen? Yes No

e. If Naturalized, State where _____ f. When _____ g. Name of District Court _____

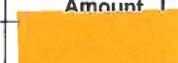
h. Naturalization Certificate Number _____ i. Date of Certification _____ j. If an Alien, Give Alien's Registration Card Number _____ k. Permanent Residence Card Number _____

 r. Do you have a current Driver's License? If so, give number and state. Yes No 

14. Financial Information.
 a. Total purchase price \$ N/A 2525.00 ^(raw) (if buying an existing business) or investment being made by the applying entity, corporation, partnership, limited liability company, other \$ N/A

b. List the total amount of your investment in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid \$ 50,000

c. Provide details of the Investment described in 14.b. You must account for all of the sources of this investment. Attach a separate sheet if needed.

Type: Cash, Services or Equipment	Source	Amount
Business Checking	ALPINE BANK, Colorado	
Business Credit Card	CAPITOL ONE	

d. Loan Information (attach copies of all notes or loans)

Name of Lender	Address	Term	Security	Amount
N/A				

Oath of Applicant

I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Authorized Signature Molly Magarero Title Manager Date December 16, 2013



Colorado Secretary of State
 Date and Time: 09/04/2013 10:51 AM
 ID Number: 20131514618
 Document number: 20131514618
 Amount Paid: \$50.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Organization

filed pursuant to § 7-80-203 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is
Maud's on Main

(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)

(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)

2. The principal office address of the limited liability company's initial principal office is

Street address

316 W. Main Street

(Street number and name)

New Castle CO 81647

(City)

(State)

(ZIP/Postal Code)

United States

(Province - if applicable)

(Country)

Mailing address

(leave blank if same as street address)

P.O. Box 453

(Street number and name or Post Office Box information)

New Castle CO 81647

(City)

(State)

(ZIP/Postal Code)

United States

(Province - if applicable)

(Country)

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name

(if an individual)

Mogavero

Molly

A

(Last)

(First)

(Middle)

(Suffix)

or

(if an entity)

(Caution: Do not provide both an individual and an entity name.)

Street address

316 W. Main Street

(Street number and name)

New Castle CO 81647

(City)

(State)

(ZIP Code)

Mailing address

(leave blank if same as street address)

P.O. Box 453

(Street number and name or Post Office Box information)

New Castle CO 81647
(City) (State) (ZIP Code)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name
(if an individual) Mogavero Molly A.
(Last) (First) (Middle) (Suffix)

or

(if an entity)
(Caution: Do not provide both an individual and an entity name.)

Mailing address P.O. Box 453
(Street number and name or Post Office Box information)

New Castle CO 81647
(City) (State) (ZIP/Postal Code)
United States
(Province - if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in

(Mark the applicable box.)

one or more managers.

or

the members.

6. (The following statement is adopted by marking the box.)

There is at least one member of the limited liability company.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are _____
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

9. The true name and mailing address of the individual causing the document to be delivered for filing are

<u>Mogavero</u>	<u>Molly</u>	<u>A</u>	
<i>(Last)</i>	<i>(First)</i>	<i>(Middle)</i>	<i>(Suffix)</i>
<u>P.O. Box 453</u>			
<i>(Street number and name or Post Office Box information)</i>			
<hr/>			
<u>New Castle</u>	<u>CO</u>	<u>81647</u>	
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>	
<u></u>	<u>United States</u>		
<i>(Province – if applicable)</i>	<i>(Country)</i>		

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).



Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

Colorado Secretary of State
 Date and Time: 01/29/2014 11:48 AM
 ID Number: 20131514618
 Document number: 20141068497
 Amount Paid: \$25.00

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Amendment

filed pursuant to §7-90-301, et seq. and §7-80-209 of the Colorado Revised Statutes (C.R.S.)

ID number: 20131514618

1. Entity name: Maud's on Main

(If changing the name of the limited liability company, indicate name before the name change)

2. New Entity name:
 (if applicable) Maud's on Main, LLC

3. Use of Restricted Words *(if any of these terms are contained in an entity name, true name of an entity, trade name or trademark stated in this document, mark the applicable box):*

- "bank" or "trust" or any derivative thereof
- "credit union" "savings and loan"
- "insurance", "casualty", "mutual", or "surety"

4. Other amendments, if any, are attached.

5. If the limited liability company's period of duration as amended is less than perpetual, state the date on which the period of duration expires:

_____ *(mm/dd/yyyy)*

or

If the limited liability company's period of duration as amended is perpetual, mark this box:

6. *(Optional)* Delayed effective date: _____ *(mm/dd/yyyy)*

Notice:

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

Mogavero Molly

(Last) *(First)* *(Middle)* *(Suffix)*

316 W. Main St.

PO Box 453 (Street name and number or Post Office Box information)

New Castle

CO 81647

(City)

(State)

(Postal/Zip Code)

United States

(Province – if applicable)

(Country – if not US)

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

Disclaimer:

This form, and any related instructions, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While this form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user's attorney.

STATE COUNTY RTA CITY
COLORADO NEW CASTLE

Must collect taxes for:
SALES TAX LICENSE

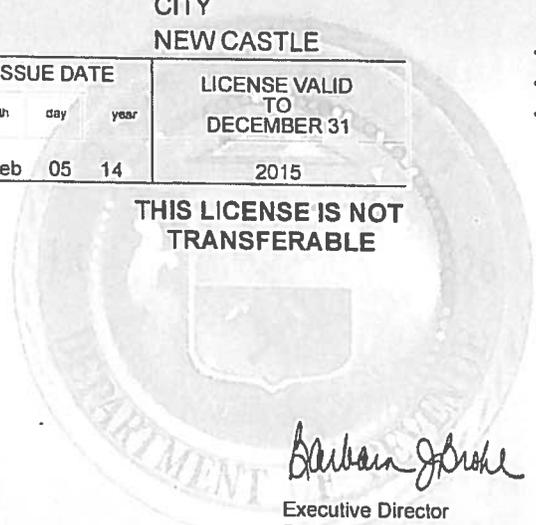
USE ACCOUNT NUMBER for all references	LIABILITY INFORMATION					ISSUE DATE			LICENSE VALID TO DECEMBER 31
	county	city	industry	type	liability date	month	day	year	
29881267-0000	24	0031	005	L	040114	Feb	05	14	2015

THIS LICENSE MUST BE POSTED AT THE FOLLOWING LOCATION
IN A CONSPICUOUS PLACE: MAUDS ON MAIN
316 W MAIN ST NEW CASTLE CO 81647

THIS LICENSE IS NOT TRANSFERABLE



MAUDS ON MAIN
316 W MAIN ST
NEW CASTLE CO 81647



Barbara J. Drake
Executive Director
Department of Revenue

▲ Detach Here ▲

Letter Id: L1312847680

Important Verification Process

If you are new to Colorado sales tax visit: www.Colorado.gov/revenue/salestaxbasics

VERIFY that all information on your sales tax license is correct. Modify and update any errors you identify on the Internet through Revenue Online. Access your tax account, file returns, submit payments, verify sales tax licenses and view sales tax rates through Revenue Online at www.Colorado.gov/RevenueOnline

All the information you need to register is on this document; have it with you before you begin. Follow these easy steps.

1. Go to www.Colorado.gov/RevenueOnline
2. Click on the Sign Up (Individual or Business) link on the right.
3. Click on Continue.

Now click on: Enter Taxpayer Information. Click on the down arrow in the Account Type list and select Other. Use the first 8-digits of the account number shown on your license. Complete the rest of the screen.

Next click on: Enter Login Information and complete the screen (this is information YOU get to create for the account).

Next click on: Enter Account Information and complete the screen.

Your Letter ID is: L1312847680

Then click the Submit button. You will see a confirmation page on your screen. You should receive a confirmation email from the Colorado Department of Revenue. If you do not, check your Junk email folder. Once you have your Authorization Code return to Revenue Online via the link in your email. Enter the Login ID and Password you created.

1. Click on the Login button.
2. Enter the Authorization Code from your email (first time only).
3. Click Login. You should then be in your account. NOTE: If you have additional tax types registered under the same Account Number, such as withholding, you will be able to view those tax types through the account. You do not need to create separate Login IDs and Passwords for each tax in your account.

Filing Returns

To file a return, go to Revenue Online (www.Colorado.gov/RevenueOnline). You must file a return for each reporting period. If you have no tax to report, file a "zero" return. Tax reporting and payment are your responsibility. To avoid late penalties and interest, file online on or before the due date. If you discontinue sales, you may close your business location through Revenue Online.

Learn more and avoid unnecessary errors by attending our free sales tax classes! Sign up at www.TaxSeminars.state.co.us

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Maud's on Main

is a **Limited Liability Company** formed or registered on 09/04/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131514618.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/05/2013 that have been posted, and by documents delivered to this office electronically through 09/06/2013 @ 14:27:03.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 09/06/2013 @ 14:27:03 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8635156.



Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/bi/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Maud's on Main, LLC

is a **Limited Liability Company** formed or registered on 09/04/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131514618.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/07/2014 that have been posted, and by documents delivered to this office electronically through 02/10/2014 @ 13:41:01.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 02/10/2014 @ 13:41:01 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8760165.



A handwritten signature in blue ink, appearing to read "Scott Gessler", is written over a horizontal line.

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."

COMMERCIAL LEASE AGREEMENT

THIS COMMERCIAL LEASE AGREEMENT (hereinafter the "Agreement")
Is entered into, this December 1st 2013, by and between:

Jeff Ellis and Molly Mogavero
316 W. Main Street / PO Box 453
New Castle, CO 81647
(970) 274-2205 / (970) 379-0093

Herein after referred to as the "Landlord"

AND

Maud's
Maud's on Main, LLC
316 W. Main Street / PO Box 453
New Castle, CO 81647

Herein after referred to as the "Tenant"

LANDLORD AND TENANT DO HERBY COVENANT, CONTRACT AND AGREE AS FOLLOWS:

1. The Premises

Landlord does hereby lease to the Tenant and the Tenant does hereby lease and take from Landlord of the property described as follows: 700 square feet of commercial space.

2. Lease Term

This lease agreement shall commence on December 1st 2013, and shall terminate on December 1st 2018.

3. Lease Extension

The parties may choose to extend this agreement upon such terms as may be agreed upon in writing and signed by the parties at the time of any such extension.

4. Purpose

The Tenant may use the Premises for Restaurant use and no other purpose.

5. Rent

Tenant shall pay to Landlord as Rent the Amount of Eight Hundred dollars (\$800.00) payable monthly (hereinafter the "Rent") in advance without demand on or before the 5th day of each month at PO Box 453, or at such other place as the parties can agree upon.

A security deposit of Eight Hundred dollars (\$800.00) equal to one month's rent shall be held by the Landlord for unpaid rents or damage to the Premises beyond normal wear and tear.

Last month's rent of Eight Hundred dollars (\$800.00) shall be held by the Landlord to be applied to the Tenant's last month of occupancy.

The Tenant agrees that rent shall be paid in lawful money of the United States.

During the term of this lease, Tenant shall be liable for a one-time adjustment in operating expenses six months after tenancy. Excepting the one time operating expense adjustment, the landlord shall pay all operating expenses incurred during each calendar year for the maintenance, administration, and operation of the building. The operating expenses include but are not limited to all cleaning, utilities, landscaping, real property taxes, parking maintenance, insurance premiums, repairs and maintenance, and other charges of the like.

6. Assignment and Subleasing

The Tenant shall not assign the Agreement, or sublease or grant any license to use the premises or any part thereof without the prior written consent of the Landlord. Consent by the Landlord to one such assignment, subleasing or license shall not be deemed to be a consent to any subsequent assignment, sublease or license. Any assignment, sublease or license without the prior written consent of the Landlord or an assignment of subleasing by operation of law shall be absolutely null and void and shall, at the Landlord option, terminate the Agreement.

7. Improvements and Repairs

Tenant shall make no alterations or improvements to the Premises without first obtaining the express written consent of Landlord. The Landlord shall also be solely responsible for repairs or improvements to the structure and to the exterior of the building.

8. Insurance

If the Premises or any other part of the Building is damaged by fire or other casualty resulting from any act or negligence of Tenant or any of Tenant's agents, employees or invitees, rent shall not be diminished or abated while such damages are under repair, and Tenant shall be responsible for the cost of repair not covered by insurance.

Landlord shall maintain fire and extended coverage insurance on the Building and the Premises in such amounts, as Landlord shall deem appropriate. Tenant shall be responsible, at its expense, for fire and extended coverage insurance on all of its personal property, including removable trade fixtures, located in the Premises.

Tenant and Landlord shall, each at its own expense, maintain policy or policies of comprehensive general liability insurance with respect to the respective activities of each in the Building with the premiums thereon fully paid on or before due date, issued by and binding upon some insurance company approved by Landlord, such insurance to afford minimum protection of not less than \$1,000,000 combined single limit coverage of body injury, property damage or combination thereof. Landlord shall not be required to maintain insurance against thefts within the Premises or the Building.

9. Utilities

Landlord shall be liable for general utility charges as they become due, including those for water, sewer, gas, electricity, and other services and utilities used by Tenant on the Premises during the term of the Lease Agreement.

10. Signs

Tenant shall not affix any sign, advertisement or notice without prior written consent of Landlord, which consent shall not be unreasonably withheld or delayed. Landlord may refuse consent to any proposed signage that is in Landlord's opinion too inconsistent with or inappropriate to the Premises or use of any other Tenant. Tenant shall repair all damage to the Premises resulting from the removal of signs installed by Tenant.

11. Building Rules

Tenant will comply with the rules of the Building adopted by Landlord and will cause all of its agents, employees, invitees and visitors to do so; all changes to Building rules will be sent by Landlord to Tenant in writing. The initial rules for the Building are attached hereto and incorporated herein for all purposes.

12. Termination

Landlord may terminate this lease for any one of the following or any other caused permitted by law:

- a. arrears or rent or additional rent
- b. the bankruptcy or insolvency of the Tenant
- c. substantial damage to or destruction of the Premises
- d. any significant willful or negligent damage to the Premises caused by the Tenant or by persons permitted on the Premises by the Tenant
- e. a material change in the use of the Premises by the Tenant in particular (without limiting the generality of this provision), any change that affects the Landlords building insurance or that constitutes a nuisance.
- f. any unauthorized assignment or subletting of this lease by the Tenant
- g. any sale or material change in use of the building in which the Premises are located by the Landlord
- h. repeated violations of the building's rules.

13. Surrender of Premises

At the expiration of the Agreement, the tenant shall immediately surrender the Premises in the same condition as at the start of the agreement, reasonable use and wear thereof and damages by the elements excepted; and the Tenant shall return to the Landlord a complete set of keys to the Premises and provide the Landlord in writing, the Tenant's forwarding address.

14. Headings

Headings are inserted for the convenience of the parties only and are not to be considered when interpreting this Agreement.

15. Governing Law

This Lease is governed by the statutory and case of the State of Colorado. The parties hereby indicate by their signatures below that they have read and agree with the terms and conditions of this Agreement in its entirety.

Executed this December 15, 2013.

Signed, sealed and delivered in the presence of:

Landlord:

Print Name: Molly Mogavero / JEFF Ellis

Signature: Molly Mogavero / JEFF

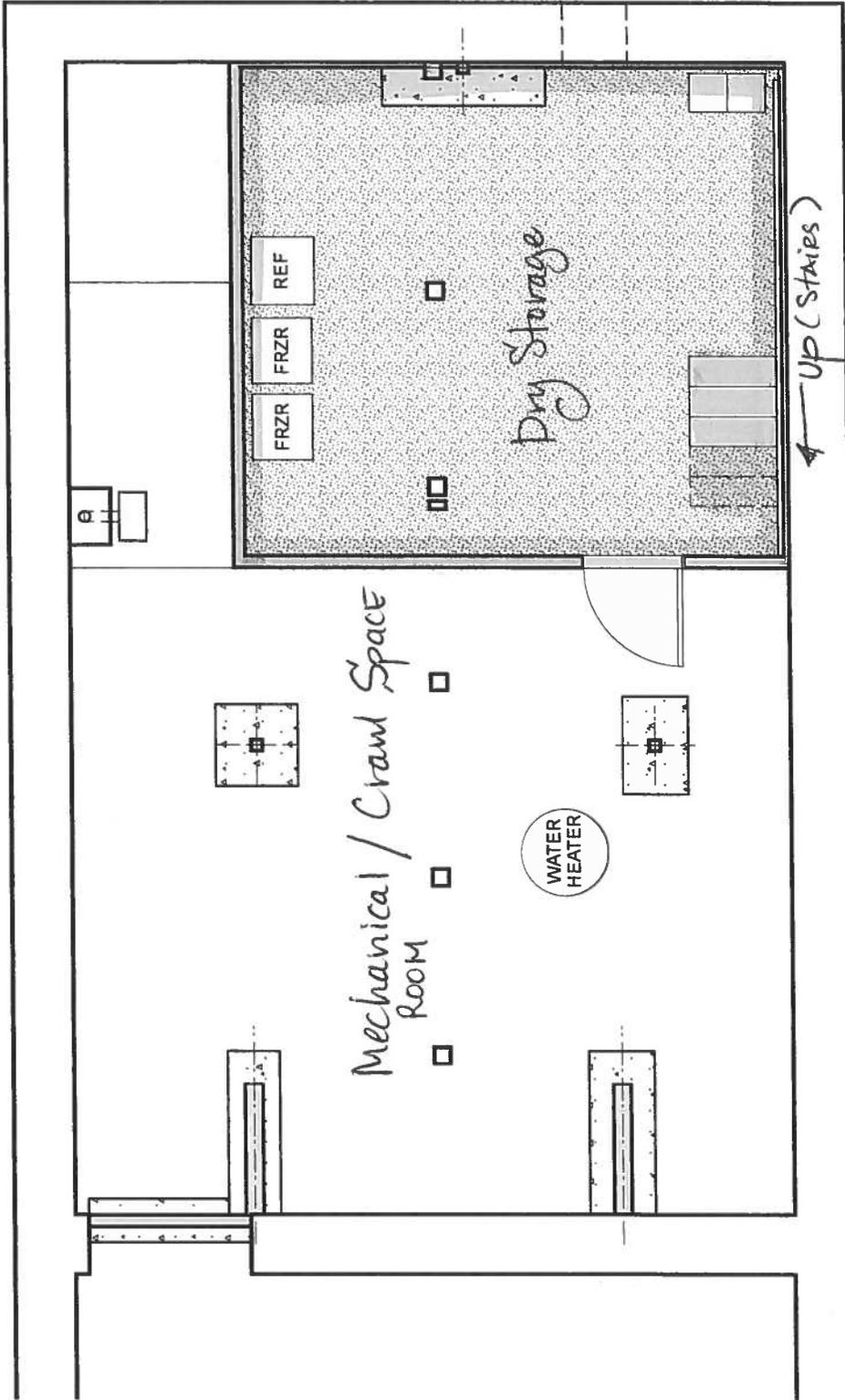
Date: December 15, 2013

Tenant:

Print Name: Maud's on Main, LLC

Signature: Molly Mogavero

Date: December 15, 2013

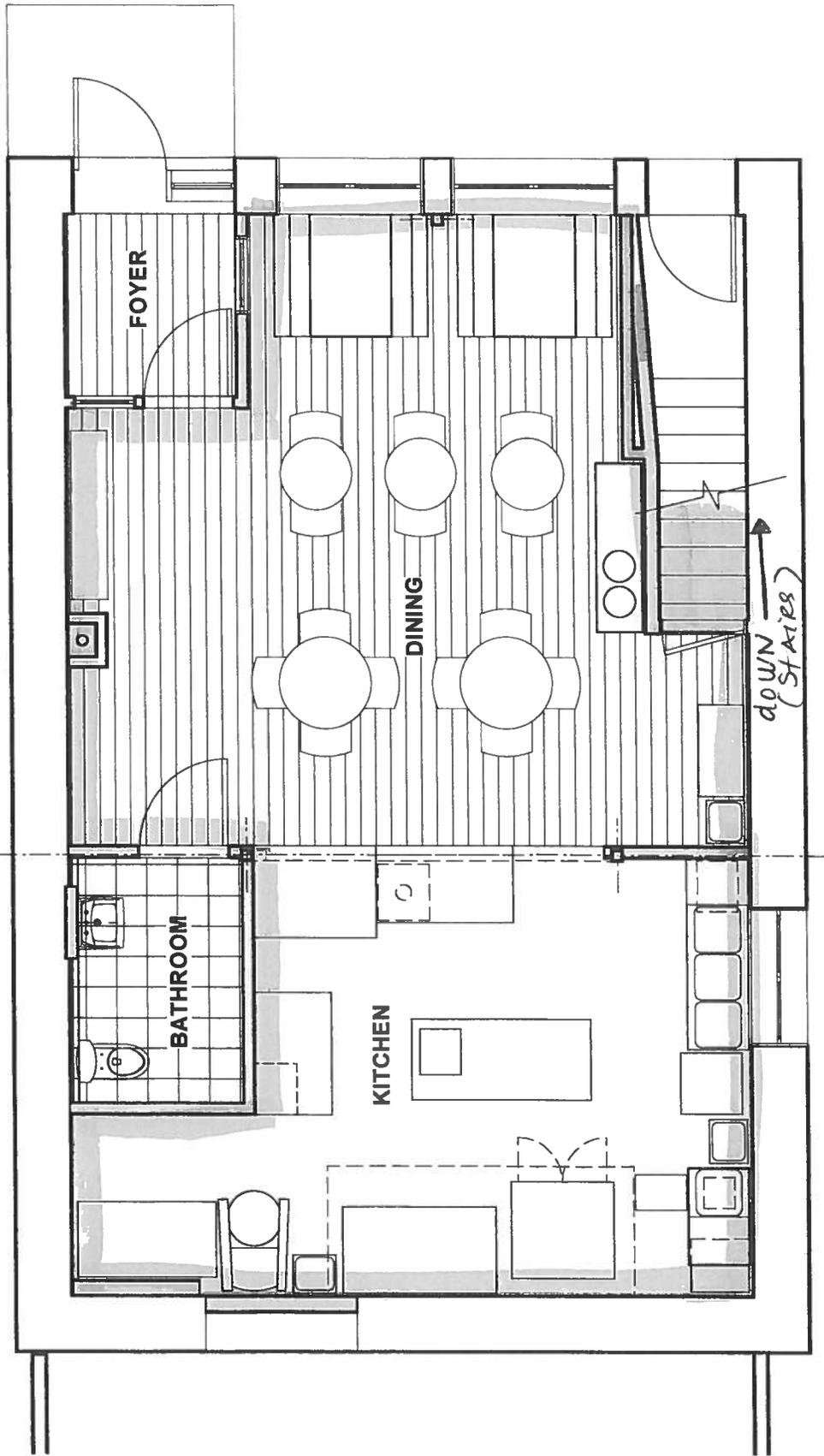


LOWER FLOOR PLAN

1

3/16" = 1'-0"





MAIN FLOOR PLAN

3/16" = 1'-0"

1

**TOWN OF NEW CASTLE
RESOLUTION NO. TC-2014-7**

A Resolution of the Town Council of the Town of New Castle Approving an Application from Maud's On Main, LLC for a Beer and Wine License.

WHEREAS, Maud's On Main, LLC (Applicant) has applied for a beer and wine license at 316 West Main Street, New Castle, Colorado; and

WHEREAS, the Town Council of the Town of New Castle held a duly noticed public hearing on February 18, 2014 to consider the application; and

WHEREAS, the Town Council listened to testimony from staff, the Applicant, and members of the public concerning the application; and

WHEREAS, the Town Council finds:

1. Within the previous 2 years, the Town Council has not denied an application for the same class of license at this location or within 500 feet of this location for the reason that the reasonable requirements of the neighborhood and the desires of the adult inhabitants were satisfied by the existing outlets;
2. The Applicant is entitled to possession of the premises to be licensed by ownership, lease, rental, or other arrangement;
3. The sale of alcohol beverages at the premises is permitted under the zoning regulations applicable to the premises;
4. The building in which the alcohol beverages are to be sold is not located within 500 feet of any public or parochial school or the principal campus of any college, university, or seminary;
5. The Applicant's officers, and members holding 10 percent or more interest in the Applicant, are of good moral character;
6. The reasonable requirements of the neighborhood for the type of license for which application has been made; the desires of the adult inhabitants; and the number, type, and availability of alcohol beverage outlets located in or near the neighborhood under consideration justify the granting of the license; and

WHEREAS, based on the application and the testimony, the Town Council desires to approve the application.

NOW, THEREFORE, BE IT RESOLVED by the Town Council of the Town of New Castle, Colorado:

1. Recitals. The Town Council adopts the foregoing recitals as findings of fact and determinations of the Council.
2. Definition of the Application. The Application consists of the documents and information identified by the Town Clerk, plus all representations of the Applicant reflected in the minutes of the Town Council public hearing on February 18, 2014.
3. Approval. The Town Council approves the Application.

Introduced, Read and Adopted at a regular meeting of the Town Council of the Town of New Castle, Colorado, on February 18, 2014.

TOWN OF NEW CASTLE

Frank Breslin, Mayor

ATTEST:

Melody Harrison, Town Clerk