# APPLICATION # 1

Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction the shall be subject to penalties provided by law for the same statement and conviction the shall be subject to penalties provided by law for the same statement and conviction the shall be subject to penalties provided by law for the same statement and conviction the same state

# STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

(PLEASE PRINT OR TYPE IN INK)

To the Board	of License	Commissioners for	r Montgomery	County:
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Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article.

SECTION 1: LICENSE TYPE INFORMAT	TION		# 1624544
A. Nature of Application:	☑ New License □	Transfer of Location	☐ Transfer of Ownership ☐ Reclassification
B. Entity on Whose Behalf Application is Made:	☑ Corporat	Company □ Partnership □ Individual	
	s BBW		yolo CAFE Inc.
E. Types of Permits Applied For: (See Appendix A)	-		utdoor Café □ Refillable Container for Cooking □ Wine Corkage
F. Trade Name of Facility:			
G. Address of Facility to be Licensed (No 18022 Matery Rd	P.O. Box):	rton: MD	20274
SECTION 2: APPLICANT INFORMATION			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	thdate: 3/20/1983	Personal Phone Numl H:	c: 240 - 386-7864
Full Address: /3238 Meander Cove Email Address: Sex	Dr. German	Years at this Address:	
Yolocafe 2 & gmail. com	7	Place of Birth:	<b>a</b>
If applicant is foreign-born, state:			
Immigration Card Number:	If Naturalized, City, Bullinore	State: Maryland	Date of Naturalization:
	hdate:	Personal Phone Numl	oer: c: 30/-978 -171
Full Address: 22536; Phillips ST C	larksburg	***	Years as Maryland Resident:
Email Address: Sex	: Md 2087	Place of Birth:	IINA
If applicant is foreign-born, state:			,
Immigration Card Number: 32863827	If Naturalized, City, Baltimore		Date of Naturalization:
		/	
XIV HOI WANTED 3		Rersonal Phone Number	1 c: 2407886-7864
Full Address: 1323/8 Meander Cove	Dr Germanto	Years at this Address;	Years as Maryland Resident
Email Address: NO 208 Sex	E/	Place of Birth:	MINA
If applicant is foreign-born, state:			U
Immigration Card Number:	If Naturalized, City,	/State:	Date of Naturalization:

#### (NOTE: COMPLETE ONLY ONE SECTION FOR SECTIONS 3, 4, OR 5, AS APPLIES) SECTION 3: CORPORATION INFORM. ON A. Qualifying Maryland Resident (Indicate with X) Applicant A B Applicant B III Applicant C B. Name and Full Address of Corporation: Yolo Cafe Tre 18022 Matery Rd, Germanton MD 20874 D. Month and Year: C. Incorporated Under State Laws of: Maryland G. Number of Shares Issued: E. Authorized Capital: F. Number of Shares Authorized: 1.50 000 Stockholders (Include all layers equaling 100% owned by individuals and/or publicly traded, use additional sheet if necessary) Full Address: Name (A): **Shares Owned:** 13238 Meander CoveRDY Full Address: Germanton, MD 20874 XIV HOI Name (B): Name (C): Full Address: **Shares Owned:** Corporate Officers: Name (A): **Full Address:** JinTie Wang Name (B): XIU HUI WARE 13238 Meander Co Name (C): SECTION 4: LIMITED LIABILITY CORPORATION INFORMATION A. Qualifying Maryland Resident (Indicate with X) ☐ Applicant A ☐ Applicant B ☐ Applicant C B. Name and Full Address of LLC: C. Authorized Persons of LLC D. Organized Under State Laws of: E. Month and Year: Percentage of Ownership Interest of LLC (Use additional sheet if necessary): Name (A): **Full Address:** Percentage: Name (B): Full Address: Percentage: Full Address: Name (C): Percentage: SECTION 5: PARTNERSHIP INFORMATION A. Name and Full Address of Partnership: C. Date on Which Partnership was Formed: D. In Which State: Percentage of Ownership Interest of Partnership (Use additional sheet if necessary): Name (A): **Full Address:** Percentage: Name (B): Full Address: Percentage: **Full Address:** Name (C): Percentage:

☐ Applicant A ☐ Applicant B ☐ Applicant C

☐ Applicant A ☐ Applicant B ☐ Applicant C

Indicate Who are the General Partners:

**Indicate Maryland Residents:** 

SECTION 6: ESTABLISHMENT INFOR.	TION	
	ootage of the portion of the building for which license is sought (ex	Free standing,
located in strip mall, restaurant, seating, b	peer/wine, etc.):	
	~700d) about 2600 99t.	
B. Who Will be in Charge of Day-to-Day Op メルント いん	4	
C. Phone Number of Establishment: 301-216-2828	D. Type of Facility/Facility Concept:	*
E. Date Applicant will Begin to Operate:	F. Days and Hours of Operation:	
Tanacal acor	ASun- Thre 11:00 Am - 9:00 AM	
January 2025	Fri - Sat 11:00 AM - 9:30 P	AA.
(1)		
SECTION 7- LICENISE TRANSFER (COMP	LETE ONLY IF TRANFERRING A LICENSE)	1-
A. Names of all Current License Holders:	B. Date Facility Began Oper	rating
1)	3)	aring.
2)	-,	
C. Location of Current Licensed Facility:	D. Location to Which License is Being Transferred:	
SECTION 8: LEASED PREMISES		
A. Name of Property Owner: B. I	Phone Number of Property Owner: C. Full Address of Property Own	er:
Cloppers Mill Village Center	703-442-4300 5400 Wostbard A.  E. Date Lease Expires:	re #250
D. Date Lease Made:	E. Date Lease Expires:	ND 20816
11/18/2024	11/18/2034	
F. State Renewal Options, if any:		
NA	· · · · · · · · · · · · · · · · · · ·	
SECTION 9: APPLICANT QUESTIONAIRE  Has any applicant ever been:		\$
1. Convicted of a felony?		- VEC - NO
	ning the sale of alcohol in the State of Maryland or the United States?	□ YES ⊅ NO
	evention and gambling in the State of Maryland or the United States?	☐ YES ☑ NO
traffic offense?	aws of the State of Maryland or the United States other than a minor	□ YES Ø NO
	the sale of alcoholic beverages suspended or revoked?	□ YES Ø NO
6. Has any applicant ever had a license for	the sale of alcoholic beverages?	☑ YES □ NO
	cility, address for which license was held, and the dates for which it w	
Maryland, good fortune	Cafe, 237A Kentlands Blud, Gaithersbu	3.MD 208
	wnership interest in this facility have a financial interest in any other e of Maryland where an alcoholic beverage license has been applied	□ YES 対 NO
for, granted, or issued under the Alcoholic	Beverages Article of the Annotated Code of Maryland?	
	ame and address of licensed premises and ownership and add the da	ites the license
was held:		
*		
8: Boss any person other than the amilia	ant(s) have any financial interest in this alcoholic beverage license	- VEC + NO
applied for, or in the facility to be conducted	ed under the current license?	□ YES ₺ NO
If YES, state name and the financial interes	t owned:	
,		

## SECTION 10: CERTIFICATES AND SIGNATURES

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter convey or grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and cierks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

Affidavit:		1.					4
Alliquett.		*		*		À .	
"By signing this application, I do sol			s of perjury th	nat the conte	nts of the fo	regoing doc	ıment are
true and correct to the best of my k	mowledge, information, an	d belief."	•				
(A) \							
Signoture of Applicant					*		
(B)							
Signature of Applicant							,
(C)							
Signature of Applicant							
signature of Applicant	(D)		1				
		(FOR CORPOR	ATION APPLI	CATIONS ONL	Y) Corpord	ite President	Signature
		- + 1			100		
					15		
22 CERTIFICATE OF PROPERTY OWN	NFR• I hereby certify that I	am the owner of t	he property	named in the	foregoine a	nnlication fo	ran
alcoholic beverage license and that	I hereby consent to the us	e of the said prope	erty for the sa	ale thereon of	such alcoh	olic beverag	es as may
alcoholic beverage license and that be permitted by law, and I do hereb Board of License Commissioners for	I hereby consent to the us by grant permission to the S Montgomery County, its o	e of the said prope State Comptroller, Iuly authorized ag	erty for the sa his duly auth ents and emp	ale thereon of norized deput ployees, and a	Fsuch alcohies, inspecto iny peace of	olic beverag ors and clerk fficer of Mor	es as may s, the stgomery
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any	I hereby consent to the us by grant permission to the S Montgomery County, its o	e of the said prope State Comptroller, Iuly authorized ag	erty for the sa his duly auth ents and emp	ale thereon of norized deput ployees, and a	Fsuch alcohies, inspecto iny peace of	olic beverag ors and clerk fficer of Mor	es as may s, the stgomery
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any	I hereby consent to the us by grant permission to the S Montgomery County, its o	e of the said prope State Comptroller, Iuly authorized ag	erty for the sa his duly auth ents and emp	ale thereon of norized deput ployees, and a	Fsuch alcohies, inspecto iny peace of	olic beverag ors and clerk fficer of Mor	es as may s, the stgomery
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.	I hereby consent to the us by grant permission to the S Montgomery County, its o	e of the said prope State Comptroller, Iuly authorized ag	erty for the sa his duly auth ents and emp	ale thereon of norized deput ployees, and a	Fsuch alcohies, inspecto iny peace of	olic beverag ors and clerk fficer of Mor	es as may s, the stgomery
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.	I hereby consent to the us by grant permission to the S Montgomery County, its o	e of the said prope State Comptroller, Iuly authorized ag	erty for the sa his duly auth ents and emp	ale thereon of norized deput ployees, and a	Fsuch alcohies, inspecto iny peace of	olic beverag ors and clerk fficer of Mor	es as may s, the stgomery
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted. Affidavit:	I hereby consent to the use by grant permission to the S Montgomery County, its y and all hours, without wal	e of the said prope State Comptroller, July authorized ag rrant, the premise	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do sol	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do sol	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do sol	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do solutive and correct to the best of my k	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do sol	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do solutive and correct to the best of my king and correct to the best of my ki	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do solutive and correct to the best of my king and conducted the best of my king and correct to the best of my kin	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
alcoholic beverage license and that be permitted by law, and I do herek Board of License Commissioners for County to inspect and search at any facility is to be conducted.  Affidavit:  "By signing this application, I do solutive and correct to the best of my king and correct to the best of my ki	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said prope State Comptroller, July authorized ag rrant, the premise nder the penalties	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said
Signature of the Property Owner  Thany Hardy  Printed Name of Property Owner	I hereby consent to the use by grant permission to the S r Montgomery County, its of y and all hours, without wall emnly declare and affirm u	e of the said propostate Comptroller, luly authorized ag rrant, the premise nder the penalties d belief."	erty for the sa his duly auth ents and emp is and any and	ale thereon of norized deput ployees, and a d all parts the	f such alcoh les, inspecto iny peace of reof upon a	olic beverag ors and clerk fficer of Mor and in which	es as may s, the itgomery said

# APPLICATION # 2

Extract from Law: If any affidavit or oath required der the provisions of this Act shall contain any false deemed guilty of 

## STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

(PLEASE PRINT OR TYPE IN INK)

To the Board of License Commissioners for Montgomery County:

Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article

<b>SECTION 1: LICENSE TYPE INFOR</b>	MATI	ON			# 1200242	
A. Nature of Application:	☐ New Licen	ense Fransfer of Location Transfer of Ownership   Reclassification				
B. Entity on Whose Behalf Applicati Made:	□ Corp	☐ Corporation ☑ Limited Liability Company ☐ Partnership ☐ Individual				
C. Class of License Applied For:		!	D. Entity Name:			
Class D (B/W/L)			В	ricks	stone LLC	
E. Types of Permits Applied For:		□ Tast	ing (\$200)   Catering	56 (	Outdoor Café □ Refillable Container	
(See Appendix A)			□ Retail Delivery □ Sp	irits	s for Cooking □ Wine Corkage	
F. Trade Name of Facility: iRock Ka	araoke Lo	ounge		G	G. Is Business a Franchise? ☐ YES ☑ NO	
H. Address of Facility to be Licensed	i (No P	.O. Box): 15964 St	nady Grove Rd, Gaithersbur	g, M	1D 20877	
SECTION 2: APPLICANT INFORM	ATION	V				
Applicant A Name:	Birth		Personal Phone Num	nbe	r:	
Yi Zhao		8/20/1980	H:		C: 240-994-6312	
Full Address: 20400 Mouth of Monocac	y Rd, Di	ckerson, MD 20842	Years at this Address	s:	Years as Maryland Resident: 34	
Email Address: sing@irock-karaoke.com	Sex:	male	Place of Birth: China			
If applicant is foreign-born, state:						
Immigration Card Number:	1	f Naturalized, City	//State: Baltimore/Maryland	Da	ate of Naturalization: 3/15/2002	
Applicant B <sub>1</sub> Name:	Birth	date:	Personal Phone Num	ahe	r·	
Yuan He		3/22/1979	H:	,,,,	c: 30/6332351	
	lockvi	lle mD 20852	Years at this Address	s:	Years as Maryland Resident:	
Email Address: hy @ hy funancial com	Sex:	Male	Place of Birth:	74		
If applicant is foreign-born, state:						
Immigration Card Number: 27657392	1	f Naturalized, City MEMPHIS	y/State:	Da	ate of Naturalization: Sept 18, 2003	
Applicant C Name:	Birth	date:	Personal Phone Nun	nbe	r: C	
Full Address:			Years at this Address	s:	Years as Maryland Resident:	
Email Address:	Sex:		Place of Birth:			
If applicant is foreign-born, state:						
Immigration Card Number:	1	f Naturalized, City	//State:	Da	ate of Naturalization:	
MOTE: ALL ADDITIONALES WILL	DE UED	EACTED DECEDDE	TO BY THE LETTER A	D	OR C PRECEDING THEIR NAME AROVE	

## (NOTE: COMPLETE ONLY ONE SECTION FOR \*\*\*TIONS 3, 4, OR 5, AS APPLIES) SECTION 3: CORPORATION INFORMA..ON

A. Qualifying Maryland Resident (Indicat B. Name and Full Address of Corporation			☐ Applicant A ☐ A	Applicant B □ Applicant C		
C. Incorporated Under State Laws of:			D. Month and Y	ear:		
E. Authorized Capital:	F. Number of Shar	es Authorized:	G. Number of S	hares Issued:		
ockholders (Include all layers equaling 1	00% owned by indiv	iduals and/or pub	licly traded, use ad	Iditional sheet if necessary)		
Name (A):	Full Address:			Shares Owned:		
lame (B):	Full Address:			Shares Owned:		
lame (C):	Full Address:			Shares Owned:		
rporate Officers:						
Name (A):	Full Address:			Title:		
Name (B):	Full Address:			Title:		
Name (C):	Full Address:			Title:		
D. Organized Under State Laws of: Mary		E. Month and	Year: April 2014			
ercentage of Ownership Interest of LLC (		if necessary):				
Name (A): Yi Zhao	Full Address: 20400 Mouth of Mo	onocacy Rd, Dickers	on, MD 20842	Percentage: 25.01%		
Name (B): Joseph Kir	Full Address: 667 Pullman Pl, Gai	thersburg, MD 208	77	Percentage: 24.17%		
Name (C): Yuan He	Full Address: 11901 Renwood In,	Rockville, MD 208	52	Percentage: 25.41%		
Name (D): Shouyi Wu ECTION 5: PARTNERSHIP INFORMA	Full Address: 33 Mor TION	nroe St Apt 706, Ro	ckville, MD 20850	Percentage: 25.41%		
A. Name and Full Address of Partnership	:					
C. Date on Which Partnership was Forme	ed:	D. In Which State				
ercentage of Ownership Interest of Partr	nership (Use additio	nal sheet if necess	sary):			
Name (A):	Full Address:			Percentage:		
Name (B):	Full Address:			Percentage:		
Name (C):	Full Address:			Percentage:		
ndicate Who are the General Partners:		⊔ Applicant A	. □ Applicant B □ A	pplicant C		
Indicate Maryland Residents:		☐ Applicant A ☐ Applicant B ☐ Applicant C				

SECTION 6: ESTABLISHMENT INFOR	MATION		
A. Detailed description and total squa	re footage of the portion of the buildin	g for which license is sought (ex. F	ree standing,
located in strip mall, restaurant, seatin	g, beer/wine, etc.): Located in shopping	plaza, 3420 SF karaok	e tounge
B. Who Will be in Charge of Day-to-Day	y Operations (General Manager): Yi Zh	ao	
C. Phone Number of Establishment: 301-355-6177	D. Type of Facility/Facility Concep	t: Karaoke Lounge	
E. Date Applicant will Begin to Operate	F. Days and Hours of Operation:		
4/23/2024		sday, Thursday: Spm - 2 Am - 21 30 AM	
SECTION 7: LICENSE TRANSFER (CO			
A. Names of all Current License Holder		B. Date Facility Began Opera	ating:
1) Joseph Kir	3)	Sept 2014	
C. Location of Current Licensed Facility: 15964 Shady Grove Rd, Gaithersburg, MI		is Being Transferred:	
SECTION 8: LEASED PREMISES			
A. Name of Property Owner:	B. Phone Number of Property Owner:	C. Full Address of Property Owne	er:
Bob Begelman	301-873-4002	15942 Shady Grove Rd, Gaithersbu	urg, MD 20877
D. Date Lease Made: May 1st, Zo	og	E. Date Lease Expires: April 30, 2029	
C Chata Damasual Outions if any	//A		
SECTION 9: APPLICANT QUESTION/ Has any applicant ever been:	AIRE		
1. Convicted of a felony?			□ YES ☎ NO
2. Found guilty of violating the laws go	verning the sale of alcohol in the State	of Maryland or the United States?	☐ YES ™ NO
3. Found guilty of violating the laws for	r prevention and gambling in the State o	of Maryland or the United States?	☐ YES ☎ NO
4. Found guilty of any offense against t traffic offense?	he laws of the State of Maryland or the	United States other than a minor	□ YES ⋈ NO
5: Has any applicant ever had a license	for the sale of alcoholic beverages susp	pended or revoked?	☐ YES ☎ NO
6. Has any applicant ever had a license	for the sale of alcoholic beverages?		□ YES ® NO
If YES, state name of applicant, name of	of facility, address for which license was	held, and the dates for which it w	as held:
facility in Montgomery County or the	n ownership interest in this facility hav State of Maryland where an alcoholic b rolic Beverages Article of the Annotated	everage license has been applied	□ YES □ NO
	t, name and address of licensed premis		tes the license
applied for, or in the facility to be con-			x YES □ NO
If YES, state name and the financial int	•		
	Shouyi Wu, 25.41 Yuan He, 25.41%	%	

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter convey or grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and

County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.
Affidavit:
"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."
(A)
Signature of Applicant
(B)
Signature of Applicant
(C)
Signature of Applicant
(D)
22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of the property named in the foregoing application for an alcoholic beverage license and that I hereby consent to the use of the said property for the sale thereon of such alcoholic beverages as may be permitted by law, and I do hereby grant permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.  Affidavit:
"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document ar true and correct to the best of my knowledge, information, and belief."
R Begelmen 301-873-4002
Signature of the Property Owner BEOELMAN, Ru
Printed Name of Property Owner 15942 SHADY OPOVE RA 1 CA (THEPSBURG, Mg
Address of Property Owner  Phone of Property Owner  301-813-4002  20817

# APPLICATION # 3

Extract from Law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury. And upon indictment and conviction thereof shall be subject to penalties provided by law for that crime.

## STATE OF MARYLAND | MONTGOMERY COUNTY APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

(PLEASE PRINT OR TYPE IN INK)

То	the	<b>Board</b>	of	License	Commissioners	for	Montgomery	County:
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**SECTION 1: LICENSE TYPE INFORMATION** 

A. Nature of Application:

Application is made by the undersigned under the provisions of Alcoholic Beverages Article of the Annotated Code of Maryland, for an alcoholic beverage license and each applicant submits and certifies to the following information required by said article.

■ New License 
☐ Transfer of Location ☐ Transfer of Ownership ☐ Reclassification

B. Entity on Whose Behalf Application Made:	□ Corp	orporation   ■ Limited Liability Company   □ Partnership   □ Individual				
C. Class of License Applied For: Class B - BBWLHR		1	D. Entity Name: Sunshine Holding	gs	LLC	
E. Types of Permits Applied For:		□ Tast	ing (\$200) 🗆 Catering	<b>B</b> C	Outdoor Café 🗆 Refillable C	ontainer
(See Appendix A)			□ Retail Delivery □ Spi	irits	for Cooking 🗆 Wine Corka	ge
F. Trade Name of Facility: Effoi			G	. Is Business a Franchise?	□ YES ■ NO	
H. Address of Facility to be Licensed 8233 Fenton Street, Silver Spr						
SECTION 2: APPLICANT INFORMA	ATION					
	Birthdat 12/12/1		Personal Phone Num H:	ber	r: C:240-660-1337	
Full Address: 12519 Winexburg Manor Dr. Apt. T1, Silv	ver Spring	MD 20906	Years at this Address 5		Years as Maryland Resider 5	nt:
Email Address: nigistme1277@gmail.com	Sex: Female		Place of Birth: Ethiopia			
If applicant is foreign-born, state:						
Immigration Card Number:		aturalized, City shington D.C			nte of Naturalization: /08/2018	
Applicant B Name:	Birthdat	te:	Personal Phone Num	bei	r:	
			H: C:			
Full Address:			Years at this Address	lress: Years as Maryland Resident:		
Email Address: Mige 6691 @Yahoo. Com	Sex:		Place of Birth:			
If applicant is foreign-born, state:						
Immigration Card Number:	If N	laturalized, City	//State:	Da	ate of Naturalization:	
Applicant C Name:	Birthda	te:	Personal Phone Num	nbei	r:	
			H:		С	
Full Address:			Years at this Address: Years as Maryland Resident:			nt:
Email Address: Sex:			Place of Birth:			
If applicant is foreign-born, state:						
		laturalized, City	City/State: Date of N		ate of Naturalization:	
(NOTE: ALL APPLICANTS WILL B	E HEREA	FTER REFERRE	TO BY THE LETTER A,	В, (	OR C PRECEDING THEIR NAM	ME ABOVE)

## (NOTE: COMPLETE ONLY ONE SECTION FOR SECTIONS 3, 4, OR 5, AS APPLIES)

~ =	CTIO	BI TO .	CORPOR	ATIONIN	NECHOR	ATION
<b>⊸</b> i⊦	- 6 1 1 2 2	M 4.	IIIRPIIR	77 I EL 1132 II	MEDRINE	

SECTION 3: CORPORATION INFORM						
A. Qualifying Maryland Resident (Indica			☐ Applicant A ☐	Applicant B  Applicant C		
B. Name and Full Address of Corporatio	n:					
C. Incorporated Under State Laws of:			D. Month and Y	ear:		
E. Authorized Capital:	F. Number of Sha	res Authorized:	G. Number of S	hares Issued:		
Stockholders (Include all layers equaling :	100% owned by indi	viduals and/or pub	licly traded, use ac	dditional sheet if necessary)		
Name (A):	Full Address:		•	Shares Owned:		
Name (B):	Full Address:			Shares Owned:		
Name (C):	Full Address:			Shares Owned:		
Corporate Officers:	1					
Name (A):	Full Address:		*	Title:		
				T-44.1		
Name (B):	Full Address:			Title:		
Name (C):	Full Address:			Title:		
		-		<u> </u>		
SECTION 4: LIMITED LIABILITY CORP	ODATION INCODA	AATION				
A. Qualifying Maryland Resident (Indica			nnlicant ∧ □ Annlic	cant B □ Applicant C		
B. Name and Full Address of LLC:		C. Authorized I		carit b iii Applicant c		
Sunshine Holdings LLC 12519 Winexburg Manor Dr. Apt. T1 Silver	Spring MD 20906	Nigist T				
D. Organized Under State Laws of: Maryland		E. Month and Year: December 2024				
Percentage of Ownership Interest of LLC		t if necessary):				
Name (A): Nigist Teferi	Full Address: 12519 Winexburg Ma	nor Dr. Apt T1 Silver	Spring MD 20906	Percentage: 50		
Name (B):	Full Address:			Percentage:		
Maernet Gebremichael	2720 Hunters Gate	Ter. Silver Spring	MD 20904	50		
Name (C):	Full Address:			Percentage:		
	TION					
SECTION 5: PARTNERSHIP INFORMA  A. Name and Full Address of Partnership						
A. Name and run Address of Farthersing	<b>,</b>					
C. Date on Which Partnership was Form	ed:	D. In Which State	•			
Percentage of Ownership Interest of Part	nership (Use additio	nal sheet if necess	arv):			
Name (A):	Full Address:			Percentage:		
Name (B):	Full Address:			Percentage:		
Name (C):	Full Address:			Percentage:		
Indicate Who are the General Partners:		□ Applicant A	☐ Applicant B ☐ A	pplicant C		
Indicate Maryland Residents:		☐ Applicant A	□ Applicant A □ Applicant B □ Applicant C			

### **SECTION 6: ESTABLISHMENT INFORMATION**

A. Detailed description and total square footage of the portion of the building for which license is sought (ex. Free stan located in strip mall, restaurant, seating, beer/wine, etc.):  Free standing restaurant with two floors totalling 4,868 square feet, food, beer, wine, liquor; also would like to serve food and alcohol outdoors.	
B. Who Will be in Charge of Day-to-Day O Nigist Teferi	perations (General Manager):
C. Phone Number of Establishment: 240-660-1337	D. Type of Facility/Facility Concept: Restaurant
E. Date Applicant will Begin to Operate: 01/15/2025	F. Days and Hours of Operation: Seven days per week 9:00 AM - 2:00 AM

### SECTION 7: LICENSE TRANSFER (COMPLETE ONLY IF TRANSFERRING A LICENSE)

A. Names of all Current License Holders:  1) Bekelech Y. Delelegne 2) Dagmawi Lakew		B. Date Facility Began Operating: 3/26/2012
C. Location of Current Licensed Facility: 8233 Fenton Street, Silver Spring MD 20910	D. Location to Which License is Bei 8233 Fenton Street, Silver Sp	

#### **SECTION 8: LEASED PREMISES**

A. Name of Property Owner:	B. Phone Number of Property Owner:	C. Full Address of Property Owner:
Abye LLC	3017750709	1680 White Oak Vista Dr. Silver Spring MD 20904
D. Date Lease Made: 12/09/2024		E. Date Lease Expires: 12/09/2029
F. State Renewal Options, if any: Five One-Year extensions		

## **SECTION 9: APPLICANT QUESTIONAIRE**

Has any applicant ever been:

<ol> <li>Convicted of a felony?</li> <li>Found guilty of violating the laws governing the sale of alcohol in the State of Maryland or the United States?</li> <li>Found guilty of violating the laws for prevention and gambling in the State of Maryland or the United States?</li> <li>Found guilty of any offense against the laws of the State of Maryland or the United States other than a minor traffic offense?</li> <li>Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?</li> </ol>	☐ YES ■ NO ☐ YES ■ NO ☐ YES ■ NO ☐ YES ■ NO
<ul> <li>3. Found guilty of violating the laws for prevention and gambling in the State of Maryland or the United States?</li> <li>4. Found guilty of any offense against the laws of the State of Maryland or the United States other than a minor traffic offense?</li> <li>5: Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?</li> </ul>	□ YES ■ NO
4. Found guilty of any offense against the laws of the State of Maryland or the United States other than a minor traffic offense?  5: Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?	
traffic offense?  5: Has any applicant ever had a license for the sale of alcoholic beverages suspended or revoked?	□ YES ■ NO
C. the annual light are had a light of the sole of slock slick arranges 2	□ YES ■ NO
6. Has any applicant ever had a license for the sale of alcoholic beverages?	□ YES ■ NO
If YES, state name of applicant, name of facility, address for which license was held, and the dates for which it was	s held:
7: Does any applicant or person with an ownership interest in this facility have a financial interest in any other	
facility in Montgomery County or the State of Maryland where an alcoholic beverage license has been applied for, granted, or issued under the Alcoholic Beverages Article of the Annotated Code of Maryland?	□ YES ■ NO
If YES, state the name of the applicant, name and address of licensed premises and ownership and add the dat was held:	es the license
8: Does any person other than the applicant(s) have any financial interest in this alcoholic beverage license applied for, or in the facility to be conducted under the current license?	□ YES ■ NO
If YES, state name and the financial interest owned:	

#### **SECTION 10: CERTIFICATES AND SIGNATURES**

21. CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she has is a resident and taxpayer of the State of Maryland; and further certifies that no manufacturer, brewer, distiller or wholesaler has any financial interest, directly or indirectly, in the premises or facility of the applicant; that the applicant will not hereafter convey or grant to such manufacturer, brewer, distiller, or wholesaler any such interest; and that the applicant at the time of making this application has no indebtedness or other financial obligation and will not hereafter incur any such indebtedness or financial obligation to any manufacturer, brewer, distiller, or wholesaler.

Each of said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as, to the rules and regulations of the Board of License Commissioners for Montgomery County, and herby grants permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoin	g document ar
true and direct to the best of my knowledge, information, and belief."	
1/0.0000000	

(A)	
Signature of Applicant	
(B)	
Signature of Applicant	
(C)	
Signature of Applicant	

(D)

(FOR CORPORATION APPLICATIONS ONLY) Corporate President Signature

22. CERTIFICATE OF PROPERTY OWNER: I hereby certify that I am the owner of the property named in the foregoing application for an alcoholic beverage license and that I hereby consent to the use of the said property for the sale thereon of such alcoholic beverages as may be permitted by law, and I do hereby grant permission to the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officer of Montgomery County to inspect and search at any and all hours, without warrant, the premises and any and all parts thereof upon and in which said facility is to be conducted.

Affidavit:

Affidavit:

"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."

Signature of the Property Owner

Printed Name of Property Owner

Address of Property Owner

Dr. S.S. MD 20904

Phone of Property Owner