

State of Arizona
Department of Liquor Licenses and Control

Created 10/20/2022 @ 10:47:33 AM

Local Governing Body Report

LICENSE

Number:	Type:	007 BEER AND WINE BAR
Name:	SILO	
State:	Pending	
Issue Date:	Expiration Date:	
Original Issue Date:		
Location:	12351 E BRADSHAW MOUNTAIN ROAD CLUBHOUSE PRESCOTT VALLEY, AZ 86327 USA	
Mailing Address:	2600 N CENTRAL AVENUE #1775 PHOENIX, AZ 85004 USA	
Phone:	(602)200-7222	
Alt. Phone:		
Email:	ANDREA@LEWKLaw.COM	

AGENT

Name:	ANDREA DAHLMAN LEWKOWITZ
Gender:	Female
Correspondence Address:	2600 N CENTRAL AVENUE #1775 PHOENIX, AZ 85004 USA
Phone:	(602)200-7222
Alt. Phone:	
Email:	ANDREA@LEWKLaw.COM

OWNER

Name: NLP HOMES, INC
Contact Name: ANDREA LEWKOWITZ
Type: CORPORATION
AZ CC File Number: 08331908 State of Incorporation: AZ
Incorporation Date: 02/26/1998
Correspondence Address: 2600 N CENTRAL AVENUE
#1775
PHOENIX, AZ 85004
USA
Phone: (602)200-7222
Alt. Phone:
Email: ANDREA@LEWKLAW.COM

Officers / Stockholders

Name:	Title:	% Interest:
DAVID WESLEY GROUNDS	Director/Pres/CEO/Shareholder	50.00

NLP HOMES, INC - Director/Pres/CEO/Shareholder

Name: DAVID WESLEY GROUNDS
Gender: Male
Correspondence Address: 2600 N CENTRAL AVENUE
#1775
PHOENIX, AZ 85004
USA
Phone: (520)975-8467
Alt. Phone:
Email: DAVE@GREATSTREETCO.COM

APPLICATION INFORMATION

Application Number: 213907
Application Type: New Application
Created Date: 10/18/2022

QUESTIONS & ANSWERS

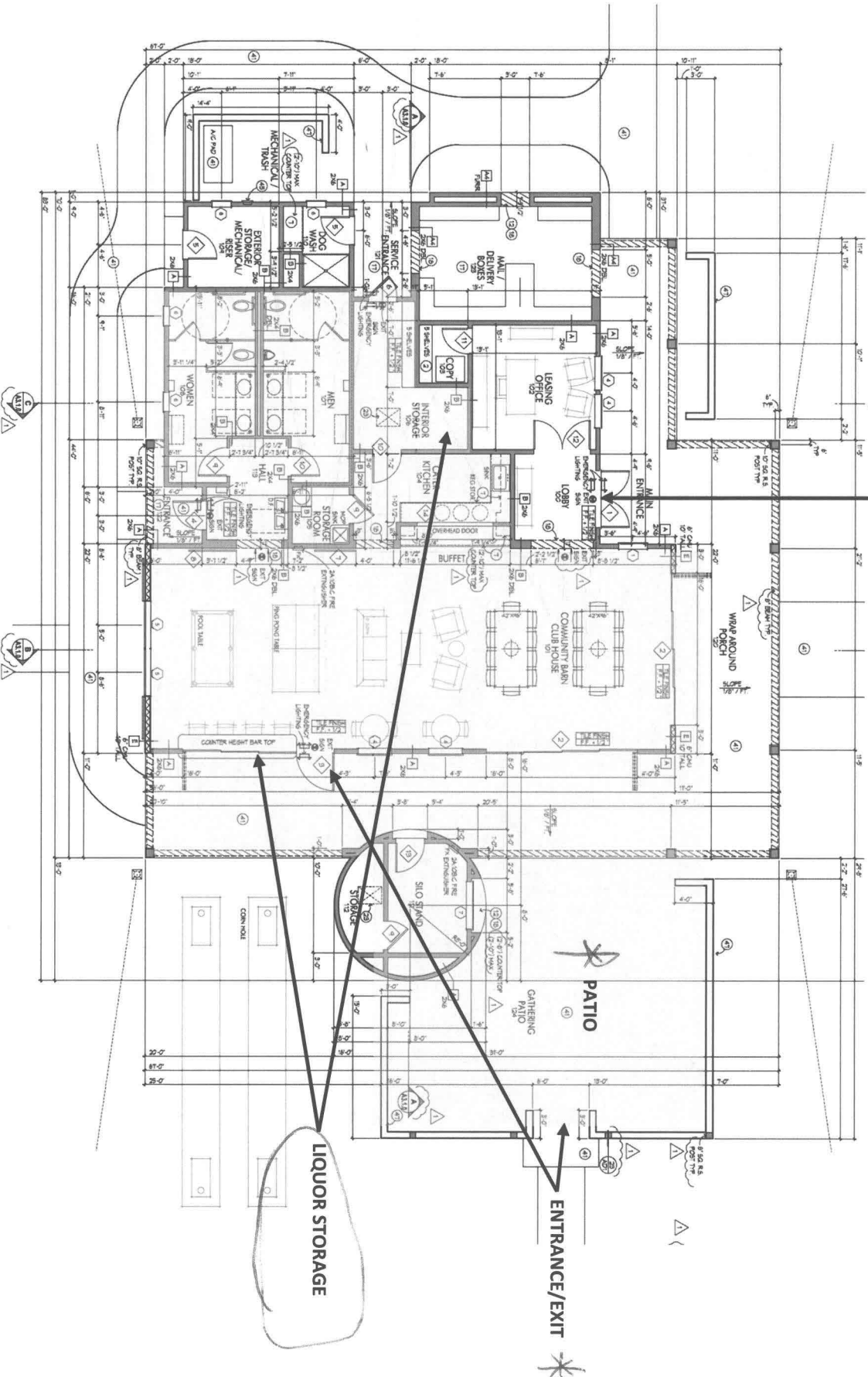
007 Beer and Wine Bar

- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Provide name, address, and distance of nearest school.
(If less than one (1) mile note footage)
BRADSHAW MOUNTAIN MIDDLE SCHOOL- 1 MILE
12255 E TURQUOISE CIR DEWEY, AZ 86327
- 3) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
Property Tenant
- 4) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
TERMINATION & MONETARY PENALTIES
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 6) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
0
- 7) Are there walk-up or drive-through windows on the premises?
No
- 8) Does the establishment have a patio?
Yes
Is the patio contiguous or non-contiguous (within 30 feet)?
CONTIGUOUS PATIO
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
N/A - NEXT SEVERAL MONTHS

(2030 SF)

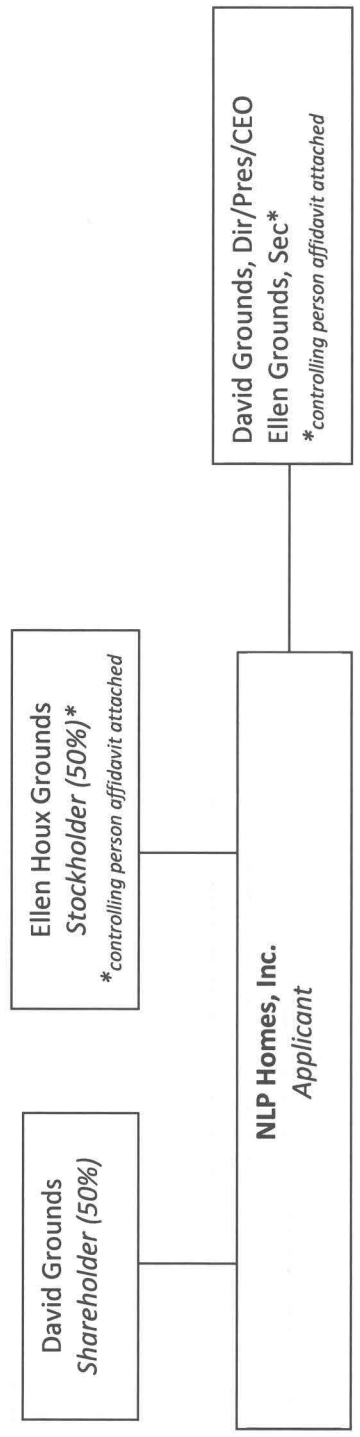
ENTRANCE/EXIT

LIQUOR STORAGE



22 OCT 17 AM 9:56 AZMLLC

NLP Homes, Inc
Ownership chart
09/27/2022





Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

DLIC USE ONLY

Job #	213902
Date Accepted:	10/20/22
CSR:	CS

2021 LOTTERY APPLICATION

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- ☒ New License
☐ Interim Permit

Entry #: LL2013070007

SECTION 2 Type of Ownership

- ☐ J.T.W.R.O.S.
☐ Individual
☐ Partnership
☒ Corporation
☐ Limited Liability Co
☐ Club
☐ Government
☐ Trust
☐ Tribe
☐ Other (Explain) _____

SECTION 3 Type of License

License # PENDING | SERIES 7 # 213902

1. Type of License (series 6, 7, or 9): Beer and Wine Bar

SECTION 4 Applicants

1. Agent/Individual Name: LEWKOWITZ ANDREA DAHLMAN
Last First Middle
2. Entity/Owner Name: NLP HOMES, INC. (fka DORN HOMES, INC.)
(Ownership name for type of ownership checked in section 2, not including individual)
3. Business Name (Doing Business As-DBA): SILO
4. Business Location Address: 12351 E BRADSHAW MOUNTAIN RD, CLUBHOUSE, PRESCOTT VALLEY 86327, YAVAPAI
(Do not use PO Box) Street City State Zip Code County
5. Mailing Address: 2600 N. CENTRAL AVENUE, #1775 PHOENIX AZ 85004
(All correspondence will be mailed to this address) Street City State Zip Code
6. Business Phone: PENDING Daytime Contact Phone: (602) 200-7222
7. Email Address: ANDREA@LEWKLAW.COM
8. Is the Business located within the incorporated limits of the above city or town? ☒ ☒ ☒
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located? _____

Department Use Only

Fees: 100 Application Interim Permit 22 Finger Prints \$ 102.25 Total of All Fees

Is Arizona Statement of Citizenship & Alien Status for State Benefits complete? ☒ Yes ☐ No

SECTION 5 Interim Permit

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. §4-203.01.

For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. §4-203.01(A)

1. Enter license number currently at the location: _____
2. Is the license currently in use? ☐ Yes ☐ No If no, how long has it been out of use? _____

NOTARY

I (Print Full Name) _____ hereby declare that I am the Current Owner, Agent, or Controlling Person on the stated license and location.

Signature: _____ State of _____ County of _____
The foregoing instrument was acknowledged before me this

My Commission Expires on: _____ Date _____ Day _____ Month _____ Year _____

Signature of Notary

SECTION 6 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. If the applicant is an entity, and not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 02/25/1998 State where Incorporated/Organized: ARIZONA

b) AZ Corporation or AZ L.L.C. File No: 08331908 Date authorized to do business in AZ: 02/26/1998

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed. Disclose all controlling persons, and members, shareholders or general partners who own a beneficial interest of 10% or more of the applicant or licensee.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
SEE ATTACHED								

(Attach additional sheet if necessary)

~ SECTIONS 7 THROUGH 10 OMITTED (Do not apply to lottery application) ~

SECTION 11 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S. §4-207. (A) and (B) state that no **retailer's license** shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12), or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

SECTION 11 Continued

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S. §4-205.02) Series 12
- b) Hotel/motel license (A.R.S. §4-205.01) Series 11
- c) Microbrewery (A.R.S. §4-205.08) Series 03
- d) Craft Distillery (A.R.S. §4-205.10) Series 18

- e) Government license (A.R.S. §4-205.03) Series 05
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 04
- h) Farm Winery Series 13
- i) Producer Series 01

1. Distance to nearest School: 1 MILE
(If less than one (1) mile, note footage)

Name of School: BRADSHAW MOUNTAIN MIDDLE SCHOOL

Address: 12255 E TURQUOISE CIR, DEWEY, AZ 86327

2. Distance to nearest Church: 3,100 FT
(If less than one (1) mile, note footage)

Name of Church: MISSION SANTA MARIA CHAPEL

Address: 12028 E TORQUISE CIR, DEWEY, AZ 86327

SECTION 12 Business Financials A.R.S. §4-202(F)

1. I am the:

- ☒ Tenant: **a person who holds the lease of a property; a lessee.**
- ☐ Sub-tenant: **a person who holds a lease which was given to another person (tenant) for all or part of a property.**
- ☐ Owner
- ☐ Purchaser
- ☐ Management Company

2. If the premises is leased give lessors:

Name: GS1 OPERATING COMPANY LLC

Address: 600 W GURLEY ST STE 100, PRECOTT AZ 86305-3630

3. What is the penalty if the lease is not fulfilled? \$ TERMINATION or Other: MONETARY PENALTIES

4. Total money borrowed for the Business, not including lease: \$ 0.00

Please List Below Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip

(Attach additional sheet if necessary)

SECTION 13 Diagram of Premises

Check ALL boxes that apply to your business:

- ☐ Walk-up or drive-through windows
- ☒ Patio: Contiguous
- ☐ Patio: Non-Contiguous within 30 feet

1. What type of business will this license be used for? (be Specific) BAR

2. **Please attach a diagram of the premises**, which clearly shows only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and kitchen.

DO NOT INCLUDE

3. Parking lots, living quarters or areas where business is not conducted under this liquor license. Please identify which orientation is North on the diagram.
4. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

ATTACH DIAGRAM

IMPORTANT NOTE: As stated in A.R.S. §4-207.01 (B), it is the licensee's responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.

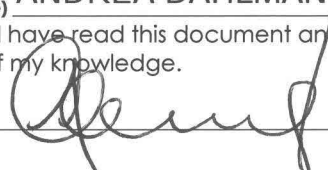

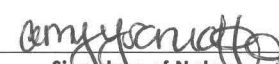
RESTAURANTS AND HOTELS/MOTELS ONLY

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. A \$50.00 fee for the inspection will be due and payable upon submitting this application.)

5a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture. These are required as part of the diagram. A.R.S. §4-205.02(C)

5b. Provide a restaurant operation plan.

SECTION 14 SIGNATURE BLOCK

NOTARY			
<p>I (Print Full Name) <u>ANDREA DAHLMAN LEWKOWITZ</u> hereby declare that I am the Owner/Agent filing this application. I have read this document and verify the contents and all statements are true, correct and complete to the best of my knowledge.</p>			
<p>Signature: <u></u></p>	<p>State of <u>ARIZONA</u> County of <u>MARICOPA</u></p>		
<p>The foregoing instrument was acknowledged before me this</p>			
<p>My Commission Expires on: <u>02/12/2025</u></p>	<p><u>27</u> Day of <u>SEPTEMBER</u>, <u>2022</u></p>	<p>Month Year</p>	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">  <p>AMY L. SCHROFF Notary Public - Arizona Maricopa County My Commission Expires 02/12/2025 Commission # 585847</p> </div>		<p><u></u></p> <p>Signature of Notary</p>	

A.R.S. §41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. This section may be enforced in a private civil action and relief may be awarded against the State, the court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the State for a violation of this section.

E. A State employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy.

F. This section does not abrogate the immunity provided by Section 12-820.01 OR 12-820.02.



APPLICANT/CONTROLLING PERSON AFFIDAVIT

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

Type or Print with **Black Ink**

**BE COMPLETED BY THE ORGANIZATION'S PRESIDENT. IF THIS IS A CLUB, PARTNERSHIP,
OR OTHER TYPE OF ORGANIZATION, A SIGNATURE OF EQUAL LEVEL IS REQUIRED.**

Organization: NLP HOMES, INC.
 Affidavit of: DAVID WESLEY GROUNDS
 Position/Title: SHAREHOLDER / DIRECTOR / PRES / CEO
 State of: ARIZONA AZ Corp./L.L.C. #: 08331908
 County of: MARICOPA State Incorporated: ARIZONA
 I, (Print Full Name) DAVID WESLEY GROUNDS Declares:

1. To obtain a liquor license to operate in Arizona, I have completed and delivered to the Arizona Dept. of Liquor Licenses and Control, the required questionnaire and fingerprint card. I have also submitted the required questionnaires and fingerprint cards of all officers, directors, regional managers, managing members, partners, etc., who are involved in the management of the policies involving spirituous liquor in the State of Arizona; and all stockholders who own ten percent (10%) or more of the corporation or limited liability company have also been completed and submitted.

Name and title of such individuals are as follows (or list attached):

- 1) DAVID GROUNDS, SHAREHOLDER / DIRECTOR / PRES / CEO
- 2) _____
- 3) _____
- 4) _____

2. In addition to those submitting questionnaires and fingerprint cards, list other officers, limited liability members, and/or board members of this organization who are not submitting such information to the Arizona Department of Liquor Licenses and Control. None of these individuals are involved in the direction of the management of policies of this organization involving spirituous liquor in the State of Arizona.

Such members and positions, along with date and place of birth, are as follows (or list attached):

- 1) ELLEN HOUX, SHAREHOLDER / SECRETARY I DOB: 09/25/1967 I POB: Warrensburg, MO
- 2) Grounds
- 3) _____
- 4) _____

3. Finally, on information and belief, none of the individuals listed under item #2 have at any time been convicted of a felony, had a liquor license revoked, or violated any provisions of a liquor license issued to that member.

Declaration:

I, (Print Name) DAVID WESLEY GROUNDS, declare under penalty of perjury that I am authorized to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

David Wesley Grounds
Signature



22 OCT 17 AM 9 57 AZDLLC

2600 North Central Avenue
Suite 1775
Phoenix, Arizona 85004
602.200.7222
602.200.7234
www.lewkowitzlaw.com

Andrea D. Lewkowitz
H.J. Lewkowitz

andrea@lewklaw.com

October 4, 2022

AZ Dept. of Liquor Licenses & Control
Attn: Ms. Jennifer Benson
800 W. Washington, Fifth Floor
Phoenix, AZ 85007

Re: NLP Homes, Inc. | Pending Lottery Application | Entry #LL2013070007
Premises Manager

Dear Jennifer:

On behalf of applicant, NLP Homes, Inc. dba Silo, we request the department process its series 7 liquor license application without a premises manager's disclosure documents. The business is not currently open and the proposed licensed premises will be under construction for several months. Applicant will not hire an individual to serve as the premises manager until construction is near completion. We will file the manager's documents as soon as he/she is hired.

Sincerely,


Andrea D. Lewkowitz

'22 OCT 18 11:47 AM 8:50

**AMENDMENT TO
ARTICLES OF INCORPORATION OF
DORN HOMES, INC.**

This Amendment to Articles of Incorporation ("Amendment") is filed with the Arizona Corporation Commission by DORN HOMES, INC., an Arizona corporation (the "Corporation"), pursuant to A.R.S. §10-1006.


1. The name of the Corporation is DORN HOMES, INC.
2. Article I of the Articles of Incorporation of the Corporation is amended to read as follows:

The name of this corporation is NLP HOMES, INC.

3. Except as provided above, all other articles shall remain unchanged.
4. This Amendment was duly adopted on the 18th day of March, 2021.
5. The shareholders of the Corporation approved this Amendment. The Corporation has 100 shares of Common Stock outstanding and 100 shares of Common Stock voted to approve this Amendment.

IN WITNESS WHEREOF, the foregoing Amendment to the Articles of Incorporation of DORN HOMES, INC. is hereby executed and effective March 18, 2021.

DORN HOMES, INC., an Arizona
corporation

By: 
David W. Grounds, President/CEO

*22 OCT 18 11:49. L.C. AM 8 50

ARTICLES OF AMENDMENT OF FOR-PROFIT CORPORATION

ENTITY INFORMATION

ENTITY NAME: NLP HOMES, INC.
ENTITY ID: 08331908
ENTITY TYPE: Domestic For-Profit (Business) Corporation
PERIOD OF DURATION: Perpetual
CHARACTER OF BUSINESS: CONSTRUCTION
AUTHORIZED SHARES: Share Class: COMMON Share Series: Share Total: 1000000.00

FORMER ENTITY NAME DORN HOMES, INC.

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: JOHNNY N HELENBOLT
PHYSICAL ADDRESS: 3430 E SUNRISE DR SUITE 200 , TUCSON, AZ 85718
MAILING ADDRESS: 3430 E SUNRISE DR SUITE 200 , TUCSON, AZ 85718

KNOWN PLACE OF BUSINESS

Att: ELLEN CARPENTER, 600 WEST GURLEY STREET SUITE 100 , PRESCOTT, AZ 86305

PRINCIPAL INFORMATION

COO (Chief Operating Officer): ELLEN J CARPENTER - 600 W GURLEY STREET SUITE 100, PRESCOTT, AZ, 86305, USA - - Date of Taking Office: 11/02/2007

Director: DAVID W GROUNDS - 600 W GURLEY STREET SUITE 100, PRESCOTT, AZ, 86305, USA - - Date of Taking Office: 02/25/1998

President/CEO: DAVID W GROUNDS - 600 W GURLEY STREET SUITE 100, PRESCOTT, AZ, 86305, USA - - Date of Taking Office: 02/25/1998

Secretary: ELLEN H GROUNDS - 600 W GURLEY STREET SUITE 100, PRESCOTT, AZ, 86305, USA - - Date of Taking Office: 02/25/1998

Shareholder: DAVID W GROUNDS - NOT REQUIRED, NOT REQUIRED, XXXXX, - - Date of Taking Office: 12/31/9999

Shareholder: ELLEN HOUS - NOT REQUIRED, NOT REQUIRED, XXXXX, - - Date of Taking Office: 12/31/9999

ADOPTION AND VOTE

ADOPTION DATE:	03/18/2021
Does the amendment provide for an exchange, reclassification or cancellation of issued shares?	NO
Does the amendment contain provisions for implementing the exchange, reclassification or cancellation of issued shares?	NO
Approved by incorporators or board of directors without shareholder action, and shareholder approval was not required, or no shares have been issued	NO
Approved by shareholders but not by voting groups	YES
Approved by shareholders and voting groups	NO

22 OCT 18 11:47 AM 8 50

Approved by voting group(s) only

NO

ISSUED SHARES

Share Class: COMMON Share Series: Share Total: 1000.00

Share Class: COMMON Share Series: Share Total: 1000.00

Share Class: COMMON Share Series: Share Total: 1000.00

Share Class: COMMON Share Series: Share Total: 1000.00

Share Class: Common Share Series: Share Total: 100

SHAREHOLDER APPROVAL**Total votes entitled to be cast:**

100

Votes in favor that were sufficient for approval of amendments:

100

Votes against amendments:

0

SIGNATURE

Officer: David W Grounds - 03/18/2021

CSR:

Amount:



AGENT/CONTROLLING PERSON QUESTIONNAIRE

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

DLLC USE ONLY

Job #:	213902
Date Accepted:	10/20/22
CSR:	CA

Type or Print with Black Ink

License Number: PENDING - LOTTERY LICENSE

ATTENTION APPLICANT: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information will be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED ACCORDINGLY AND SUBMITTED TO THE DEPARTMENT WITH A BLUE OR BLACK LINED FINGERPRINT CARD AND \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE.

1. Check the
Appropriate
Box →



Agent



Controlling Person

2. Name: LEWKOWITZ ANDREA DAHLMAN Birth Date: [REDACTED]
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Drivers License #: [REDACTED] State Issued: ARIZONA

4. Place of birth: MANKATO MN USA Height: 5'8" Weight: 140 Eyes: HZL Hair: BLN
City State COUNTRY

5. Name of current/most recent spouse: LEWKOWITZ HAROLD JEROME Birth Date: [REDACTED]
Last First Middle (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes ☒ No ☐ If yes, what is your date of residency? 04/1961

7. Daytime telephone number: (602) 200-7222 Email address: ANDREA@LEWKLAW.COM

8. Premises Name: SILO Business Phone: PENDING

9. Premises Address: 12351 E BRADSHAW MOUNTAIN RD, CLUBHOUSE, PRESCOTT VALLEY, AZ YAVAPAI 86327
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years, if unemployed, retired, or student, list place of residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
01/2004	CURRENT	ATTORNEY	LEWKOWITZ LAW OFFICE PLC
			2600 N. CENTRAL AVE. STE. 1775
			PHOENIX, AZ 85004

(ATTACH ADDITIONAL SHEET IF NECESSARY)

11. Provide your residence address information for the last five (5) years A.R.S. §4-202(D)

FROM Month/Year	To Month/Year	Street	City	State	Zip
02/1999	CURRENT	5745 N. 25th STREET, PHOENIX, AZ 85016			

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises? If you answered YES, then answer #13 below. If NO, skip to #14 Yes ☐ No ☒
13. Have you attended a DLLC approved Basic Liquor Law Training Course within the past 3 years? Yes ☐ No ☐
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? Yes ☐ No ☒
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summons pending against you? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 Yes ☐ No ☒
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes ☐ No ☒
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes ☐ No ☒
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes ☐ No ☒

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions.

CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

I, (Print Full Name) ANDREA DAHLMAN LEWKOWITZ, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature:  Date: 10/03/2022



ALIEN STATUS RESTAURANT/HOTEL/MOTEL

Arizona Dept. of Liquor Licenses and Control
800 W. Washington St. 5th Floor Phoenix, AZ 85007
(602) 542-5141

Type or Print with Black Ink

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

APPLICANT NAME (Print or type) ANDREA DAHLMAN LEWKOWITZ

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? ☒ Yes ☐ No - If **yes**, indicate place of birth:

City MANKATO State MN COUNTRY USA

If you answered **Yes, 1)** Attach a legible copy of a document from the list below.

2) Name of document: AZ DRIVERS LICENSE

If you answered **No**, you must complete Sections III.

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after Jan. 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

SECTION III – QUALIFIED ALIEN DECLARATION

Applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Name of document provided

Qualified Alien Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- ☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- ☐ 2. An alien who is granted asylum under Section 208 of the INA.
- ☐ 3. A refugee admitted to the United States under Section 207 of the INA.
- ☐ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- ☐ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- ☐ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- ☐ 7. An alien who is a Cuban/Haitian entrant.
- ☐ 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non-immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- 13. A foreign national not physically present in the United States.
- 14. **Otherwise Lawfully Present**
- 15. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. §

ANDREA DAHLMAN LEWKOWITZ

Print Name



Signature

10/03/2022

Date

*22 OCT 17 AM 9:57 AZDLLC

ARIZONA

Driver License

Number [REDACTED]

Expires

12/27/2025

Date of Birth [REDACTED]

Issued

11/30/2006

ANDREA DAHLMAN LEWKOWITZ
5745 NORTH 25TH STREET
PHOENIX AZ 85016-8644

Class D Sex F
Eyes HAZ Height 5-07
Hair BN Weight 135

Andrea Lewkowitz





Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

QUESTIONNAIRE
 A.R.S. §4-202, 4-210
 Type or Print with Black Ink

The fees allowed by R19-1-102 will be charged for all dishonored checks.

ATTENTION APPLICANT: This is a legally binding document. Please type or print in black ink. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License #: 213 902

1. Check the Appropriate Box →

☒ Controlling Person

☐ Agent

☐ Premises Manager

(complete all questions except #12)

2. Name: DAVID WESLEY Birth Date: [REDACTED]
Last First Middle (NOT a public record)

3. Social Security [REDACTED] Driver License [REDACTED] State: ARIZONA

4. Place of birth: ALBANY GEORGIA USA Height: 5'09" Weight: 162 Eyes: BRO Hair: BRO
City State COUNTRY (not county)

5. Name of current/most recent spouse: ELLEN HOUS Birth Date: [REDACTED]
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? ☒ Yes ☐ No If yes, what is your date of residency: JAN 1991

7. Daytime telephone number: 520-975-8467 E-mail address: dave@greatstreetco.com

8. Business Name: SILO Business Phone: PENDING

9. Business Location Address: 12351 E BRADSHAW MOUNTAIN RD, CLUBHOUSE, PRESCOTT VALLEY, YAVAPAI 86327
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years. If unemployed, retired, or student, list residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
03/2021	CURRENT	MANAGING MEMBER	GROUNDS PROPERTIES LLC, 6803 E MAIN STREET UNIT 6602 SCOTTSDALE, AZ 85251
01/2021	CURRENT	PRESIDENT & CEO	ASH-DORN LLC 6803 E MAIN STREET UNIT 6602 SCOTTSDALE, AZ 85251
12/1998	JAN/2021	PRESIDENT & CEO	DORN HOMES, INC - BUSINESS IS NO LONGER ACTIVE 22403 S. 215TH PLACE, QUEEN CREEK, AZ 85142

(ATTACH ADDITIONAL SHEET IF NECESSARY)

11. Provide your residence address information for the last five (5) years: *A.R.S. §4-202(D)*

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
10/2017	CURRENT	6803 E MAIN ST #6602, SCOTTSDALE, AZ 85251

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. If NO, skip to #14. ☐ Yes ☒ No
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? ☐ Yes ☐ No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? ☐ Yes ☒ No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses pending against you? (Do not include civil traffic tickets.) *A.R.S. §4-202, 4-210* ☐ Yes ☒ No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? ☐ Yes ☒ No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? *A.R.S. §4-202(D)* ☐ Yes ☒ No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? *A.R.S. §4-202(D)* ☐ Yes ☒ No

If you answered "YES" to any Question 14 through 18 **YOU MUST** attach a **signed statement**.
Give complete details including dates, agencies involved and dispositions.

CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

NOTARY

I (Print Full Name) David W Grounds hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: [Signature]State of ARIZONA County of MARICOPA

The foregoing instrument was acknowledged before me this

My Commission Expires on:

4-18-265TH

Day

Day of

Month

2022

Year



ERIC HINDLE
NOTARY PUBLIC - ARIZONA
MARICOPA COUNTY
COMMISSION # 627144
MY COMMISSION EXPIRES
APRIL 18, 2026

[Signature]
Signature of Notary

The Licensee has authorized the person named on this questionnaire to act as manager for the above License.

PRINT NAME: _____ SIGNATURE: _____