



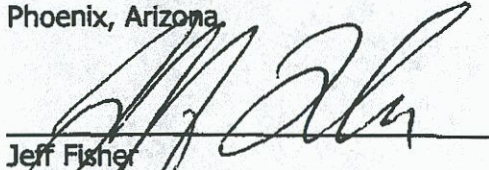
LIQUOR LICENSE APPROVAL

**CITY OF SCOTTSDALE
COUNTY OF MARICOPA, ARIZONA
STATE APPLICATION NO. 12075481
CITY NO. 28-LL-2003**

At the regular meeting of the City of Scottsdale held on June 3, 2003, the application of Todd Taylor for a license to sell spirituous liquors, at the premises described in his/her Application No. 12075481, was considered, as provided by Title 4, A.R.S., as amended.

IT IS THEREFORE ORDERED that the application of Todd Taylor be, and the same is, hereby recommended for approval, a license to sell spirituous liquors of the class, and in the manner, designated in his/her Application No. 12075481 by Series 12.

IT IS FUTHER ORDERED that a Certified Copy of this Order be immediately transmitted to the Department of Liquor Licenses and Control, Phoenix, Arizona.



Jeff Fisher
Plan Review & Permit Services Director
City of Scottsdale

6-4-03

Date

Curtis, Nicole D

From: Matthews, Vicki
Sent: Monday, April 14, 2003 9 58 AM
To: Curtis, Nicole D
Subject: RE New Liquor License Application Pasta Bene 28-LL-2003

I have reviewed the state liquor license application for "Pasta Bene" and recommend approval

-----Original Message-----

From: Curtis, Nicole D
Sent: Friday, April 11, 2003 3.17 PM
To: Bennis, Sandi; Borin, Tom; Dave Ott; Fritz, Michael; Hancock, Brian; Loven, Gene; Matthews, Vicki; Sipos, Alice; Sobczuk, Tricia; Stricklin, Patricia; Toubus, Steve; Verschuren, Bill
Subject: New Liquor License Application: Pasta Bene 28-LL-2003

Attached is liquor license 28-L-2003. This is the only copy you will receive. This is a new license for an existing restaurant in Agua Caliente Shopping Center. Please respond as soon as possible.

Thanks
Nicole

Curtis, Nicole D

From: Kirklin, Gina
Sent: Wednesday, April 16, 2003 12:58 PM
To: Curtis, Nicole D
Subject: FW: New Liquor License Application Pasta Bene 28-LL-2003

No NSF's

-----Original Message-----

From: Sipos, Alice
Sent: Tuesday, April 15, 2003 3:06 PM
To: Kirklin, Gina
Subject: FW: New Liquor License Application: Pasta Bene 28-LL-2003

I do not show any delinquencies for Pasta Bene, Todd Clinton Taylor or TC Taylor, LLC.
Thank you, Alice Sipos, Accounting.

-----Original Message-----

From: Curtis, Nicole D
Sent: Friday, April 11, 2003 3:17 PM
To: Bennis, Sandi; Borin, Tom; Dave Ott; Fritz, Michael; Hancock, Brian;



Liquor_Application
DOC

Loven, Gene, Matthews, Vicki; Sipos, Alice; Sobczuk, Tricia, Stricklin,
Patricia; Toubus, Steve, Verschuren, Bill
Subject: New Liquor License Application. Pasta Bene 28-LL-2003

Attached is liquor license 28-L-2003. This is the only copy you will receive. This is a new license for an existing restaurant in Agua Caliente Shopping Center. Please respond as soon as possible.

Thanks
Nicole

**SCOTTSDALE POLICE DEPARTMENT
LIQUOR LICENSE APPLICATION CONTROL SHEET**

Application Type: NEW LICENSE

Series 12 Restaurant

Date Received: 04/17/03

Council Date:

Date Due: ASAP

Event Date: N/A

1) Stephen A. Toubus, SIS Intelligence Specialist Control Number 401442
Establishment/Special Event. **Pasta Bene**

2) **Det. Mike Fritz**

Comments

Recommendation: **No Opposition**

Signature *M. Fritz*

Date. 4/17/03

3) **Capt. Barry Vassal, District 2 Commander**

Comments none

Recommendation: **Approval**

Signature *Barry Vassall*

Date 04-18-03

4) **Deputy Chief John Cocca, USB**

Comments.

Recommendation: **Approval**

Signature *John Cocca #374*

Date 4/21/03

R19-1-102 Granting a License for a Certain Location

Local governing authorities and the Department may consider the following criteria in determining whether public convenience requires and that the best interest of the community will be substantially served by the issuance or transfer of a liquor license at a particular unlicensed location

1 Petitions and testimony from persons in favor of or opposed to the issuance of a license who reside in, own or lease property in close proximity

2 The number and series of licenses in close proximity

3 Evidence that all necessary licenses and permits have been obtained from the state and all other governing bodies

4 The residential and commercial population of the community and its likelihood of increasing, decreasing or remaining static

5 Residential and commercial population density in close proximity

6 Evidence concerning the nature of the proposed business, its potential market, and its likely customers

7 Effect on vehicular traffic in close proximity

8 The compatibility of the proposed business with other activity in close proximity

9 The effect or impact of the proposed premises on businesses or the residential neighborhood whose activities might be affected by granting the license

10 The history for the past five years of liquor violations and reported criminal activity at the proposed premises provided that the applicant has received a detailed report(s) of such activity at least 20 days before the hearing by the Board

11 Comparison of the hours of operation of the proposed premises to the existing businesses in close proximity

REVIEW SHEET

Application type **New License**
Name of Business. **Pasta Bene**
Address. **6990 E. Shea Blvd. Suite 101**
License Number **12075481**

DETAILS

This is an application for a new series 12 restaurant license. This is an existing location with a new license applicant. The applicant is T.C. Taylor LLC, which is one Todd Taylor who is going to be 100% owner. The current licensed applicant at this location is, Edward LaCapra, Agent, Arizona Seafood Inc., owner. The applicant has submitted all the proper paperwork. There is no derogatory information at this time that would prohibit the applicant from obtaining this license. The applicant was cited in 1996 for, Minor in Consumption while in a vehicle. He paid fine.

CONCERNS

None

Recommendation **No Opposition**

Reviewed By **Det. Mike Fritz**



CITY OF SCOTTSDALE LIQUOR APPLICATION QUESTIONNAIRE

Name of Business Pasta Bené
 Business Address 6990 E Shea Blvd. Ste 101 Scottsdale, AZ 85254
 Name of shopping center where business is located Agua Caliente
 If business is changing names, what was it formerly called? _____

PLEASE COMPLETE ALL QUESTIONS. (Use an N/A if the question does not apply to your business.)

Square footage of kitchen 2,000
 Total square footage of establishment 4,000 (+ 1,500 patio)
 Type of Business (bar, restaurant, grocery) bar/restaurant

Have you contacted the Community Development department to see if a Use Permit, DRB approval or other permits are required for this project? ☐ Yes ☒ No *If No, please do so today at (480) 312-2451*

Restaurant seating capacity 125 Bar Capacity 20 Total 145

For hotel restaurant applicants
 Is the restaurant owned/operated by the hotel or an independent operator? _____
 How many parking spaces are required per the Zoning Ordinance? _____
 Where are these parking spaces provided? _____
 (If you need help answering the parking space questions above, please contact Bill Verschuren at 480-312-7734)

Will this business feature Live Entertainment ☒ Patron Dancing ☐ Outdoor Dining ☒ Adult Entertainment ☐

What kind of entertainment? small group / single singer

Will this business sell automotive fuel? ☐ Yes ☒ No Will this business have a drive-through window? ☐ Yes ☒ No

Is this business under construction? ☐ Yes ☒ No Is this business being remodeled? ☐ Yes ☐ No

Is this business open? ☒ Yes ☐ No
 If "NO", what is the proposed opening date? as soon as possible
 If "YES", under what ownership? owned by T.C. Taylor, LLC

What are the hours of operation for this business? on closed, Tues-Thurs 11:30-9, Fri-Sat 11:30-10, Sun 11:30-9

Was there a previous business at this location? ☐ Yes ☒ No
 If "YES", what was the name and type of the previous business? _____

Was liquor sold at this location before this application? ☒ Yes ☐ No

When did liquor sales stop at this location? did not stop. Immediate transfer.

If this license is being moved, where is it coming from? _____

If a liquor license is currently at this location, what will be done with it? (Sold, inactive status, etc) 3 in 3 years
gave up license
(inactive)

Will there be games at this location? ☐ Yes ☒ No

If "YES", what kind? How many? _____

Is a complete detailed floor plan included, showing seating, stages, dance floor, dressing rooms, etc? ☐ Yes ☒ No
If "NO", please submit to Development Services as soon as possible

Do you now, or have you ever, held an interest in a liquor license in this or any other state? ☒ Yes ☐ No
If "YES", please list, giving complete details

Just this location in this state

City liquor license application applied for? # 12

City business license applied for? # _____



Date: April 11, 2003

To: Maricopa County Department of Health Services
Division of Public Health/Environmental Services Division
1001 N. Central Ave.
Suite 300
Phoenix, AZ 85004

From: City of Scottsdale, Development Services Division

The following business has applied for a state liquor license. Please complete the form below and return to the City of Scottsdale within 3 weeks of the date of this letter. Should no response be received by that date, it shall be deemed approved and added to the City Council Agenda. Thank you for your time and consideration in this matter.

Applicant Agent:	Business Name:
Todd Taylor	Pasta Bene
Business Address:	Business Phone:
6990 E. Shea Blvd. Suite 101 Scottsdale, AZ 85254	480-922-3474
Posting Date:	Tentative City Council Date:
4/14/03	6/3/03
City Case Number:	Series:
28-LL-2003	12(restaurant)

RECOMMENDATION: APPROVAL ☒ DENIAL ()

COMMENTS:

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Fisher".

Jeff Fisher
Plan Review & Permit Services Director

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

AFFIDAVIT OF POSTING

Date of Posting: 4-14-03

Date of Posting Removal: 5-5-03

Applicant Name: Taylor Todd Clinton
Last First Middle

Business Address: 6990 E. Shea Blvd #101 Scottsdale AZ 8
Street City Zip

License #: 12075481

I hereby certify that pursuant to A.R.S. § 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty(20) days.

Sita Barge Code Enforcement (40) 312-7032
Print Name of City/County Official Title Telephone #

S. Barge 4-14-03
Signature Date Signed

Return this affidavit with your recommendation (i.e., Minutes of Meeting, Verbatim, etc) or any other related documents.

If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

Individuals requiring special accommodations please call (602) 542-9051

City Council Agenda Planner



Meeting 6/3/03

Preliminary - For Planning Purposes Only

Meeting: 6/3/03 (Tuesday Council Mtg) . "Click" the "Brief Description" link to view / edit detail for any of listed agenda items. Click the "DELETE" link in the "Delete" column to delete the agenda item.

[Click here](#) to add a new agenda item.

[Click here](#) to view a print ready version of this page.

Category	Ord	Brief Description	Email	Delete
Logistical Information	1.	<u>Draft staff presentation materials; Provide ELECTRONIC ONLY version of PowerPoint to N.Lewis by Noon Wednesday, May 28th. Materials to be organized and provided to Council by CM's Office. ()</u>	●	
	2.	<u>Electronic version of reports and signed copies w/attachments due to Nancy Richards on Friday, May 16th. ()</u>	●	
	3	<u>4 p.m. EXEC SESSION -- Scottsdale National litigation. (Pennartz)</u>	●	
Boards, Commissions, & Task Forces	1.	<u>Bd. of Adjustment (1); Dev. Review Board (1); Library Board(1); Scottsdale Pride (2); Transportation (1) (Natalie Lewis)</u>	●	
Proposed Consent	1.	<u>24-LL-2003 New license for an existing hotel currently operating with an interim permit. Inn Suites, 7707 E. McDowell Rd. Series 11 (hotel/motel). (Fisher)</u>	●	
	2.	<u>25-LL-2003 Ayako of Tokyo, 7042 E. Indian School Rd. Existing restaurant that has changed ownership. Series 12 (restaurant). (Fisher)</u>	●	
	3.	<u>26-LL-2003 The Moody Brew, 8445 E. Harford Drive. Series 12 (restaurant) license for a new establishment. (Fisher)</u>	●	
	4.	<u>28-LL-2003 Pasta Bene, 6990 E. Shea Blvd., Suite 101. Series 12 liquor license for an existing restaurant in Agua Caliente Shopping Center (Fisher)</u>	●	
	5	<u>29-LL-2003 Circle K Store at 82nd and McDowell Formerly Kicks 66. Series 10 (beer and wine) license. (Fisher)</u>	●	
	6.	<u>30-LL-2003 Series 6 liquor license for new golf</u>		

- course, Mirabel Club, 37401 N. Mirabel Club Drive (Fisher)
7. 13-EX-2003 Frank & Lupes, 4121 N. Marshall Way. Permanent extension of premises (adding an outdoor patio). (Fisher)
 8. 1-AB-2003- Abandon a portion of 110th Place cul-de-sac located south of Cave Creek and east of 110th St. (Grant, Sumners)
 9. Consider approving additional money for the outside counsel contract with Lewis and Roca for Scottsdale National litigation. (Pennartz, Robberson)
 10. Consider approval of contingency funds transfer in the amount of approx. \$200k from the General Fund to the Attorney's Office legal services account to cover payment of outside counsel law firm costs through June 2003. (Pennartz, Mitchell)
 11. Consider renewing Intergov Agreement and legal svcs. contract with Engelman, Berger P.C., between cities of Scotts., Chandler, Glendale, Goodyear, Mesa and Peoria for joint representation in settlement of CAWCD vs. U.S. (Pennartz, Norman)
 12. Consider renewal of legal svcs. w/firm of Van Wagner and Erhart, in connection with negotiation and preparation of redev. agreement for the former Los Arcos Mall site. (Pennartz)
 13. Consider renewal of legal svcs. contract with Ayers & Brown re: City vs. Phillip P. Lovell, an eminent domain action to acquire property in the Preserve. (Pennartz)
 14. Approve annual contract with Scottsdale Convention and Visitors Bureau for City's tourism marketing efforts. (Roderique, OConner)
 15. Approve annual contract with Greater Phx. Economic Council for City's participation in regional economic development marketing efforts. (Roderique)

**Proposed
Regular**

1. EMSD--review City contracts with Cramer-Krasselt (C-K) and Downtown Scotts. Partnership (DSP), including 02-03 District update from C-K and DSP officials, and review downtown marketing program for 2003-04. (Ed Gawf, Sahler Hornbeck)
2. Strengthening massage licensing regulations (Bronski)



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Thank you for visiting our site

WELCOME TO THE SCOTTSDALE CITY COUNCIL MEETING

Tuesday, June 3, 2003



The Scottsdale Mayor and City Council thank you for your interest in local issues and in Scottsdale City government. If you have questions about when or how the Council conducts meetings, please contact the City Clerk's Office at (480) 312-2412. Here is a brief description of the procedures during the meeting and how you may participate.

HOW TO PARTICIPATE

- The Council receives public testimony during regular or special public meetings. Typically, the Council does not take public testimony during "work study sessions." These sessions are less formal (i.e., no action is taken), rather the Council hears reports from commissions, city staff or others specifically invited to speak. Work/study sessions are open to the public and are televised on City Cable 11 like regular and special public meetings.

IF YOU WISH TO SPEAK AT A PUBLIC MEETING

- For Consent Agenda, Regular Agenda or Public Hearing items. Please fill out a comment card. The cards are available from the City Clerk's table. To give everyone a fair chance to speak, please turn in your card before the Council begins hearing the item you wish to address. Each speaker has up to 3 minutes.
- For subjects not listed on the agenda. You may speak to the Council under Public Comment at the beginning or the end of each public meeting; each speaker has up to three minutes. Public Comment at the beginning of the meeting is limited to a total of 15 minutes.
- Written comments may be submitted on comment cards. The City Clerk will give them to the Mayor and Council for their review during the meeting. Your written comments will also be filed as part of the official public record.
- If you want someone to speak for your group: Please submit together all the cards of the group and the designated speaker. The Mayor will allot additional time to speakers representing several citizens.

WHEN YOU SPEAK

- The Mayor will call your name when it is your turn to speak. Often, the Mayor will read several names to give you notice that your turn is coming up.
- Adjust the microphone so that it is pointed at your mouth, speak clearly, and begin by stating your name and address.
- Limit your remarks to three minutes. A light system at the lectern will help you pace your remarks. A green light stays on until you reach the final minute, when a yellow light comes on. Please conclude your remarks when the red light comes on. Please focus on new or unique information that other speakers have not covered.

WHEN AND WHERE THE COUNCIL MEETS

Generally, the Council holds regular public meetings on the first and third Tuesday of each month, and on the Mondays preceding those Tuesdays. However, the precise schedule each month does vary, depending on holidays, elections, etc. Therefore, tentative City Council meeting dates for the current calendar year are available on the City's Internet website at www.ScottsdaleAZ.gov/council. Or, you may call the City Clerk's Office to verify meeting dates at (480) 312-2412.

Regular meetings and Work Study Sessions begin at 5:00 p.m. in the City Hall Kiva, 3939 N. Drinkwater Boulevard.

LENGTH OF MEETINGS

The Council begins no new items after 10 p.m., unless its members decide to make an exception to this rule. Items not heard on the current night's agenda will be heard at the beginning of the next available Council meeting, unless officially noted.

WHERE TO FIND AGENDAS

Agendas are available to the public at the Scottsdale Police Department, 9065 E. Via Linda, the Scottsdale Civic Center Library, 3839 N. Drinkwater Blvd., City Hall, 3939 N. Drinkwater Blvd., Mustang Library, 10101 N. 90th Street, and on the Internet at www.ScottsdaleAZ.gov/council approximately one week in advance of the meeting.

TO CONTACT THE CITY COUNCIL

Council Office phone (480) 312-2550

Council Office fax (480) 312-2738

E-Mail all Councilmembers at citycouncil@ci.scottsdale.az.us or go to www.ScottsdaleAZ.Gov/council to email them individually.

EXECUTIVE SESSION

The Mayor and Council may hold Executive Sessions immediately preceding, during and/or after the Council meetings. The specifics of the Executive Sessions and the State's open public meeting law are available at the City Clerk's office. All meetings are conducted in strict compliance with the Open Public Meeting Law of the State of Arizona.

SPECIAL NEEDS REQUESTS

Persons with a disability may request a reasonable accommodation such as sign language interpreter, by contacting the City Clerk's Office at 480-312-2412. Requests should be made 24 hours in advance or as early as possible to allow time to arrange accommodation.

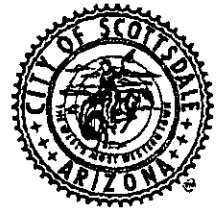
QUESTIONS

Call the clerk's office at (480) 312-2412 or the City Manager's Office at (480) 312-2422.

SCOTTSDALE

CITY COUNCIL MEETING

AGENDA



COUNCIL

Mary Manross, Mayor

Wayne Ecton

Robert W. Littlefield

Cynthia Lukas

Ned O'Hearn

David Ortega

Tom Silverman

Tuesday, June 3, 2003

4:00 P.M.

City Council Special Meeting to Call Executive Session

Call to Order – City Hall Kiva Forum, 3939 N Drinkwater Blvd.

Roll Call

- 1 MOTION TO RECESS INTO EXECUTIVE SESSION, FOR DISCUSSION OR CONSULTATION FOR LEGAL ADVICE AND TO CONSIDER THE CITY'S POSITION AND INSTRUCT ITS REPRESENTATIVES AND ATTORNEY(S) REGARDING DISCUSSION OR CONSULTATION WITH THE CITY'S ATTORNEY(S) AND ITS OUTSIDE COUNSEL FOR LEGAL ADVICE AND TO CONSIDER ITS POSITION AND INSTRUCT ITS ATTORNEYS REGARDING THE FOLLOWING PENDING LITIGATION: SCOTTSDALE 275, LLC vs CITY OF SCOTTSDALE, et al A.R.S. 38-431.03 (A)(3) AND (A)(4). (REQUESTED BY D. PENNARTZ)

Adjourn

City Council Executive Session

Immediately Following 4:00 P.M City Council Special Meeting

Call to Order – City Hall Kiva Conference Room

1. DISCUSSION OR CONSULTATION WITH THE CITY'S ATTORNEY(S) AND ITS OUTSIDE COUNSEL FOR LEGAL ADVICE AND TO CONSIDER ITS POSITION AND INSTRUCT ITS ATTORNEYS REGARDING THE FOLLOWING PENDING LITIGATION: SCOTTSDALE 275, LLC vs CITY OF SCOTTSDALE, et al. A.R.S. 38-431.03 (A)(3) AND (A)(4). (REQUESTED BY D PENNARTZ)

Adjourn

5:00 P.M.
CITY COUNCIL MEETING

Call to Order – City Hall Kiva Forum, 3939 N Drinkwater Boulevard

Roll Call

Public Comment

Citizens may complete one speaker/citizen comment card per night and submit it to the City Clerk before or during this evening's meeting. Please check the box that refers to "public comment." This "Public Comment" time is reserved for citizen comments regarding non-agendized items. No official Council action can be taken on these items.

CONSENT AGENDA ITEMS 1 - 14

-
1. **Inn Suites Hotels & Suites Liquor License**
 Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a series 11 (hotel) State liquor license for an existing hotel location.
 Location: 7707 E McDowell Rd
 Reference: 24-LL-2003
 Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jefisher@ScottsdaleAZ.gov

 2. **Ayako of Tokyo Liquor License**
 Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a series 12 (restaurant) State liquor license for an existing restaurant location.
 Location: 7042 E Indian School Rd
 Reference: 25-LL-2003
 Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jefisher@ScottsdaleAZ.gov
-

CONSENT AGENDA

Tuesday, June 3, 2003
Page 3 of 9

3. The Moody Brew Liquor License

Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a series 12 (restaurant) State liquor license.

Location: 8445 E Hartford Dr

Reference: 26-LL-2003

Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jeffisher@ScottsdaleAZ.gov

4. Pasta Bene Liquor License

Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a series 12 (restaurant) State liquor license for an existing location.

Location: 6990 E Shea Bl

Reference: 28-LL-2003

Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jeffisher@ScottsdaleAZ.gov

5. Circle K Store # 6347 Liquor License

Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a series 10 (beer/wine store) State liquor license for an existing convenience store location.

Location: 8202 E McDowell Rd

Reference: 29-LL-2003

Staff Contacts: Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jeffisher@ScottsdaleAZ.gov

6. Mirabel Club Liquor License

Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a person and location transfer of a series 6 (bar) State liquor license for a new golf course/club location.

Location: 37401 N Mirabel Club Dr

Reference: 30-LL-2003

Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jeffisher@ScottsdaleAZ.gov

7. Frank & Lupes Outdoor Courtyard Extension and Liquor License

Request: Consider forwarding a favorable recommendation to the Arizona Department of Liquor Licenses and Control for a permanent extension of premises for an outdoor courtyard serving area.

Location: 4121 N Marshall Wy

Reference: 13-EX-2003

Staff Contact(s): Jeff Fisher, Plan and Permit Services Interim Director, 480-312-7619, jeffisher@ScottsdaleAZ.gov

CONSENT AGENDA

Tuesday, June 3, 2003
Page 4 of 7

8. Modifying 110th Place Abandonment

Request: Consider the following:

- 1 Abandon a portion of 110th Place cul-de-sac
- 2 Dedicate a new 110th Place cul-de-sac
- 3 Adopt Resolution No. 6293 vacating and abandoning a portion of the public right of way.

Location: E Cave Creek Rd

Reference: 1-AB-2003

Staff Contact(s): Cheryl Sumners, Senior Planner, 480-312-7834, csumners@ScottsdaleAZ.gov

9. Contract for Legal Services in connection with *Scottsdale 275, LLC v. City of Scottsdale, et al*, Case No. CIV02-0041-PHX-MHM, pending in Arizona District Court.

Request: Adopt Resolution No. 6295 authorizing the Mayor to execute Contract No. 2002-032A-COS, legal services contract renewal in a maximum amount of One Hundred Thousand Dollars (\$100,000.00), with the law firm of Lewis and Roca, LLP for legal services regarding representation of the City of Scottsdale in the litigation entitled *Scottsdale 275, LLC v. City of Scottsdale, et al*

Related Policies, References: Resolution No. 6295; prior contract (No. 2002-032-COS) and Resolution 6043

Staff Contact(s): David A. Pennartz, City Attorney, dpennartz@scottsdaleaz.gov, Deborah W. Robberson, Deputy City Attorney, drobberson@scottsdaleaz.gov

10. An intergovernmental agreement between the cities of Scottsdale, Chandler, Glendale, Goodyear, Mesa and Peoria, and a legal services contract between those cities and the law firm of Engelman Berger, P.C., relating to joint legal representation in settlement activities in connection with the *CAWCD v. U.S.* litigation.

Request: Adopt Resolution No. 6300 authorizing the Mayor to enter into: (a) Eighth Intergovernmental Agreement No. 2003-108-COS, an agreement between the cities of Scottsdale, Chandler, Glendale, Goodyear, Mesa and Peoria, and (b) Agreement No. 2003-109-COS, a Contract for Legal Services among the aforementioned cities and the law firm of Engelman Berger, P.C., both relating to joint legal representation in settlement activities in connection with the *CAWCD v. U.S.* litigation.

Staff Contact(s): David Pennartz, dpennartz@scottsdaleaz.gov, (480) 312-2405; Paul Norman, pnorman@scottsdaleaz.gov, (480) 312-2405

11. Contract for Legal Services in connection with a proposed redevelopment agreement for Los Arcos.

Request: Adopt Resolution No. 6296 authorizing the Mayor to execute Contract No. 2003-101-COS, an outside counsel contract renewal in a maximum amount of Forty Thousand Dollars (\$40,000) with the law firm of VAN WAGNER & ERHART LLP for legal services regarding representation of the City of Scottsdale in a proposed redevelopment agreement for Los Arcos

Related Policies, References: Resolution No. 6296

Staff Contact(s): David A. Pennartz City Attorney, dpennartz@scottsdaleaz.gov; (480) 312-2405

CONSENT AGENDA

Tuesday, June 3, 2003
Page 5 of 7

12. **Contract for Legal Services in connection with City of Scottsdale v. Phillip P. Lovell, Superior Court Case No. CV2000-017992**
Request: Adopt Resolution No. 6297 authorizing the Mayor to execute Contract No. 2003-102-COS, an outside counsel contract renewal in a maximum amount of Fifty Thousand Dollars (\$50,000 00) with the law firm of AYERS & BROWN, P.C. for legal services regarding representation of the City of Scottsdale in the litigation entitled City of Scottsdale v Phillip P Lovell, Superior Court Case No CV2000-017992, an eminent domain action brought to acquire real property for McDowell Sonoran Preserve.
Related Policies, References: Resolution No. 6297
Staff Contact(s): Donna M. Bronski, Deputy City Attorney, dbronski@scottsdaleaz.gov, (480) 312-2405
13. **Approve annual contract with GPEC for economic development marketing**
Request: Adopt Resolution No. 6304 authorizing General Funds in the amount of \$83,806 for provision of regional economic development marketing services, and
Approve Contract No. 2003-107-COS with the Greater Phoenix Economic Council
Related Policies, References: Economic Vitality Strategic Plan, approved by Council 11/02
Staff Contact(s): David Rodenique, Economic Vitality General Manager, 480-312-7601, droderique@scottsdaleaz.gov
14. **Approve Industrial Development Refinancing Bonds for Scottsdale Healthcare**
Request: Adopt Resolution No. 6239 upholding the approval of the Scottsdale Industrial Development Board for the authorization of the issuance of up to \$40 million in Industrial Development Revenue Bonds to Scottsdale Healthcare for the refinancing of existing bonds; and, declare an emergency to enable Scottsdale Healthcare to sell these bonds immediately, thus avoiding possible interest rate changes
Staff Contact(s): David Rodenique, Economic Vitality General Manager, 480-312-7601, droderique@scottsdaleaz.gov

Regular Agenda begins on the following page

15. Updating Regulations for massage facilities, massage therapists and general provisions for licensing and permits

Request: Approve Ordinance No 3510, imposing new fees, adding annual fingerprinting and other updates to the massage therapist and facility regulations; and
Approve Ordinance No 3509, amending and updating the Article I of Chapter 16, relating to the general provisions for licenses and permits

Related Policies, References: Chapter 16 of the City Code, Licenses, Taxation, and Miscellaneous Business Regulations; Senate Bill 1103, effective May 13, 2003

Staff Contact(s): Captain Burl Haenel, District 1, bhaenel@scottsdaleaz.gov, (480) 312-7318,
Cindy James, Customer Services Director, Tax and License, cjames@scottsdaleaz.gov, (480) 312-5925,
Donna Bronski, Deputy City Attorney, dbronski@scottsdaleaz.gov, (480)312-2624

16. Annual review and update of Downtown Enhanced Municipal Services District No. 2.

Request: Adopt Resolution No. 6298 (Attachment A) to accomplish all of the following:

- 1 Reject any objections received to the legality of the assessments for Fiscal Year 2003-2004 for the Downtown Enhanced Municipal Services District No 2 as insufficient and without merit.
- 2 Establish at \$527,500 the amount of funds to be raised for District projects through assessments for Fiscal Year 2003-2004
- 3 Supplement the amount raised through assessments, by committing toward funding of enhanced municipal services within the District during Fiscal Year 2003-2004, an additional \$100,000 from the City's general fund.
- 4 Establish a Fiscal Year 2003-2004 budget for the District in the total amount of \$612,000 as detailed on Attachment B
- 5 Approve expenditure of \$97,000 in District funds under existing Contract No. 2002-100-COS with Downtown Scottsdale Partnership, Inc. for Fiscal Year 2003-2004.
- 6 Approve expenditure of \$500,000 in District funds under existing Contract No 2002-111-COS with Cramer-Krasselt for Fiscal Year 2003-2004,

Related Policies, References: On May 28, 2002, the Mayor and City Council adopted Resolution No. 6083 ordering the provision of enhanced municipal services within the Downtown Enhanced Municipal Services District No. 2, and providing for the annual costs and expenses to be assessed against the real property within the District for each of the next five years. On July 2, 2002, the Mayor and City Council adopted Resolution No 6112A adopting a budget for the Downtown Enhanced Municipal Services District for 2002-2003, and awarding contracts to Cramer-Krasselt for marketing services and promotion at a cost of \$500,000 and to Downtown Scottsdale Partnership for district administration at a cost of \$97,000

Staff Contact(s): Sahler Hornbeck, Downtown Liaison, 480-312-2394, shornbeck@scottsdaleaz.gov;
Laurel Edgar, Revitalization Manager, 480-312-7313, ledgar@scottsdaleaz.gov

REGULAR AGENDA

Monday, May 19, 2003

Page 7 of 7

Public Comment

Citizens may complete one speaker/citizen comment card per night and submit it to the City Clerk before or during this evening's meeting. This "Public Comment" time is reserved for citizen comments regarding non-agendized items. No official Council action will be taken on these items.

City Manager's Report

Mayor and Council Items

Adjournment

Executive Sessions authorized by Arizona Revised Statutes 38-431.03 in the Kiva Conference Room, City Hall, at 3:30 P.M., during or immediately following the 5:00 P.M. Meeting. Executive Sessions are posted at least twenty-four hours prior to such meetings.

Section 2.17 of the Scottsdale City Code states, "Regular Meetings that are scheduled to be conducted on consecutive days may be combined and held on either of the two (2) days, at the election of the council, and shall be considered a single meeting." The Council may hold over any items noticed on the Monday agenda to the agenda for the Tuesday meeting.

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

28' CC-2003

APPLICATION FOR LIQUOR LICENSE

TYPE OR PRINT WITH BLACK INK

Notice: Effective Nov 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years See page 5 of the Liquor Licensing requirements.

SECTION 1 This application is for a:

- ☐ INTERIM PERMIT Complete Section 5
- ☒ NEW LICENSE Complete Sections 2, 3, 4, 13, 14, 15, 16, 17
- ☐ PERSON TRANSFER (Bars & Liquor Stores ONLY)
Complete Sections 2, 3, 4, 11, 13, 15, 16, 17
- ☐ LOCATION TRANSFER (Bars and Liquor Stores ONLY)
Complete Sections 2, 3, 4, 12, 13, 15, 16, 17
- ☐ PROBATE/WILL ASSIGNMENT/DIVORCE DECREE
Complete Sections 2, 3, 4, 9, 13, 15, 17 (fee not required)
- ☐ GOVERNMENT Complete Sections 2, 3, 4, 10, 13, 15, 16, 17

APR 1 2003

SECTION 2 Type of ownership:

- ☐ ITWROS Complete Section 6
- ☐ INDIVIDUAL Complete Section 6
- ☐ PARTNERSHIP Complete Section 6
- ☐ CORPORATION Complete Section 7
- ☒ LIMITED LIABILITY CO. Complete Section 7
- ☐ CLUB Complete Section 8
- ☐ GOVERNMENT Complete Section 10
- ☐ TRUST Complete Section 6
- ☐ OTHER Explain

SECTION 3 Type of license and fees:

LICENSE #:

~~12075481~~ 12075481

- 1 Type of License: Series #12
2. Total fees attached \$
- APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.**
- A service fee of \$25.00 will be charged for all dishonored checks (A R S. 44.6852)

SECTION 4 Applicant: (All applicants must complete this section)

1. Applicant/Agent's Name. Mr. Taylor Todd Clinton
(Insert one name ONLY to appear on license) Last First Middle
2. Corp /Partnership/L.L.C.: T.C. Taylor, LLC B1028852
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: Pasha Bene B1011530
(Exactly as it appears on the exterior of premises)
4. Business Address: 6990 E. Shea Blvd Suite #101 Scottsdale Mar 85254
(Do not use PO Box Number) City COUNTY Zip
5. Business Phone (480) 922-3474 Residence Phone [REDACTED]
6. Is the business located within the incorporated limits of the above city or town? ☒ YES ☐ NO
7. Mailing Address: [REDACTED]
City State Zip
8. Enter the amount paid for a 06, 07, or 09 license. \$ (Price of License ONLY)

DEPARTMENT USE ONLY

Accepted by [Signature] Date: 4/9/03 Lic. # 12075481

Fees. 100 100 48 \$ 248

Application Interim Permit Agent Change Club F. Prints TOTAL

PROCESSING APPLICATIONS TAKES APPROXIMATELY 90 DAYS, AND CIRCUMSTANCES OFTEN RESULT IN A LONGER WAITING PERIOD.
YOU ARE CAUTIONED REGARDING PLANS FOR A GRAND OPENING, ETC., BEFORE FINAL APPROVAL AND ISSUANCE OF THE LICENSE

SECTION 5 Interim Permit:

If you intend to operate business while your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203.01.


There **MUST** be a valid license of the same type you are applying for currently issued to the location.

Enter the license number currently at the location 12073131

Is the license currently in use? ☒ YES ☐ NO If no, how long has it been out of use? _____

ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION.

Edward LaCapra, declare that I am the **CURRENT LICENSEE** of the stated license and
(Print full name)
I have read this application and the contents and all statements are true, correct and complete.

[Signature] State of Arizona County of Maricopa
(Signature)
The foregoing instrument was acknowledged before me this 20th day of February, 2003
Month Year
March 2003
My commission expires on

(Signature of NOTARY PUBLIC)

SECTION 6 Individual or Partnership Owners:

Each person listed must submit a completed form "LIC0101", an "APPLICANT" type fingerprint card, and \$24 fee for each card

Individual.

Last	First	Middle	% Owned	Residence Address	City	State	Zip
			%				

Partnership Name. (Only the first partner listed will appear on license) _____

General-Limited	Last	First	Middle	% Owned	Residence Address	City	State	Zip
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>				%				

(ATTACH ADDITIONAL SHEET IF NECESSARY)

Is any person, other than the above, going to share in the profits/losses of the business? ☐ YES ☐ NO

SECTION 7 Corporation/Limited Liability Co

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "UC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD.

☐ CORPORATION

Complete questions 1, 2, 3, 5, 6, 7, 8

☐ LLC

Complete questions 1, 2, 4, 5, 6, 7 and attach copy of Articles of Org. and Operation Agreement.

1 Name of Corporation/LLC

(Exactly as it appears on Articles of Inc. or Articles of Org.)

2 Date Incorporated/Organized:

2003 APR - 9 A 9:11

State where Incorporated/Organized

3 AZ Corporation Commission File No

Date authorized to do business in AZ

4 AZ LLC File No

Date authorized to do business in AZ

5 Is Corp/LLC non-profit? ☐ YES ☐ NO If yes, give IRS tax exempt number

6 List all directors/officers in Corporation/LLC:

Last	First	Middle	Title	Residence Address	City State Zip
Taylor	TODD	Clinton	Manager	[REDACTED]	[REDACTED]

(ATTACH ADDITIONAL SHEET IF NECESSARY)

7 List stockholders or controlling members owning 10% or more

Last	First	Middle	% Owned	Residence Address	City State Zip
Taylor	TODD	Clinton	100%	[REDACTED]	[REDACTED]
			%		
			%		
			%		

(ATTACH ADDITIONAL SHEET IF NECESSARY)

8 If the corporation/LLC is owned by another entity, attach an ownership, and director/officer/members disclosure for the parent entity. Attach additional sheets as necessary in order to disclose real people.

SECTION 8 Club Applicants

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "UC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD.

1 Name of Club

(Exactly as it appears on Club Charter)

Date Chartered

(Attach a copy of Club Charter)

2 Is club non-profit?

☐ YES

☐ NO

If yes, give IRS tax exempt number

3 List officer and directors:

Last	First	Middle	Title	Residence Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

SECTION 7 Corporation/Limited Liability Co.:

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD

☐ CORPORATION

Complete questions 1, 2, 3, 5, 6, 7, 8.

☒ L L C

Complete questions 1, 2, 4, 5, 6, 7 and attach copy of Articles of Org. and Operation Agreement.

1 Name of Corporation/L.L.C. T.C. Taylor, LLC
(Exactly as it appears on Articles of Inc. or Articles of Org.)2 Date Incorporated/Organized: 3/14/2003 State where Incorporated/Organized: State of Arizona

3 AZ Corporation Commission File No. _____ Date authorized to do business in AZ _____

4 AZ L L C File No. L-1069655-0 Date authorized to do business in AZ: 3/14/20035. Is Corp./L.L.C non-profit? ☐ YES ☒ NO If yes, give IRS tax exempt number _____

6. List all directors/officers in Corporation/L.L.C.

Last	First	Middle	Title	Residence Address	City State Zip
Taylor	Todd	Clinton	owner	[REDACTED]	[REDACTED]
Karr	Zach	Benjamin	Member	[REDACTED]	[REDACTED]

(ATTACH ADDITIONAL SHEET IF NECESSARY)

7. List stockholders or controlling members owning 10% or more.

Last	First	Middle	% Owned	Residence Address	City State Zip
Karr	Zach	Benjamin	25 %	[REDACTED]	[REDACTED]
Taylor	Todd	Clinton	75 %	[REDACTED]	[REDACTED]
			%		
			%		

(ATTACH ADDITIONAL SHEET IF NECESSARY)

8. If the corporation/L.L.C. is owned by another entity, attach an ownership, and director/officer/members disclosure for the parent entity Attach additional sheets as necessary in order to disclose real people

SECTION 8 Club Applicants:

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD.

1 Name of Club _____ Date Chartered. _____
(Exactly as it appears on Club Charter) (Attach a copy of Club Charter)2. Is club non-profit? ☐ YES ☐ NO If yes, give IRS tax exempt number _____

3 List officer and directors

Last	First	Middle	Title	Residence Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store:

Current Licensee's Name _____
(exactly as it appears on license) Last First Middle

Assignee's Name: _____
Last First Middle

License Type: _____ License Number: _____ Date of Last Renewal _____

ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION

SECTION 10 Government: (for cities, towns, or counties only)

Person to administer this license _____

Last	First	Middle

Assignee's Name: _____

GENERAL MUSIC STORES, AND SUCH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY)

Current Licensee's Name. _____ Entity: _____
(exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)

Corporation/L.L.C. Name _____
(Exactly as it appears on license)

License Type _____ License Number. _____ Last Renewal Date: _____

Current Mailing Address (other than business) _____

Have all creditors, lien holders, interest holders, etc. been notified of this transfer? ☒ YES ☐ NO

Does the applicant intend to operate the business while this application is pending? ☐ YES ☐ NO If yes, complete section 5, attach fee, and current license to this application

I hereby relinquish my rights to the above described license to the applicant named in this application and hereby declare that the statements made in this section are true, correct and complete.

_____, declare that I am the CURRENT LICENSEE of the stated license. I have read this
(Print full name)

Application and the contents and all statements are true, correct and complete

(Signature of CURRENT LICENSEE)

State of _____ County of _____
 The foregoing instrument was acknowledged before me this _____
 _____ day of _____,
 Day of Month Month Year

y commission expires on _____

(Signature of NOTARY PUBLIC)

SECTION 14 Restaurant, or Hotel-Motel Applicants:

Is there a valid restaurant or hotel-motel liquor license at the proposed location? ☐ YES ☒ NO If yes, give licensee's name:

La Capra Eddie E. and license # 12073131
Last First Middle

If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. Section 4-203 01, and complete Section 5 of this application.

All restaurant applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor

Do you understand that 40% of your annual gross revenue must be from food sales? ☒ YES ☐ NO

SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)

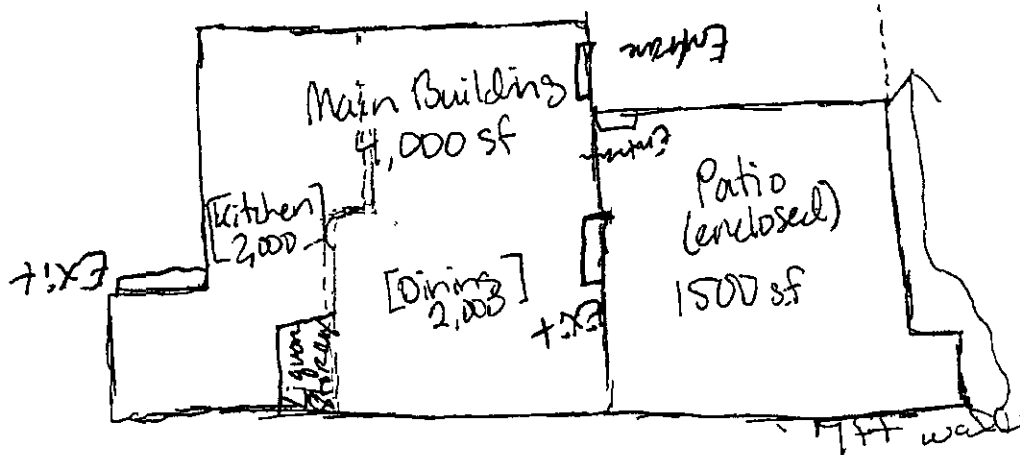
Check ALL boxes that apply to your licensed premises.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Entrances/Exits | <input checked="" type="checkbox"/> Liquor storage areas |
| <input type="checkbox"/> Drive-in windows | <input checked="" type="checkbox"/> Patio enclosures |
| <input type="checkbox"/> Service windows | <input type="checkbox"/> Under construction. estimated completion date _____ |

Restaurants and Hotel/Motel applicants must explicitly depict kitchen equipment and dining facilities

The diagram below is the only area where spirituous liquor is to be sold, served, consumed, dispensed, possessed, or stored. Give the square footage or outside dimensions of the licensed premises.

DO NOT INCLUDE PARKING LOTS, LIVING QUARTERS, ETC.



YOU MUST NOTIFY THE DEPARTMENT OF LIQUOR OF ANY CHANGES OF BOUNDARIES, ENTRANCES, EXITS, OR SERVICE WINDOWS MADE AFTER SUBMISSION OF THIS DIAGRAM.

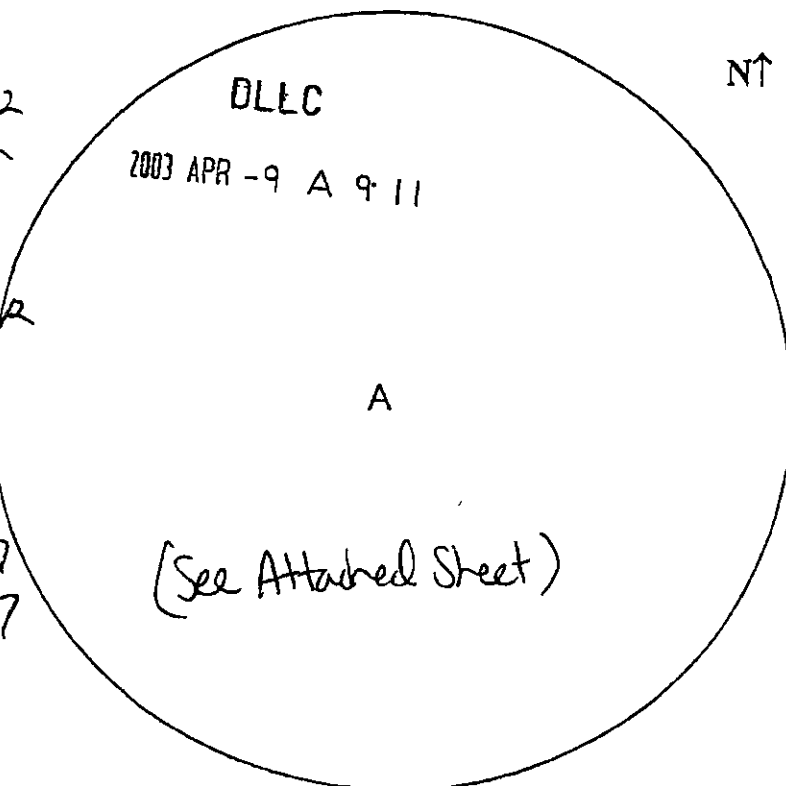
SECTION 16 Geographical Data.

A SAMPLE FOR THIS SECTION IS PROVIDED ON THE BACK OF THIS PAGE

List below the exact names of all churches, schools, and spirituous liquor outlets within a one half mile radius of your proposed location.

1. Parrot Bay Series #12
2. Ajo Als Series #12
3. Uptown Brewery Series #12
4. Clam Jumpers Series #12
5. Eli's Series 6
6. Sushi on Shea Series #12
7. Maria When in Naples Series #12
8. Caspian Rest. Series #12
9. Walgreens Series #10
10. Handle Bar Series #12
11. (K) Conv. Store Series #7
12. Arco gas Station Series #7
13. Chemco gas St. Series #7
14. Wild Cats Series #10
15. Drink Waters Lg. Series 9

(ATTACH ADDITIONAL SHEET IF NECESSARY)



A = Your business name and identify cross streets.

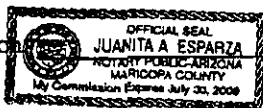
SECTION 17 Signature Block:

I, Todd Taffner, declare that: 1) I am the APPLICANT (Agent/Club Member/Partner), making this
(Print name of APPLICANT/AGENT listed in Section 4 Question 1)
application, 2) I have read the application and the contents and all statements are true, correct and complete; 3) that this application is not
being made to defraud or injure any creditor, taxing authority, regulatory authority, or transferor; 4) that no other person, firm, or
corporation, except as indicated, has an interest in the spirituous liquor license for which these statements are made; and 5) that none of the
owners, partners, members, officers, directors or stockholders listed have been convicted of a felony in the past five (5) years

X Todd Taffner
(Signature)

State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this
9 day of April, 2003
Day of Month Month Year

My commission expires on



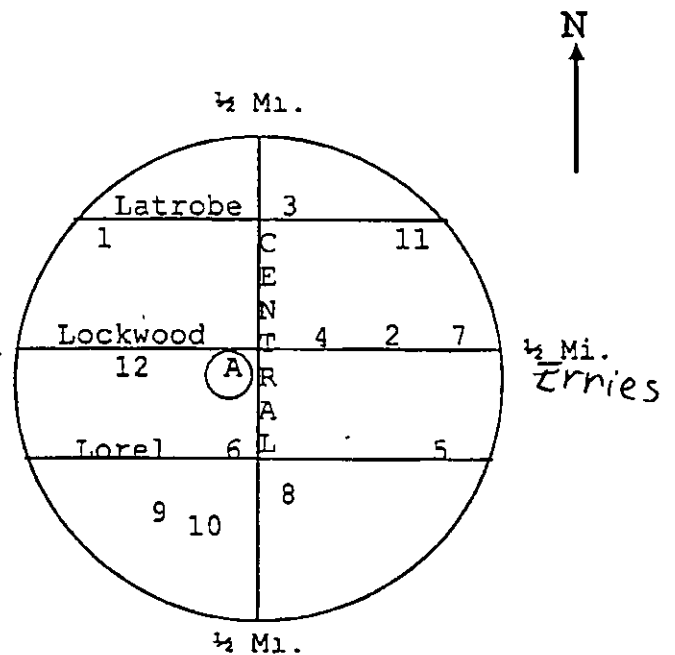
Juanita A. Esparza
(Signature of NOTARY PUBLIC)

SAMPLE
GEOGRAPHICAL DATA

n the area adjacent to the map provided below indicates your proposed location
nd the exact names of all churches, schools, and alcoholic beverage outlets
ithin a 1/2 mile radius of your proposed location.
See example below)

<u> = Applicant</u>	<u>Series 12</u>
<u>1 Pink Elephants</u>	<u>Series 06</u>
<u>2 Mama's Rest.</u>	<u>Series 12</u>
<u>3 Corner Liquors</u>	<u>Series 09</u>
<u>4 Joe's Groceries</u>	<u>Series 10</u>
<u>5 Lions Club</u>	<u>Series 14</u>
<u>6 Burgers R Us</u>	<u>Series 07</u>
<u>7 Pizza Perfect</u>	<u>Series 07</u>
<u>8 Billy Bobs Bar</u>	<u>Series 06</u>
<u>9 St. Anthony's Church</u>	
<u>0 St. Anthony's School</u>	
<u>1 Burbank Middle School</u>	
<u>2 First United Baptist Church</u>	
<u>3</u>	
<u>4</u>	
<u>5</u>	

1/2 Mi.
64

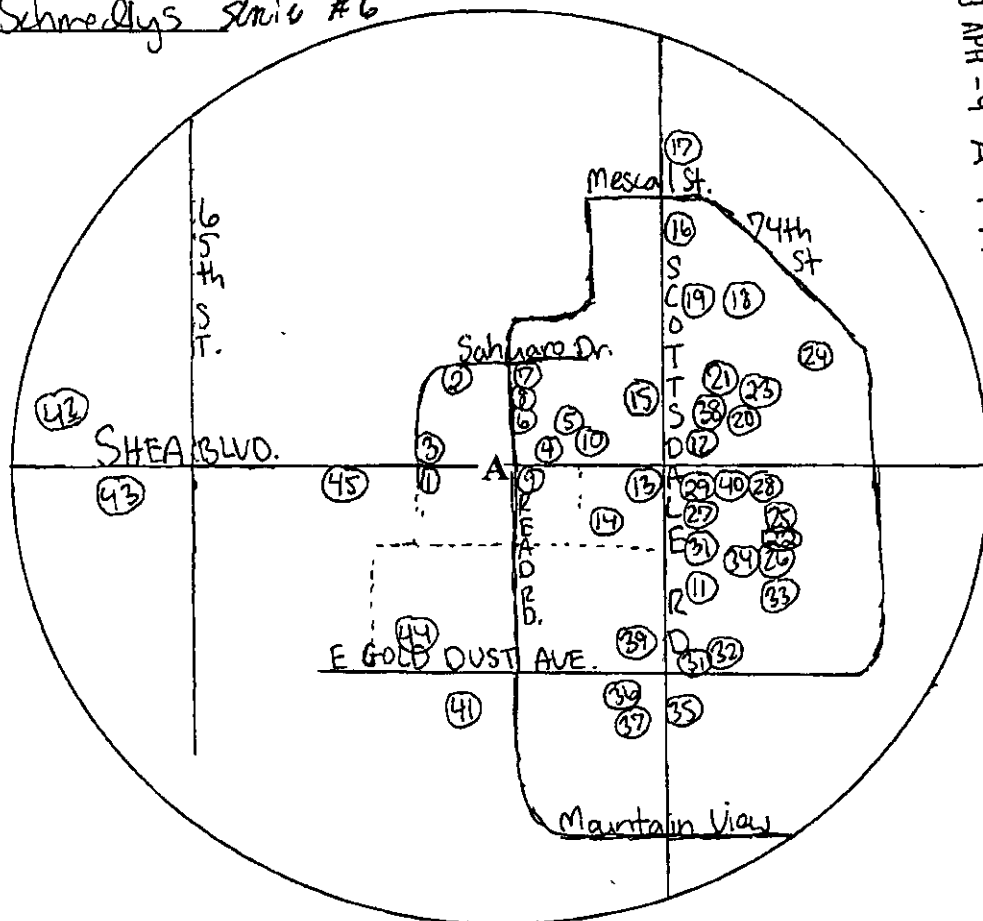


.R.S. Section 4-207.A reads as follows:

. No retailers license shall be issued for any premises which are. at the time
he license application is received by the Director, within three hundred(300)
orizontal feet of a church, within three hundred(300) horizontal feet of a
ublic or private school building with kindergarten programs or any of
rades one(1) through twelve(12). or within three hundred(300) horizontal
eet of a fenced recreational area adjacent to such school building.

- 16) Lone Star Series #12
- 17) Macayos Mexican S. #12
- 18) Guido's Series #7
- 19) Sharky O's Series #6
- 20) Peking Palace Series #12
- 21) Safeway Series #10
- 22) Razzie's Series #6
- 23) Blue Burrito Series #7
- 24) Long Wings Series #7
- 25) Ernie's } Series #6
- 26) Hacker's } Series #6
- 27) NYPD Series #7
- 28) La Fonda Del Sol
- 29) Rio Brazilian } Series #12
- 30) El Camino } Series #12
- 31) Swamp Stamp Series #6
- 32) La Locanda Series #12
- 33) Schmiedlys Series #6

- 34) Buzz Series #6
- 35) Macaroni Grill Series #12
- 36) Tetz Series #12
- 37) California Pizza Kitchen Series #12
- 38) Oslo Drug Series #7
- 39) Mobile Gas Series #7
- 40) Chuckbox Series #12
- 41) Chapporal High School
- 42) Secuya Elementary
- 43) Catholic Church (64th St)
- 44) Church (67th St) LDS
- 45) YMCA
- 46)
- 47)
- 48)
- 49)



2003 APR -9 A 9:11

DLIC

12 Payroll Records

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. 4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.R.S. 210.A.7. AND A.R.S. 205.02.G.

A.R.S. 210.A.7. The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food

A.R.S. 205.02.G. For the purpose of this section:

1. "Restaurant" means an establishment which derives at least forty percent (40%) of its gross revenue from the sale of food.

2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises, regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

I, (print Licensee/Agent's Name),

Taylor TODD Clinton
Last First Middle

have read and fully understand all aspects of this statement.

State of Arizona County
of Maricopa

The foregoing instrument was acknowledged before me this
X [Signature] 5th day of April 2003
(Signature of Licensee/Agent) Day of Month Month Year

My commission Expires 10 10 2003
Day of Month Month Year
[Signature]
(Signature of NOTARY PUBLIC)

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

HOTEL-MOTEL AND RESTAURANT LICENSES RECORDS REQUIRED FOR AUDIT OF SERIES #11 & #12 LICENSES

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

In the event of an audit, you will be asked to provide to the department any documents necessary to determine compliance with A.R.S. 205 02.G. Such documents requested may include however, are not limited to

1. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises. If you do not have all food or liquor invoices, please contact your vendors immediately and request copies of missing invoices. These must be available for pick-up at the time of the Audit Interview Appointment. If all food invoices are not available at that time, you may not be given credit for *all* food sales.
2. A list of *all* food and liquor vendors
3. The restaurant menu used during the audit period
4. A price list for alcoholic beverages during the audit period
5. Mark-up figures on food and alcoholic products during the audit period
6. A recent, *accurate* inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
7. Monthly Inventory Figures - beginning and ending figures for food and liquor
8. Chart of accounts (copy)
9. Financial Statements-Income Statements-Balance Sheets
10. General Ledger
 - A. Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
 - 3) Guest Checks
 - 4) Coupons/Specials
 - 5) Any other evidence to support income from food and liquor sales
 - B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks
11. Tax Records
 - A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
 - B. Income Tax Return - city, state and federal (copies)
 - C. Any supporting books, records, schedules or documents used in preparation of tax returns

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

RESTAURANT OPERATION PLAN

LICENSE # 42543800

1. List by Make, Model and Capacity of your

Grill	Wolf Grill 4', Garland 8 Burner, Star 11 Burner, Jade 6 Burner
Oven	Frymaster Pasta Cooker, (2) Frymaster 30lb. Deep Fryer, Bakers Pride 2 Deck pizza oven
Freezer	Star 6 Burner w/ oven on bottom (1) Walk in Freezer 8x6 (1) Hobart undercounter Freezer 4'
Refrigerator	Walk in refer 15x8', (1) mcall 4' under counter,
Sink	(2) mcall sandwich tables 4', (1) Bekair Pizza table (2) compartment s/s 4' (2) Hand sinks s/s 2'
Dish Washing Facilities	Proclean low temp dishmachine, 3 comp. s/s sink for pots + p. (2) dish sprayers, (3) s/s Dish tables 4'
Food Preparation Counter (Dimensions)	(2) 4' s/s tables (1) 10' s/s table (1) 6' s/s table (1) 15' s/s table
Other	(1) microwave oven, (1) Hobart Dough mixer,

2. Print the name of your restaurant: Pasta Bene

3. Attach a copy of your menu (Breakfast, Lunch and Dinner including prices).

4. List the seating capacity for:

a. Restaurant area of your premises [120]
b. Bar area of your premises [+ 17]
c. Total area of your premises [137]

5. What type of dinnerware and utensils are utilized within your restaurant?

☒ Reusable ☐ Disposable

6. Does your restaurant have a bar area that is distinct and separate from the restaurant seating? (If yes, what percentage of the public floor space does this area cover?) ☒ Yes 18 % ☐ No

7. What percentage of your public premises is used primarily for restaurant dining? (Does not include kitchen, bar, cocktail tables or game area.) 82 %

*Disabled individuals requiring special accommodations, please call the Department.

8. Does your restaurant Contain any games or television? ☒ Yes ☐ No

(If yes, what types and how many? Pool tables, Video Games, Darts, etc.)

Includes 8 television sets

9 Do you have live entertainment or dancing? ☐ Yes ☒ No
(If yes, what type and how often?)

10. Use space below or attach a list of employee positions and their duties to fully staff your business

Fernando Navarrete (cook)	Steve Simenels (server)
Raul Medina (cook)	Chris Sosa (server)
Ivan Lopez (cook)	Anthony Szikly (server)
Maclara Rios (cook)	Julie Thayer (server)
Juan Valdez (cook)	Robert Sladok (bartender)
Olivero Cuklanis (cook)	Holly Young (hostess)
Agripino Bona (dishwasher)	Dan Lopez (busboy)
Adib Hanna (prep cook)	Aaron Manzo (busboy)
Tyler Arnett (host)	
Stella Alvarez (server)	
Justin Warner (server)	
Joann Damico (server)	
Kim Johnson (server)	
Kim Marszowski (server)	

I, TODD TAYLOR, hereby declare that I am the APPLICANT filing this application. I have
(Print full name)
read this application and the contents and all statements true, correct and complete.

X [Signature]
(Signature of APPLICANT)

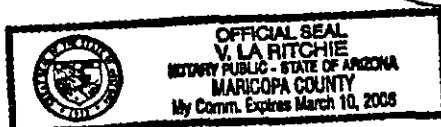
State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this

8 day of March 2003
Day of Month Month Year

My commission expires on: March 10, 2006

[Signature]
(Signature of NOTARY PUBLIC)



800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

801,241

QUESTIONNAIRE

SOCIAL SECURITY AND BIRTHDATE INFORMATION IS CONFIDENTIAL BY LAW AND CANNOT BE DISSEMINATED TO THE PUBLIC

Read Carefully, this instrument is a sworn document. Type or print with black ink

An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH OWNER, AGENT, PARTNER, STOCKHOLDER (10% OR MORE), MEMBER, OFFICER OR MANAGER. ALSO EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT THE DEPT FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY THE DEPARTMENT OF LIQUOR. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE

There is a \$24.00 processing fee for each fingerprint card submitted.

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

Liquor License #

12075491
P1043957

(If the location is currently licensed)

1. Check appropriate box → ☐ Owner ☒ Partner ☐ Stockholder ☐ Member ☐ Officer ☐ Agent ☒ Manager (Only)
Other (Complete Questions 1-20 & 24) Complete All Questions except # 14, 14a & 25
Licensee or Agent must complete # 25 for a Manager Licensee or Agent must complete # 25

2. Name: Taylor Todd Clinton Date of Birth: [REDACTED]
Last First Middle (This Will Not Become a Part of Public Records)

3. Social Security Number [REDACTED] Drivers License [REDACTED] State: Arizona
(This Will Not Become a Part of Public Records)

4. Place of Birth Tucson AZ US Height: 5-10 Weight: 190 Eyes: Blue Hair: Brn
City State Country (not county)

5. Marital Status ☒ Single ☐ Married ☐ Divorced ☐ Widowed Residence (Home) Phone: [REDACTED]

6. Name of Current or Most Recent Spouse: [REDACTED] Date of Birth: [REDACTED]
(Last all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden

7. You are a bona fide resident of what state? Arizona If Arizona, date of residency: 3/24/76

8. Telephone number to contact you during business hours for any questions regarding this document. [REDACTED]

9. If you have been a resident less than three (3) months, submit a copy of driver's license or voter registration card.

10. Name of Licensed Premises: Pasta Bene Premises Phone: 480-922-3474

11. Licensed Premises Address: 6990 E. Shea Blvd suite 101 Scottsdale, AZ 85284
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years, if unemployed part of the time, list those dates List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Give street address, city, state & zip)
10/97	CURRENT	Manager	Conine Country Club 2332 E. Washington Phoenix, AZ 85034

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	RESIDENCE Street Address	City	State	Zip
3/98	4/03	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
4/03	CURRENT	1320 W. Elgin Rd #103-153	Tempe	AZ	85284

If you checked the Manager box on the front of this form skip to # 15

14. As an Owner, Agent, Partner, Stockholder, Member or Officer, will you be physically present and operating the licensed premises? If you answered YES, how many hrs/day? 12, answer #14a below. If NO, skip to #15. ☒ YES ☐ NO
- 14a. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.

15. Have you EVER been detained, cited, arrested, indicted or summoned into court for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☒ YES ☐ NO
16. Have you EVER been convicted, fined, posted bond, been ordered to deposit bail, imprisoned, had sentence suspended, placed on probation or parole for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☐ YES ☒ NO
17. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses PENDING against you or ANY entity in which you are now involved? ☐ YES ☒ NO
18. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor APPLICATION OR LICENSE rejected, denied, revoked, suspended or fined in this or any other state? ☐ YES ☒ NO
19. Has anyone EVER filed suit or obtained a judgment against you in a civil action, the subject of which involved fraud or misrepresentation of a business, professional or liquor license? ☐ YES ☒ NO
20. Are you NOW or have you EVER held membership, been a controlling person, been an officer, member, director, or manager on any other [redacted] in [redacted] other state? ☐ YES ☒ NO

If any answer to Questions 15 through 20 is "YES" YOU MUST attach a signed statement giving complete details. Please be sure to include dates, agencies involved and dispositions.

If you checked the Manager box on the front of this form, fill in #21-23 and 24, all others skip the following box (21-23) and go to # 24

Manager Section

21. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to #21 is "NO" course must be completed BEFORE ISSUANCE of a new license OR APPROVAL on an existing license.
22. Do you make payments to the licensee? ☐ YES ☒ NO If "yes", how much? \$ _____ per month Total debt to licensee \$ _____
23. [redacted] or agreement between you and the licensee relating to the operation or management of this business? ☐ YES ☒ NO If "yes", attach a copy of such agreement

24. I, Todd Clinton Taylor, hereby declare that I am the APPLICANT filing this questionnaire.
(Print full name of Applicant)

I have read this questionnaire and the contents and all statements are true, correct and complete.

X Todd Taylor State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this _____ day of _____, 2003.
(Signature of NOTARY PUBLIC)

My commission expires on 3 10 06
Day of Month Year

FILL IN THIS SECTION ONLY IF YOU ARE A LICENSEE OR AGENT APPROVING A MANAGER APPLICATION Licensee or Agent Approval of Manager

25. I, (Print Licensee/Agent's Name): _____
Last Middle First

Hereby authorize the applicant to act as manager for the named liquor license.

[redacted] County of _____
The foregoing instrument was acknowledged before me this _____ day of _____, _____ Year

X _____
(Signature of LICENSEE/AGENT)

My commission expires on _____
Day of Month Year (Signature of NOTARY PUBLIC)

Explanation of Offense

Date 11/1996

Location Priest and Elliot in Tempe, AZ

Tempe Police Department

I made a U-turn at the red light to head westbound on Elliot. My gas light was on, so I entered Circle K. I pulled up to a pump, shut off the car, and began to walk towards the store. A motorcycle cop then pulled up next to me and asked why I was in such a hurry. I said I was low on gas. He then said he smelled beer on my breath. I took the field sobriety test and the hand-held breathalyzer. The officer then brought in the breath test van. There were inconsistencies in the test results - one said I was low, the other said I was above 10. That officer didn't know how to work it, so another had to do the testing.

I hired a lawyer to fight it. The case never went to court, and was dropped down to a 'minor in consumption while in a vehicle'. I paid a fine, did not serve time, got 2 points against my license, and took an Alcohol Awareness Class.

Todd Taylor

Todd Taylor

2003 APR -9 A 9:11

DLIC

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

CERTIFICATION OF COMPLETED ALCOHOL TRAINING PROGRAM(S)

OBTAIN ORIGINALS OF THIS FORM FROM DLLC-DO NOT PHOTOCOPY. DOCUMENT IS COMPUTER SCANNED. TYPE OR PRINT WITH BLACK INK.

ALCOHOL TRAINING PROGRAM INDIVIDUAL INFORMATION

100% Taylor
Individual Name (Print)
John Taylor
Individual Signature

2003 ARIZ

3/29/2003
Date Training Completed

TYPE OF TRAINING COMPLETED TRAINER MUST CHECK YES OR NO FOR EACH TYPE

<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO BASIC	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ONSALE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO MANAGEMENT	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO OFF SALE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO BOTH	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO OTHER

IF TRAINEE IS EMPLOYED BY A LICENSEE:

NAME OF THE LICENSEE

BUSINESS NAME

LIQUOR LICENSE NUMBER

ALCOHOL TRAINING PROGRAM PROVIDER INFORMATION

A B C, ALCOHOL AWARENESS TASK FORCE

Company or Individual Name

5032 S. Ash Ave., Suite 116

Address

Tempe, Az., 85282

(480) 777-2333

City

State

Zip

Phone

I Certify the above named individual has successfully completed the specified program(s)

[Signature]
Trainer Signature

JARED REYNOLDS
Trainer Name (Print)

3-29-03
Date

Trainer gives original of completed form to trainee, photocopy and maintain completed document for your records

Mandatory Liquor Law Training for all new applications submitted after Nov 1 1997. A.R.S. Section 4-112(G)(2).
Completion of the Liquor License Training Courses is required at the issuance of a license

The person(s) required to attend both the Basic Liquor Law and Management Training, (either on-sale or off-sale), will include all of the following owner(s), licensee/agent or manager(s) WHO ARE ACTIVELY INVOLVED IN THE DAY TO DAY OPERATION OF THE BUSINESS.
Proof of attendance within the last five years for the required courses must be submitted to the Department before the license application is considered complete

Before acceptance of a Manager's Questionnaire and/or Agent Change for an existing licensee, proof of attendance for the Basic Liquor Law and Management Training (either on-sale or off-sale) will be required.

LC 1021 10/2001

Disabled individuals requiring special accommodations please call (602) 542-8051

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

801, 241

QUESTIONNAIRE

SOCIAL SECURITY AND BIRTHDATE INFORMATION IS CONFIDENTIAL BY LAW AND CANNOT BE DISSEMINATED TO THE PUBLIC

Read Carefully, this instrument is a sworn document. Type or print with black ink

An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH OWNER, AGENT, PARTNER, STOCKHOLDER (10% OR MORE), MEMBER, OFFICER OR MANAGER ALSO EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT THE DEPT FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY THE DEPARTMENT OF LIQUOR THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE

There is a \$24.00 processing fee for each fingerprint card submitted.

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

Liquor License # 12075481
P1043958 (If the location is currently licensed)

1. Check appropriate box → ☐ Owner ☒ Partner ☐ Stockholder ☐ Member ☐ Officer ☐ Agent ☒ Manager(Only)
☐ Other (Complete Questions 1-20 & 24) Complete All Questions except # 14, 14a & 25
Licensee or Agent must complete # 25 for a Manager Licensee or Agent must complete # 25

2. Name: Karr Zachary Benjamin Date of Birth: [REDACTED]
Last First Middle (This Will Not Become a Part of Public Records)

3. Social Security Number: [REDACTED] Drivers License #: [REDACTED] State: AZ
(This Will Not Become a Part of Public Records)

4. Place of Birth: Salt Lake City Utah USA Height: 5'10" Weight: 220 Eyes: BLU Hair: BLD
City State Country (not county)

5. Marital Status ☒ Single ☐ Married ☐ Divorced ☐ Widowed Residence (Home) Phone: [REDACTED]

6. Name of Current or Most Recent Spouse [REDACTED] Date of Birth [REDACTED]
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden

7. You are a bona fide resident of what state? AZ If Arizona, date of residency: 06/16/1994

8. Telephone number to contact you during business hours for any questions regarding this document. [REDACTED]

9. If you have been a resident less than three (3) months, submit a copy of driver's license or voter registration card.

10. Name of Licensed Premises: Pasta Bere Premises Phone 480.922.3474

11. Licensed Premises Address 6990 E Shea Blvd #101 Scottsdale Maricopa 85254
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years, if unemployed part of the time, list those dates List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Give street address, city, state & zip)
11/2001	CURRENT	Student	ASU 3302 N 7th St #163 Phoenix AZ 85014
11/1996	11/2001	Manager	Island Kinetics 6002 S. Ash Ave Tempe AZ 85283

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 4

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	RESIDENCE Street Address	City	State	Zip
2/1/03	CURRENT	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
2/01/00	2/01/03	750 W Baseline Rd. # 2138	Tempe	AZ	85283
7/27/97	2/1/03	11 E Bell Rd. #137	Phoenix	AZ	85022

If you checked the Manager box on the front of this form skip to # 15

14 As an Owner, Agent, Partner, Stockholder, Member or Officer, will you be physically present and operating the licensed premises? If you answered YES, how many hrs/day? 8, answer #14a below. If NO, skip to #15. ☒ YES ☐ NO
14a. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license

15. Have you EVER been detained, cited, arrested, indicted or summoned into court for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☒ YES ☒ NO

16. Have you EVER been convicted, fined, posted bond, been ordered to deposit bail, imprisoned, had sentence suspended, placed on probation or parole for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☐ YES ☒ NO

17 Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses PENDING against you or ANY entity in which you are now involved? ☐ YES ☒ NO

18 Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor APPLICATION OR LICENSE rejected, denied, revoked, suspended or fined in this or any other state? ☐ YES ☒ NO

19. Has anyone EVER filed suit or obtained a judgment against you in a civil action, the subject of which involved fraud or misrepresentation of a business, professional or liquor license? ☐ YES ☒ NO

20. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director, or manager on any other liquor license in any other state? ☐ YES ☒ NO

If any answer to Questions 15 through 20 is "YES" YOU MUST attach a signed statement giving complete details. Please be sure to include dates, agencies involved and dispositions.

If you checked the Manager box on the front of this form, fill in #21-23 and 24, all others skip the following box (21-23) and go to # 24

Manager Section

21. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☐ YES ☐ NO
If the answer to #21 is "NO" course must be completed BEFORE ISSUANCE of a new license OR APPROVAL on an existing license.

22 Do you make payments to the licensee? ☐ YES ☐ NO If "yes", how much? \$_____ per month. Total debt to licensee \$_____
23 _____ or agreement between you and the licensee relating to the operation or management of this business? ☐ YES ☐ NO If "yes", attach a copy of such agreement

24 I, Zachary Benjamin Karr, hereby declare that I am the APPLICANT filing this questionnaire
(Print full name of Applicant)

I have read this questionnaire and the contents and all statements are true, correct and complete.

X Zachary Benjamin Karr State of Arizona County of Maricopa
(Signature of Applicant) OFFICIAL SEAL The foregoing instrument was acknowledged before me this
ANTONETTE SANDOVAL Notary Public - State of Arizona
MARICOPA COUNTY
My Commission Expires July 27, 2006
31st day of March 2003
My commission expires on 7-27-06 Day of Month Month Year
(Signature of NOTARY PUBLIC)

FILL IN THIS SECTION ONLY IF YOU ARE A LICENSEE OR AGENT APPROVING A MANAGER APPLICATION

Licensee or Agent Approval of Manager

25 I, (Print Licensee/Agent's Name) Taylor Clinton Todd
Last Middle First

Hereby authorize the applicant to act as manager for the named liquor license.

X [Signature] _____
(Signature of LICENSEE/AGENT) _____
The foregoing instrument was acknowledged before me this
_____ day of April 2003
Day of Month Month Year
(Signature of NOTARY PUBLIC)

My commission expires on _____
JUANITA A ESPARZA
Notary Public - State of Arizona
My Commission Expires July 30, 2006
Year

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

2003 APR -9 A 9:11
CERTIFICATION OF COMPLETED ALCOHOL TRAINING PROGRAM(S)

OBTAIN ORIGINALS OF THIS FORM FROM DLLC-DO NOT PHOTOCOPY DOCUMENT IS COMPUTER SCANNED TYPE OR PRINT WITH BLACK INK

ALCOHOL TRAINING PROGRAM INDIVIDUAL INFORMATION

Zach Karr

Individual Name (Print)

Zach Karr

Individual Signature

TYPE OF TRAINING COMPLETED

TRAINER MUST CHECK YES OR NO FOR EACH TYPE

2.15.03

Date Training Completed

☒ YES ☐ NO BASIC

☒ YES ☐ NO ON SALE

☐ YES ☒ NO MANAGEMENT

☐ YES ☒ NO OFF SALE

☐ YES ☒ NO BOTH

☐ YES ☒ NO OTHER

IF TRAINEE IS EMPLOYED BY A LICENSEE:

NAME OF THE LICENSEE

BUSINESS NAME

LIQUOR LICENSE NUMBER

ALCOHOL TRAINING PROGRAM PROVIDER INFORMATION

A B C, ALCOHOL AWARENESS TASK FORCE

Company or Individual Name

5032 S. Ash Ave., Suite 116

Address

Tempe, Az, 85283

(480) 777-2833

City

State

Zip

Phone

I Certify the above named individual has successfully completed the specified program(s)

JARED REYNOLDS

Trainer Name (Print)

2-15-03

Date

Trainer give original of completed form to trainee, photocopy and maintain completed document for your records

Mandatory Liquor Law Training for all new applications submitted after Nov 1 1987. A.R.S. Section 4-112(G)(2)
Completion of the Liquor License Training Courses is required at the issuance of a license

The person(s) required to attend both the Basic Liquor Law and Management Training, (either on-sale or off-sale), will include all of the following
owner(s) licensee(s) agent or manager(s) WHO ARE ACTIVELY INVOLVED IN THE DAY TO DAY OPERATION OF THE BUSINESS
Proof of attendance within the last five years for the required courses must be submitted to the Department before the license application is considered complete

Before acceptance of a Manager's Questionnaire and/or Agent Change for an existing license, proof of attendance for the Basic Liquor Law and Management Training (either on-sale or off-sale) will be required.

UC 1001 10/2001

Disabled individuals requiring special accommodations please call (602) 542-9051

MAR-17-2003 09:58

P.02/07

COMMISSIONERS
MARC BRITZER - Chairman
JIM IRVIN
WILLIAM A. MUNDALL
JEFF HATCH-MILLER
MIKE GLEASON



ARIZONA CORPORATION COMMISSION

BRIAN C. MONEIL
Executive Secretary
JOANNE C. MACDONNELL
Director, Corporations Division

March 15, 2003

MICHAEL E. DOCKWORTH, P.C.
7500 E. SUTHERUS DR.
SUITE 101
SCOTTSDALE, AZ 85260

RE: T.C. TAYLOR, LLC
File Number: L-1069033-0

We are pleased to notify you that your Articles of Organization were filed on March 14, 2003.

You must publish a notice of the filing of your Articles of Organization OR alternatively, you may publish the Articles of Organization in their entirety. The publication must be in a newspaper of general circulation in the county of the known place of business, in Arizona as filed with the Commission, for three (3) consecutive publications.

For your convenience we have provided a Notice of Publication form. Please complete this form, in its entirety, and submit to the newspaper of your choice. An affidavit from the newspaper, evidencing such publication, must be delivered to the Commission for filing WITHIN NINETY (90) DAYS from the date of this letter.

The Commission strongly recommends that you periodically check Commission records regarding the corporation. The Commission web site www.cc.state.az.us/corp contains information specific to each Limited Liability Company of record and is a good general source of information.

If you have any questions or need further information, please contact us at (602) 542-3135 in Phoenix, (520) 628-6560 in Tucson, or Toll Free (Arizona residents only) at 1-800-345-5819.

Sincerely,

RATIB NASIC
Examiner
Corporations Division

LL:13
Rev: 01/2003

2003 APR - 9
DLLO

STATE OF ARIZONA

ACC/FAX

DATE FILED

1-069055-0
MAR 14 2003

ARTICLES OF ORGANIZATION

DATE APPR 03-14-03

TERM

BY BA-716 NTC

T. C. Taylor, LLC

KNOW ALL MEN BY THESE PRESENTS:

That we, the below-named, do hereby associate ourselves together for the purpose of forming a limited liability company under the laws of the State of Arizona, and do hereby adopt the following Articles of Organization:

1. The name of this limited liability company shall be: T.C. Taylor, LLC *OKB*
(the "Company")
2. The Company is organized to transact any and all lawful business for which a limited liability company may be organized pursuant to ARS §§ 29-601 et seq.
3. The name and business address of the initial Statutory Agent of the Company is:

Michael E. Duckworth, Esq.
7500 E. Butherus Dr., Suite 101
Scottsdale, AZ 85260
4. The Company's registered office address and known place of business is:

6990 E. Shea Blvd.
Suite 101
Scottsdale, AZ 85254
5. Management of the Company is vested in the Manager(s). The name and address of the initial Manager of the Company is:

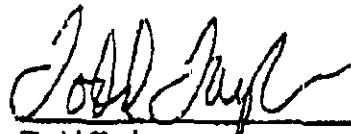
Todd Taylor
6990 E. Shea Blvd.
Suite 101
Scottsdale, AZ 85254
6. The Company shall continue in existence in perpetuity, unless and until it is dissolved voluntarily or involuntarily in accordance with Arizona law.
7. Except as specifically provided for in the Arizona Limited Liability Company Act, A.R.S. § 29-601 et. seq., the private property of the organizers, members, managers, employees, officers or agents of the Company shall not be liable, solely by reason of

2003 APR -9 A 11

DLIC

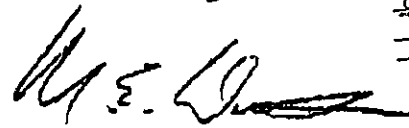
being an organizer, member, manager, employee, officer or agent, for the debts, obligations and liabilities of the Company, whether arising out of contract or tort, under a judgment, decree or order of a court, or otherwise.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13th day of March, 2003.


Todd Taylor
Organizer

ACCEPTANCE BY STATUTORY AGENT:

I, Michael E. Duckworth, having been designated to act as Statutory Agent for the Company, hereby consent to act in that capacity until removal or resignation is submitted in accordance with Arizona Revised Statutes.


Michael E. Duckworth
Statutory Agent

Dated: March 13, 2003

2003 APR -9
11
DLIC

STATE OF ARIZONA
REST
DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE

License 12073131

Issue Date: 1/4/1996

Expiration Date 3/31/2004

Issued To
EDWARD LA CAPRA, Agent
ARIZONA SEAFOOD INC, Owner

Restaurant

Mailing Address

Location
PASTA BENE
6990 E SHEA BLVD
SCOTTSDALE, AZ 85254

EDWARD LA CAPRA
ARIZONA SEAFOOD INC
PASTA BENE
6990 E SHEA BLVD
SCOTTSDALE, AZ 85254

EXP 30  1/2004

POST THIS LICENSE IN A CONSPICUOUS PLACE

2003 APR -9 A 9 11



Lunch Menu

Pasta



Fettuccini Alfredo	\$5.99
<i>Fettuccini pasta in our creamy alfredo sauce</i>	
Penne Alla Vodka	\$6.99
<i>Prosciutto, onions & a splash of vodka in a pink cream sauce</i>	
Capellini Pomodoro	\$5.99
<i>Angelhair pasta in our fresh and light tasting tomato sauce</i>	
Ravioli Formaggio	\$5.99
<i>Cheese ravioli, with our marinara sauce & melted mozzarella</i>	
Spinach Ravioli	\$5.99
<i>Spinach ravioli, in a gorgonzola cream sauce.</i>	
Linguini con Meatballs or Sausage Ragù	\$5.99
<i>Linguini in a meat flavored tomato sauce</i>	
<i>Choose meatballs <u>or</u> Italian sweet pork sausage <u>or</u> a combo</i>	
Linguini Bolognese	\$5.99
<i>Linguini pasta in our beef and pork meat sauce</i>	
Capellini Di Mare	\$11.99
<i>Angelhair pasta, shrimp, clams, mussels, & calamari</i>	
<i>in a seafood infused red sauce</i>	
Linguini con Vongole	\$9.99
<i>Tender clams in a white <u>or</u> red clam broth</i>	

Pollo & Vitello

	Veal	Chicken
Marsala	\$9.99	\$7.99
<i>Chicken or veal in a rich mushroom & marsala wine sauce.</i>		
Piccata	\$9.99	\$7.99
<i>Chicken or veal scallopine in a lemon & caper sauce</i>		
Parmigiana	\$9.99	\$7.99
<i>Breaded chicken or veal with melted mozzarella & tomato sauce.</i>		
<i>Served with linguini marinara</i>		
Chicken Francese	\$7.99	
<i>Battered & lightly sautéed in a lemon & butter sauce.</i>		

2003 APR - 9 A & 1

ULLC



Insalata



Bené Salad

\$1.99

Mixed greens, with choice of dressing.

Caesar Classico

Small Large

\$4.99 \$7.99

Romaine lettuce, special dressing, croutons & parmesan.

Add grilled chicken. \$2.00

Add grilled shrimp \$3.00

Sicilian Chopped Salad

\$5.99 \$8.99

*Chopped greens, mixed garden vegetables, salami,
pepperoni, prosciutto, fresh mozzarella, & provolone cheese
In an Italian vinaigrette*

Pollo Balsamico

\$6.99 \$9.99

*Balsamic marinated chicken, mixed greens, gorgonzolla cheese,
walnuts, cranberries & garden vegetables with a balsamic vinaigrette.*

Gamberi Caldo

\$6.99 \$9.99

*Warm jumbo shrimp, mixed greens & garden vegetables with a
roasted garlic vinaigrette.*

Panini Caldo

Hot Sandwiches

Chicken Parmesan Panini

\$7.99

Breaded chicken, tomato sauce & mozzarella cheese.

Meatball Parmesan Panini

\$7.99

Beef & pork meatballs, melted mozzarella, & tomato sauce.

Veal Parmesan Panini

\$8.99

Breaded veal, tomato sauce & mozzarella cheese

Pollo Panini

\$8.99

*Grilled chicken, sliced tomato, roasted peppers & melted
mozzarella cheese. Balsamic dressing*

Panini Fredo

Cold Sandwiches

Rustico

\$8.99

*Prosciutto, fresh mozzarella, tomato, roasted peppers & basil.
Balsamic dressing*

Palermo

\$7.99

Genoa salami, cappocolo & provolone. Balsamic dressing.

Panini served with a side salad or penne marinara

Pasta della Casa

Fettuccini Alfredo	\$9.99
<i>Fettuccini pasta in our alfredo sauce</i>	
Gnocchi	\$10.99
<i>Potato pasta in a pink alfredo sauce.</i>	
Penne Alla Vodka	\$9.99
<i>Prosciutto, onions & a splash of vodka in a pink cream sauce</i>	
Capellini Pomodoro	\$9.99
<i>Angel hair pasta in our fresh and light tasting tomato sauce.</i>	
Linguini con Vongole	\$13.99
<i>Tender whole clams in a white <u>or</u> red sauce.</i>	
Ravioli Formaggio	\$9.99
<i>Cheese ravioli, with our marinara sauce & melted mozzarella</i>	
Spinach Ravioli	\$9.99
<i>Spinach ravioli, in a gorgonzola cream sauce</i>	
Linguini con Meatballs or Sausage Ragù	\$9.99
<i>Linguini in a meat flavored tomato sauce</i>	
<i>Choose meatballs <u>or</u> Italian sweet pork sausage <u>or</u> a combo</i>	
Shrimp Romano	\$14.99
<i>Romano crusted shrimp in a pink cream sauce over fettuccini</i>	
Tri Color Tortellini Alfredo	\$9.99
<i>Three cheese tortellini pasta in our alfredo sauce.</i>	
Linguini Bolognese	\$9.99
<i>Linguini pasta in our beef and pork meat sauce</i>	
Capellini Di Mare	\$14.99
<i>Angel hair pasta, shrimp, clams, mussels, & calamari in a seafood infused red sauce</i>	
Penne Sinatra	\$14.99
<i>Penne pasta topped with our Chicken Romano in a spicy pink cream sauce.</i>	
Meat Lasagna	\$9.99
<i>Beef & pork within layers of ricotta cheese & red sauce.</i>	
Bené Baked Ziti	\$12.99
<i>Penne pasta baked with ricotta, mozzarella, parmesan cheeses & a touch of marinara sauce with meatballs</i>	

Pizza

Margherita	\$8.99
<i>Pomodoro sauce, fresh mozzarella, olive oil & basil.</i>	
Quattro Formaggio	\$9.99
<i>Four cheese. Fresh mozzarella, fontina, parmesan & provolone.</i>	
Mediterranean	\$9.99
<i>Kalamata olives, sundried tomato, feta cheese, spinach, red onion, pizza sauce & mozzarella cheese</i>	
Ti Piacere	\$8.99
<i>Create your own pizza. You pick the toppings. Toppings additional.</i>	

DLC

Antipasti

Calamari Fritti			\$7 99
<i>Lightly fried & served with marinara & roasted red pepper aioli.</i>			
Fried Fresh Mozzarella			\$5 99
<i>Homemade whole-milk cheese breaded & fried</i>			
Oysters on the half shell			\$6 99 a dozen
Soup of The Day	Cup \$2.99	Bowl	\$3.99
Mussels Fra' Diavolo			\$7 99
<i>Prince Edward Island black mussels in a spicy tomato sauce</i>			
Hot Spinach & Artichoke Dip			\$5 99
<i>Blended with Italian cheeses & served with toasted garlic rounds.</i>			
Mozzarella Caprese			\$6.99
<i>Fresh mozzarella, roma tomato & basil with balsamic.</i>			
Pasta Bené			\$6.99
<i>Sautéed shrimp and mushrooms in a balsamic buerre blanc sauce on toasted flat bread with pasta</i>			
Cold Antipasto for Two:			\$8 99
<i>Imported Italian meats & cheeses, roasted peppers, fresh mozzarella, roma tomato, marinated mushrooms, olives & basil.</i>			

Insalata

Bene Salad		\$1.99	
<i>Mixed greens, with choice of dressing</i>			
<i>Balsamic, ranch, blue cheese, house, low fat roasted red pepper, roasted garlic, thousand island</i>			
Caesar Classico		Small \$4.99	Large \$7.99
<i>Romaine lettuce, special dressing, croutons & parmesan.</i>			
Add grilled chicken	\$2.00		
Add grilled shrimp.	\$3.00		
Sicilian Chopped Salad		\$5.99	\$8.99
<i>Chopped greens, mixed garden vegetables, salami, pepperoni, prosciutto, fresh mozzarella, & provolone cheese</i>			
<i>In an Italian vinaigrette</i>			
Pollo Balsamico		\$6.99	\$9 99
<i>Balsamic marinated chicken, mixed greens, gorgonzola cheese, walnuts, cranberries & garden vegetables with a balsamic vinaigrette</i>			
Gamberi Caldo		\$6.99	\$9 99
<i>Warm jumbo shrimp, mixed greens & garden vegetables with a roasted garlic vinaigrette</i>			

Secondi Piatti

	Chicken	Veal
Marsala <i>Chicken or veal in a rich mushroom & marsala wine sauce</i>	\$12.99	\$14.99
Piccatta <i>Chicken or veal scallopine in a lemon & caper sauce</i>	\$12.99	\$14.99
Parmesan <i>Breaded chicken or veal with melted mozzarella & tomato sauce Served with linguini</i>	\$12.99	\$14.99
Chicken Franchese <i>Battered & lightly fried in a lemon & butter sauce.</i>	\$12.99	
Chicken Romano <i>Romano & parmesan crusted chicken in our picatta sauce.</i>	\$14.99	
Veal Saltimbocca <i>Veal scallopine with spinach, prosciutto & melted mozzarella with marsala sauce</i>		\$14.99
Shrimp Scampi <i>Jumbo shrimp in our butter & lemon scampi sauce with linguini</i>	\$13.99	
Shrimp Parmesan <i>Jumbo shrimp breaded & topped with tomato sauce & mozzarella cheese over linguini</i>	\$13.99	
Grilled Salmon <i>Basted in our Italian marinade <u>or</u> sundried tomato piccata</i>	\$14.99	
Eggplant Parmesan <i>Breaded eggplant with parmesan & mozzarella cheeses & marinara</i>	\$10.99	

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

28-LL-2003

APPLICATION FOR LIQUOR LICENSE

TYPE OR PRINT WITH BLACK INK

Notice: Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements.

SECTION 1 This application is for a:

- ☐ INTERIM PERMIT Complete Section 5
- ☒ NEW LICENSE Complete Sections 2, 3, 4, 13, 14, 15, 16, 17
- ☐ PERSON TRANSFER (Bars & Liquor Stores ONLY)
Complete Sections 2, 3, 4, 11, 13, 15, 16, 17
- ☐ LOCATION TRANSFER (Bars and Liquor Stores ONLY)
Complete Sections 2, 3, 4, 12, 13, 15, 16, 17
- ☐ PROBATE/WILL ASSIGNMENT/DIVORCE DECREE
Complete Sections 2, 3, 4, 9, 13, 15, 17 (fee not required)
- ☐ GOVERNMENT Complete Sections 2, 3, 4, 10, 13, 15, 16, 17

APR 1

SECTION 2 Type of ownership:

- ☐ J.T.W.R.O.S. Complete Section 6
- ☐ INDIVIDUAL Complete Section 6
- ☐ PARTNERSHIP Complete Section 6
- ☐ CORPORATION Complete Section 7
- ☒ LIMITED LIABILITY CO. Complete Section 7
- ☐ CLUB Complete Section 8
- ☐ GOVERNMENT Complete Section 10
- ☐ TRUST Complete Section 6
- ☐ OTHER Explain _____

SECTION 3 Type of license and fees.

LICENSE #: ~~12075481~~ 12075481

1. Type of License: Series #12
2. Total fees attached: \$ _____
- APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.**
- A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

SECTION 4 Applicant (All applicants must complete this section)

1. Applicant/Agent's Name: Ms. Taylor Todd Clinton
(Insert one name ONLY to appear on license) Last First Middle
2. Corp./Partnership/L.L.C.: T.C. Taylor, LLC B1028852
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: Pasta Bene B1011530
(Exactly as it appears on the exterior of premises)
4. Business Address: 6990 E. Shea Blvd Suite #101 Scottsdale Mar 85254
(Do not use PO Box Number) City COUNTY Zip
5. Business Phone: (480) 922-3474 Residence Phone: (602) 821-1457
6. Is the business located within the incorporated limits of the above city or town? ☒ YES ☐ NO
7. Mailing Address: 1320 W. Elliot Rd Suite 103-153 Tempe AZ 85284
City State Zip
8. Enter the amount paid for a 06, 07, or 09 license. \$ _____ (Price of License ONLY)

DEPARTMENT USE ONLY

Accepted by: [Signature] Date: 4/9/03 Lic. # 12075481

Fees: 100 100 48 \$ 248

Application Interim Permit Agent Change Club F. Prints TOTAL

PROCESSING APPLICATIONS TAKES APPROXIMATELY 90 DAYS, AND CIRCUMSTANCES OFTEN RESULT IN A LONGER WAITING PERIOD
YOU ARE CAUTIONED REGARDING PLANS FOR A GRAND OPENING, ETC., BEFORE FINAL APPROVAL AND ISSUANCE OF THE LICENSE

SECTION 5 Interim Permit:

If you intend to operate business while your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203 01.

There **MUST** be a valid license of the same type you are applying for currently issued to the location.

Enter the license number currently at the location. 12073131

Is the license currently in use? ☒ YES ☐ NO If no, how long has it been out of use? _____

ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION.

Edward LaCapra, declare that I am the CURRENT LICENSEE of the stated license and
(Print full name)
cation. I have read this application and the contents and all statements are true, correct and complete.

[Signature] State of Arizona County of Maricopa
(Signature) The foregoing instrument was acknowledged before me this
day of March, 2003.
Month Year
y commission expires on: March 10, 2006
(Signature of NOTARY PUBLIC)



SECTION 6 Individual or Partnership Owners:

Each person listed must submit a completed form "LIC0101", an "APPLICANT" type fingerprint card, and \$24 fee for each card.

Individual

Last	First	Middle	% Owned	Residence Address	City State Zip
			%		

Partnership Name. (Only the first partner listed will appear on license) _____

General-Limited	Last	First	Middle	% Owned	Residence Address	City State Zip
<input type="checkbox"/> <input type="checkbox"/>						
<input type="checkbox"/> <input type="checkbox"/>						
<input type="checkbox"/> <input type="checkbox"/>						
<input type="checkbox"/> <input type="checkbox"/>				%		

(ATTACH ADDITIONAL SHEET IF NECESSARY)

Is any person, other than the above, going to share in the profits/losses of the business? ☐ YES ☐ NO

SECTION 7 Corporation/Limited Liability Co..

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD

☐ CORPORATION

Complete questions 1, 2, 3, 5, 6, 7, 8

☐ LLC

Complete questions 1, 2, 4, 5, 6, 7 and attach copy of Articles of Org. and Operation Agreement.

LLLC

1. Name of Corporation/LLC.

(Exactly as it appears on Articles of Inc. or Articles of Org.)

2. Date Incorporated/Organized:

2003 APR -9 A 9:11

State where Incorporated/Organized:

3 AZ Corporation Commission File No.

Date authorized to do business in AZ:

4 AZ LLC File No.

Date authorized to do business in AZ:

5 Is Corp./LLC non-profit? ☐ YES ☐ NO If yes, give IRS tax exempt number:

6 List all directors/officers in Corporation/LLC.

Last	First	Middle	Title	Residence Address	City State Zip
Taylor	TODD	Clinton	Manager	1320 W. Elliot Rd	Tempe, AZ 85284

(ATTACH ADDITIONAL SHEET IF NECESSARY)

7 List stockholders or controlling members owning 10% or more:

Last	First	Middle	% Owned	Residence Address	City State Zip
Taylor	TODD	Clinton	100%	1320 W. Elliot Rd	Tempe, AZ 85284
			%		
			%		
			%		

(ATTACH ADDITIONAL SHEET IF NECESSARY)

8 If the corporation/LLC is owned by another entity, attach an ownership, and director/officer/members disclosure for the parent entity. Attach additional sheets as necessary in order to disclose real people.

SECTION 8 Club Applicants:

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 FEE FOR EACH CARD.

1 Name of Club:

Date Chartered:

(Exactly as it appears on Club Charter)

(Attach a copy of Club Charter)

2 Is club non-profit?

☐ YES

☐ NO

If yes, give IRS tax exempt number:

3 List officer and directors:

Last	First	Middle	Title	Residence Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store:

Current Licensee's Name _____
(Exactly as it appears on license) Last First Middle

Assignee's Name _____
Last First Middle

License Type _____ License Number _____ Date of Last Renewal _____

ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

SECTION 10 Government: (for cities, towns, or counties only)

Person to administer this license _____
Last First Middle

Assignee's Name: _____
Last First Middle

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

SECTION 11 Person to Person Transfer:

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY).

Current Licensee's Name _____ Entity _____
(Exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)

Corporation/L.L.C. Name _____
(Exactly as it appears on license)

Current Business Name: _____
(Exactly as it appears on license)

Current Business Address: _____

License Type _____ License Number: _____ Last Renewal Date: _____

Current Mailing Address (other than business): _____

Have all creditors, lien holders, interest holders, etc. been notified of this transfer? ☐ YES ☐ NO

Does the applicant intend to operate the business while this application is pending? ☐ YES ☐ NO If yes, complete section 5, attach fee, and current license to this application

I hereby relinquish my rights to the above described license to the applicant named in this application and hereby declare that the statements made in this section are true, correct and complete

_____, declare that I am the CURRENT LICENSEE of the stated license. I have read this
(Print full name)
application and the contents and all statements are true, correct and complete.

(Signature of CURRENT LICENSEE)

State of _____ County of _____
The foregoing instrument was acknowledged before me this
_____ day of _____,
Day of Month Month Year

My commission expires on _____

(Signature of NOTARY PUBLIC)

SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY)

APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE.

1. Current Business Name and Address:
(Exactly as it appears on license) _____
_____ DLLC _____
2. New Business Name and Address:
(Do not use PO Box Number) _____
_____ 2003 APR -9 A 9:11 _____
3. License Type _____ License Number. _____ Last Renewal Date. _____
4. What date do you plan to move? _____ What date do you plan to open? _____

SECTION 13 Questions for all in-state applicants.

1. Distance to nearest school: 2600 ft. Name/Address of school: Chapparal High School
(Regardless of distance) Secoya Elementary
2. Distance to nearest church: 2500 ft. Name/Address of church: Chapparal Catholic Church
(Regardless of distance) LDS Church
3. I am the: ☒ LESSEE ☐ SUBLESSEE ☐ OWNER ☐ PURCHASER (of premises)
4. If the premises is leased give lessors name and address Case, Huff & Sanchez, Inc.
340 East Palm Lane, Suite #304 PHX, AZ 85004
- 4a. Monthly rental/lease rate \$ 5,304.50 What is the remaining length of the lease? 6 yrs _____ mos
- 4b. What is the penalty if the lease is not fulfilled? \$ _____ or other put Lien or use Security Deposit
(give details - attach additional sheet if necessary)
5. What is the total business indebtedness of the applicant for this license/location excluding lease? \$ 250,000

Does any one creditor represent more than 10% of that sum? ☒ YES ☐ NO If yes, list below Total must equal 100%

Last	First	Middle	% Owed	Residence Address	City	State	Zip
Walker	Linda	Jean	100%	19777 N th 76 th Suite 3333	Scottsdale	Arizona	85255

(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for? (BE SPECIFIC) Restaurant / Bar
7. Has a license, or a transfer license for the premises on this application been denied by the state within the past one (1) year?
☐ YES ☒ NO If yes, attach explanation.
8. Does any spirituous liquor manufacturer, wholesaler, or employee, have any interest in your business? ☐ YES ☒ NO
9. Is the premises currently licensed with a liquor license? ☒ YES ☐ NO If yes, give license number and licensee's name:
License # 12073131 (Exactly as it appears on license) Name Edward La Capra

SECTION 14 Restaurant, or Hotel-Motel Applicants:

Is there a valid restaurant or hotel-motel liquor license at the proposed location? ☐ YES ☒ NO If yes, give licensee's name:

La Capra Edna E and license # 12073131
Last First Middle

If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending, consult A R S Section 4-203.01; and complete Section 5 of this application

All restaurant applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor

Do you understand that 40% of your annual gross revenue must be from food sales? ☒ YES ☐ NO

SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)

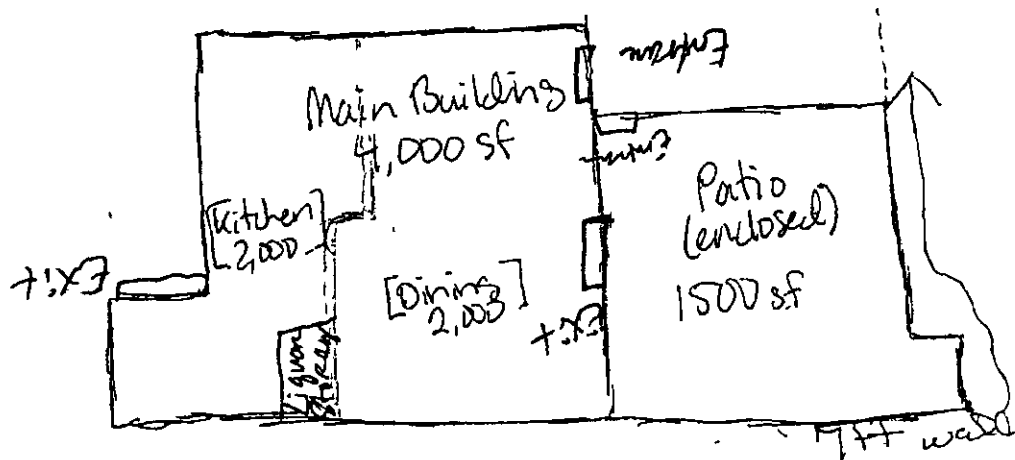
Check ALL boxes that apply to your licensed premises.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Entrances/Exits | <input checked="" type="checkbox"/> Liquor storage areas |
| <input type="checkbox"/> Drive-in windows | <input checked="" type="checkbox"/> Patio enclosures |
| <input type="checkbox"/> Service windows | <input type="checkbox"/> Under construction: estimated completion date _____ |

Restaurants and Hotel/Motel applicants must explicitly depict kitchen equipment and dining facilities.

The diagram below is the only area where spirituous liquor is to be sold, served, consumed, dispensed, possessed, or stored. Give the square footage or outside dimensions of the licensed premises.

DO NOT INCLUDE PARKING LOTS, LIVING QUARTERS, ETC.



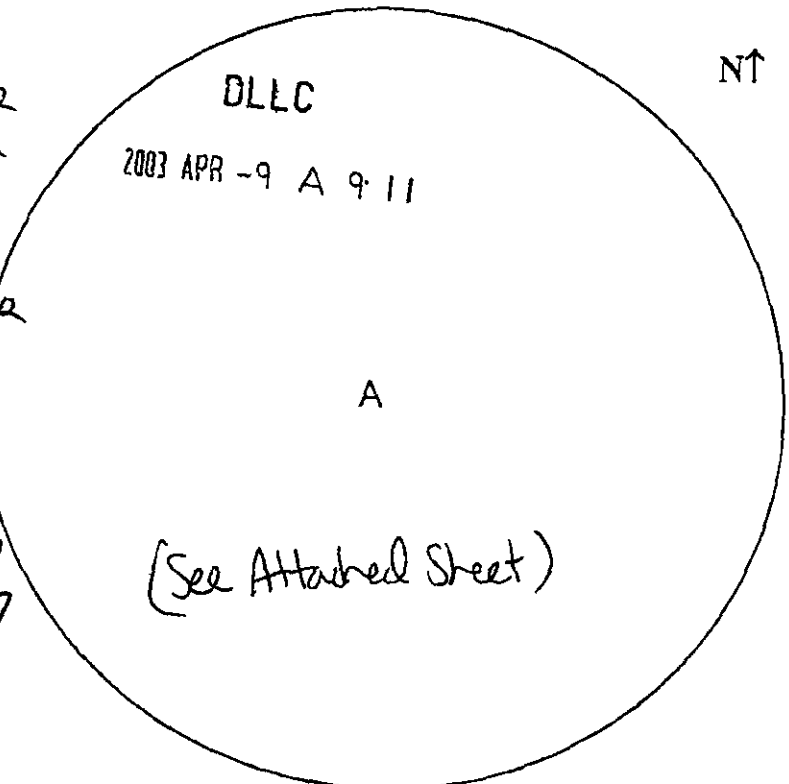
YOU MUST NOTIFY THE DEPARTMENT OF LIQUOR OF ANY CHANGES OF BOUNDARIES, ENTRANCES, EXITS, OR SERVICE WINDOWS MADE AFTER SUBMISSION OF THIS DIAGRAM.

SECTION 16 Geographical Data: A SAMPLE FOR THIS SECTION IS PROVIDED ON THE BACK OF THIS PAGE.

List below the exact names of all churches, schools, and spirituous liquor outlets within a one half mile radius of your proposed location

1. Parrot Bay Series #12
2. Ajo Als Series #12
3. Uptown Brewery Series #12
4. Clam Juggers Series #12
5. Eli's Series 6
6. Sushi on Shea Series #12
7. Maria When in Naples Series #12
8. Caspian Rest. Series #12
9. Walgreens Series #10
10. Handle Bar Series #12
11. K Conu. Store Series #7
12. Arco gas station Series #7
13. Chewon gas St. Series #7
14. Wild Oats Series #10
15. Drink water Lge Series 9

(ATTACH ADDITIONAL SHEET IF NECESSARY)



A = Your business name and identify cross streets.

SECTION 17 Signature Block:

I, Todd Taffer, declare that: 1) I am the APPLICANT (Agent/Club Member/Partner), making this
(Print name of APPLICANT/AGENT listed in Section 4 Question 1)
application; 2) I have read the application and the contents and all statements are true, correct and complete; 3) that this application is not
being made to defraud or injure any creditor, taxing authority, regulatory authority, or transferor, 4) that no other person, firm, or
corporation, except as indicated, has an interest in the spirituous liquor license for which these statements are made, and 5) that none of the
owners, partners, members, officers, directors or stockholders listed have been convicted of a felony in the past five (5) years

X Todd Taffer
(Signature)

State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this

9 day of April, 2003
Day of Month Month Year

My commission expires



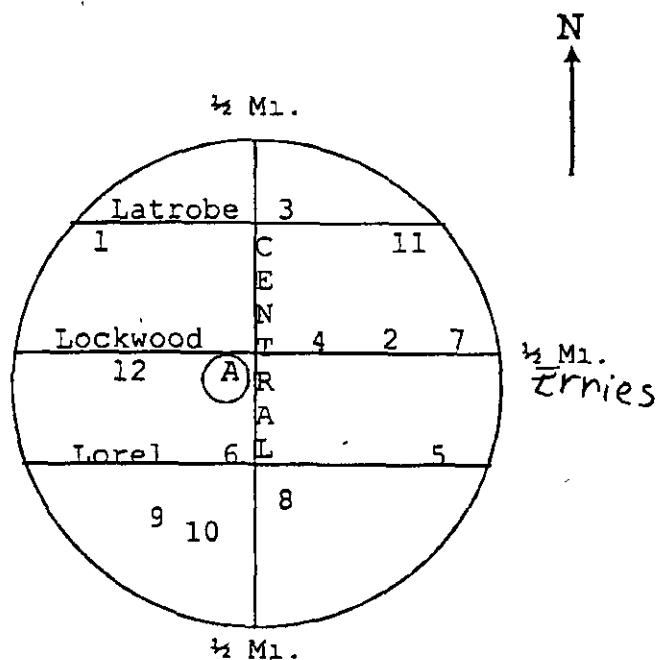
Juanita A. Esparza
(Signature of NOTARY PUBLIC)

SAMPLE
GEOGRAPHICAL DATA

n the area adjacent to the map provided below indicates your proposed location
nd the exact names of all churches, schools, and alcoholic beverage outlets
ithin a 1/2 mile radius of your proposed location.
See example below)

<u> = Applicant</u>	<u>Series 12</u>
<u>1 Pink Elephants</u>	<u>Series 06</u>
<u>2 Mama's Rest.</u>	<u>Series 12</u>
<u>3 Corner Liquors</u>	<u>Series 09</u>
<u>4 Joe's Groceries</u>	<u>Series 10</u>
<u>5 Lions Club</u>	<u>Series 14</u>
<u>6 Burgers R Us</u>	<u>Series 07</u>
<u>7 Pizza Perfect</u>	<u>Series 07</u>
<u>8 Billy Bobs Bar</u>	<u>Series 06</u>
<u>9 St. Anthony's Church</u>	
<u>0 St. Anthony's School</u>	
<u>1 Burbank Middle School</u>	
<u>2 First United Baptist Church</u>	
<u>3</u>	
<u>4</u>	
<u>5</u>	

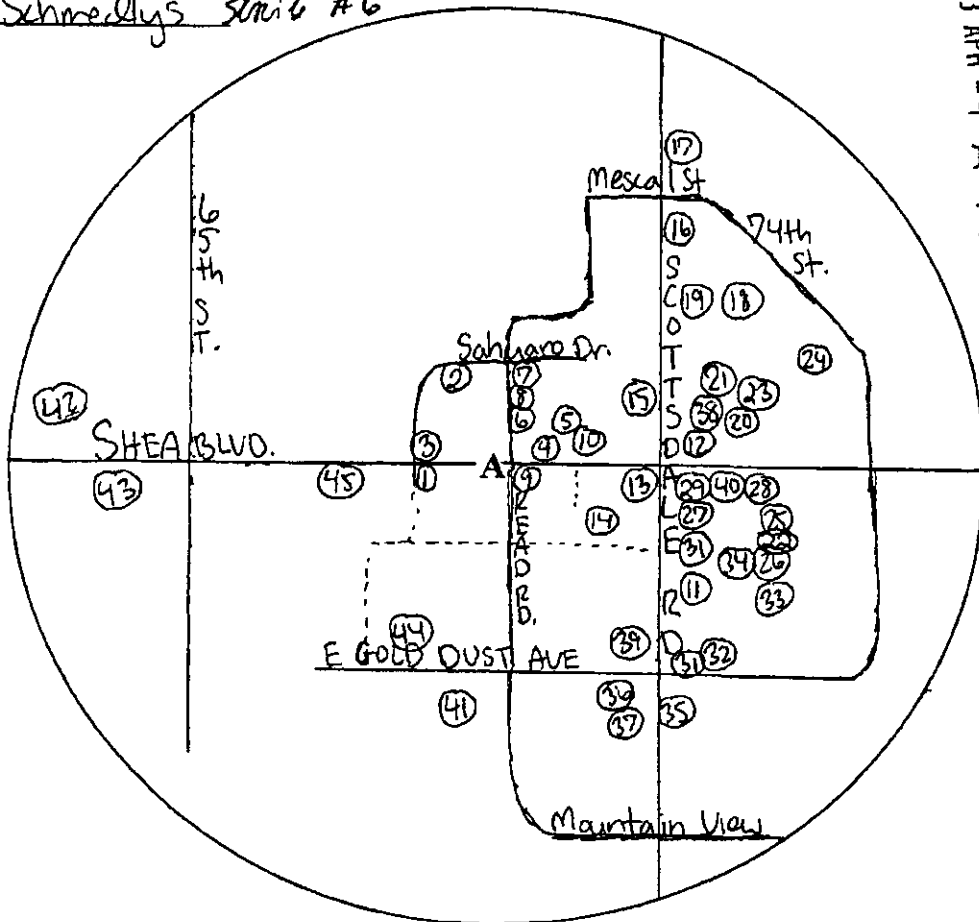
64



R.S. Section 4-207.A reads as follows:

. No retailers license shall be issued for any premises which are. at the time
he license application is received by the Director, within three hundred(300)
orizontal feet of a church, within three hundred(300) horizontal feet of a
ublic or private school building with kindergarten programs or any of
rades one(1) through twelve(12). or within three hundred(300) horizontal
eet of a fenced recreational area adjacent to such school building.

- 16) Lone Star Series #12
 17) Macayo's Mexican S. #12
 18) Guados Series #7
 19) Snacks O's Series #6
 20) Peking Palace Series #12
 21) Safeway Series #10
 22) Razzie's Series #6
 23) Blue Burrito Series #7
 24) Long Wings Series #7
 25) Ernie's Series #6
 26) Hacker's Series #6
 27) NYPD Series #7
 28) La Fonda Del Sol Series #12
 29) Rio Brazilian Series #12
 30) El Camino Series #6
 31) Swamp Stomp Series #12
 32) La Fonda Series #12
 33) Schmelly's Series #6
 34) Buzz Series #6
 35) Macaroni Grill Series #12
 36) Jetz Series #12
 37) California Pizza Kitchen Series #12
 38) Oso Drug Series #7
 39) Mobile Gas Series #7
 40) Chuckbox Series #12
 41) Chipporal High School
 42) Secoya Elementary
 43) Catholic Church (64th St)
 44) Church (67th St) LDS
 45) YMCA
 46)
 47)
 48)
 49)



2003 APR -9 A 9:11

DLIC

12 Payroll Records

- A Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. 4-119)
- C Employee time cards (actual document used to sign in and out each work day)
- D Payroll records for all employees showing hours worked each week and hourly wages

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented

REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.R.S. 210.A.7. AND A.R.S. 205.02.G.

A.R.S. 210.A.7. The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food

A.R.S. 205.02.G. For the purpose of this section.

1 "Restaurant" means an establishment which derives at least forty percent (40%) of its gross revenue from the sale of food

2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises, regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article

I, (print Licensee/Agent's Name):

Taylor Todd Clinton
Last First Middle

have read and fully understand all aspects of this statement.

State of Arizona County
of Maricopa

X [Signature] The foregoing instrument was acknowledged before me this 8th day of April 2003
(Signature of Licensee/Agent) Day of Month Month Year

My commission Expires 15 March 2003
Day of Month Month Year
[Signature]
(Signature of NOTARY PUBLIC)

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

HOTEL-MOTEL AND RESTAURANT LICENSES RECORDS REQUIRED FOR AUDIT OF SERIES #11 & #12 LICENSES

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

In the event of an audit, you will be asked to provide to the department any documents necessary to determine compliance with A.R.S 205.02.G Such documents requested may include however, are not limited to

- 1 All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises If you do not have all food or liquor invoices, please contact your vendors immediately and request copies of missing invoices These must be available for pick-up at the time of the Audit Interview Appointment If all food invoices are not available at that time, you may not be given credit for *all* food sales.
- 2 A list of *all* food and liquor vendors
- 3 The restaurant menu used during the audit period
- 4 A price list for alcoholic beverages during the audit period
- 5 Mark-up figures on food and alcoholic products during the audit period
- 6 A recent, *accurate* inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
- 7 Monthly Inventory Figures - beginning and ending figures for food and liquor
- 8 Chart of accounts (copy)
- 9 Financial Statements-Income Statements-Balance Sheets
- 10 General Ledger
 - A Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
 - 3) Guest Checks
 - 4) Coupons/Specials
 - 5) Any other evidence to support income from food and liquor sales
 - B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks
- 11 Tax Records
 - A Transaction Privilege Sales, Use and Severance Tax Return (copies)
 - B. Income Tax Return - city, state and federal (copies)
 - C Any supporting books, records, schedules or documents used in preparation of tax returns

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RESTAURANT OPERATION PLAN

LICENSE #

42050500

1 List by Make, Model and Capacity of your

Grill	Wolf Grill 4', Garland 8 Burner, Star 11 Burner, Jade 6 Burner
Oven	Frymaster Pasta Cooker, (2) Frymaster 30 lb. Deep Fry, Bakers Pride 2 Deck pizza oven
Freezer	Star 6 Burner w/ oven on bottom (1) Walk in Freezer 8x6 (1) Hobart undercounter Freezer 4'
Refrigerator	Walk in refer 15x8', (1) mcall 4' under counter,
72" Undercounter	(2) mcall sandwich tables 4', (1) Bevalir Pizza table
Sink	(2) compartment s/s 4' (2) Hand sinks s/s 2'
Dish Washing Facilities	Proclean low temp dishmachine, 3 comp. s/s sink for pots + p (2) dish sprayers, (3) s/s Dish tables 4'
Food Preparation Counter (Dimensions)	(2) 4' s/s tables (1) 10' s/s table (1) 6' s/s table (1) 15' s/s table
Other	(4) microwave oven, (1) Hobart Dough mixer,

2. Print the name of your restaurant:

Pasta Bene

3. Attach a copy of your menu (Breakfast, Lunch and Dinner including prices).

4. List the seating capacity for:

- a. Restaurant area of your premises [120]
- b. Bar area of your premises [+ 17]
- c. Total area of your premises [137]

5. What type of dinnerware and utensils are utilized within your restaurant?

☒ Reusable ☐ Disposable

6. Does your restaurant have a bar area that is distinct and separate from the restaurant seating? (If yes, what percentage of the public floor space does this area cover?) ☒ Yes 18 % ☐ No

7. What percentage of your public premises is used primarily for restaurant dining? (Does not include kitchen, bar, cocktail tables or game area.) 82 %

*Disabled individuals requiring special accommodations, please call the Department.

8. Does your restaurant Contain any games or television? ☒ Yes ☐ No
 (If yes, what types and how many? Pool tables, Video Games, Darts, etc.)
Includes 8 television sets

9 Do you have live entertainment or dancing? ☐ Yes ☒ No
 (If yes, what type and how often?)

10. Use space below or attach a list of employee positions and their duties to fully staff your business.

Fernando Navarrete (cook)	Steve Simenels (server)
Raul Medina (cook)	Chris Sosa (server)
Ivan Lopez (cook)	Anthony Sziklu (server)
MacLaro Rios (cook)	Julie Thayer (server)
Juan Valadez (cook)	Robert Sladek (bartender)
Olivero Curbens (cook)	Hollie Young (hostess)
Agripino Bora (dishwasher)	Dan Lopez (busboy)
Adib Hanna (prep cook)	Aaron Manzo (busboy)
Tyler Arnett (host)	
Stella Alvarez (server)	
Justin Warner (server)	
Joann Damico (server)	
Kim Johnson (server)	
Kim Marszowski (server)	

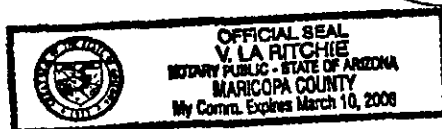
I, Todd Taylor, hereby declare that I am the APPLICANT filing this application. I have
 (Print full name)
 read this application and the contents and all statements true, correct and complete.

X [Signature]
 (Signature of APPLICANT)

State of Arizona County of Maricopa
 The foregoing instrument was acknowledged before me this
8 day of March 2003.
 Day of Month Month Year

My commission expires on: March 10, 2006

[Signature]
 (Signature of NOTARY PUBLIC)



800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



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(520) 628-6595

801,241

QUESTIONNAIRE

SOCIAL SECURITY AND BIRTHDATE INFORMATION IS CONFIDENTIAL BY LAW AND CANNOT BE DISSEMINATED TO THE PUBLIC

Read Carefully, this instrument is a sworn document. Type or print with black ink

An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH OWNER, AGENT, PARTNER, STOCKHOLDER (10% OR MORE), MEMBER, OFFICER OR MANAGER ALSO EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT THE DEPT FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY THE DEPARTMENT OF LIQUOR THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE

There is a \$24.00 processing fee for each fingerprint card submitted.
A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

Liquor License # 12075481
P1043957 (If the location is currently licensed)

1 Check appropriate box → ☐ Owner ☒ Partner ☐ Stockholder ☐ Member ☐ Officer ☐ Agent ☒ Manager(Only)
☐ Other (Complete Questions 1-20 & 24) Complete All Questions except # 14, 14a & 25
Licensee or Agent must complete # 25 for a Manager Licensee or Agent must complete # 25

2 Name: Taylor Todd Clinton Date of Birth: [REDACTED]
Last First Middle (This Will Not Become a Part of Public Records)

3 Social Security Number: [REDACTED] Drivers License #: D02665476 State: Arizona
(This Will Not Become a Part of Public Records)

4 Place of Birth: Tucson AZ US Height: 5-10 Weight: 190 Eyes: Blue Hair: BR
City State Country (not country)

5 Marital Status ☒ Single ☐ Married ☐ Divorced ☐ Widowed Residence (Home) Phone (602) 595-6929

6 Name of Current or Most Recent Spouse: _____ Date of Birth _____
(Last all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden

7 You are a bona fide resident of what state? Arizona If Arizona, date of residency. 3/24/76

8 Telephone number to contact you during business hours for any questions regarding this document. (602) 821-1457

9 If you have been a resident less than three (3) months, submit a copy of driver's license or voter registration card.

10 Name of Licensed Premises: Pasha Bena Premises Phone (480) 922-3474

11 Licensed Premises Address: 6990 E. Shea Blvd Suite 101 Scottsdale, AZ 85284
Street Address (Do not use PO Box #) City County Zip

12 List your employment or type of business during the past five (5) years, if unemployed part of the time, list those dates List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Give street address, city, state & zip)
10/97	CURRENT	Manager	Canine Country Club 2332 E. Washington St., AZ 85034

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION <

13 Indicate your residence address for the last five (5) years

FROM Month/Year	TO Month/Year	RESIDENCE Street Address	City	State	Zip
3/98	CURRENT	2332 E. Washington St.	Phx	AZ	85034
4/03	CURRENT	1320 W. Eliseo Rd, #103-153	Tempe	AZ	85284

If you checked the Manager box on the front of this form skip to # 15

- 14 As an Owner, Agent, Partner, Stockholder, Member or Officer, will you be physically present and operating the licensed premises? If you answered YES, how many hrs/day? 12, answer #14a below If NO, skip to #15. ☒ YES ☐ NO
- 14a Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.

15. Have you EVER been detained, cited, arrested, indicted or summoned into court for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related ☒ YES ☐ NO
16. Have you EVER been convicted, fined, posted bond, been ordered to deposit bail, imprisoned, had sentence suspended, placed on probation or parole for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☐ YES ☒ NO
- 17 Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses PENDING against you or ANY entity in which you are now involved? ☐ YES ☒ NO
- 18 Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor APPLICATION OR LICENSE rejected, denied, revoked, suspended or fined in this or any other state? ☐ YES ☒ NO
19. Has anyone EVER filed suit or obtained a judgment against you in a civil action, the subject of which involved fraud or misrepresentation of a business, professional or liquor license? ☐ YES ☒ NO
20. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director, or manager on any other liquor license in this or any other state? ☐ YES ☒ NO

If any answer to Questions 15 through 20 is "YES" YOU MUST attach a signed statement giving complete details. Please be sure to include dates, agencies involved and dispositions.

If you checked the Manager box on the front of this form, fill in #21-23 and 24, all others skip the following box (21-23) and go to # 24

Manager Section

21. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to #21 is "NO" course must be completed BEFORE ISSUANCE of a new license OR APPROVAL on an existing license.
- 22 Do you make payments to the licensee? ☐ YES ☒ NO If "yes", how much? \$ _____ per month Total debt to licensee \$ _____
- 23 Is there a formal written contract or agreement between you and the licensee relating to the operation or management of this business? ☐ YES ☒ NO If "yes", attach a copy of such agreement

24 I, Todd Clinton Taylor, hereby declare that I am the APPLICANT filing this questionnaire.
(Print full name of Applicant)

I have read this questionnaire and the contents and all statements are true, correct and complete

X Todd Taylor State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this 28 day of April 2003.
(Signature of NOTARY PUBLIC)

My commission expires on: 3 10 06
Day of Month Month Year

FILL IN THIS SECTION ONLY IF YOU ARE A LICENSEE OR AGENT APPROVING A MANAGER APPLICATION Licensee or Agent Approval of Manager

25 I, (Print Licensee/Agent's Name) _____
Last Middle First
Hereby authorize the applicant to act as manager for the named liquor license
State of _____ County of _____
The foregoing instrument was acknowledged before me this _____ day of _____, _____
Day of Month Month Year
(Signature of LICENSEE/AGENT)

My commission expires on: _____
Day of Month Month Year (Signature of NOTARY PUBLIC)

Explanation of Offense

Date 11/1996

Tempe Police Department

Location Priest and Elliot in Tempe, AZ

I made a U-turn at the red light to head westbound on Elliot. My gas light was on, so I entered Circle K. I pulled up to a pump, shut off the car, and began to walk towards the store. A motorcycle cop then pulled up next to me and asked why I was in such a hurry. I said I was low on gas. He then said he smelled beer on my breath. I took the field sobriety test and the hand-held breathalyzer. The officer then brought in the breath test van. There were inconsistencies in the test results - one said I was low, the other said I was above 10. That officer didn't know how to work it, so another had to do the testing.

I hired a lawyer to fight it. The case never went to court, and was dropped down to a 'minor in consumption while in a vehicle'. I paid a fine, did not serve time, got 2 points against my license, and took an Alcohol Awareness Class.

Todd Taylor
Todd Taylor

2003 APR -9 A 9 11

DLIC

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

CERTIFICATION OF COMPLETED ALCOHOL TRAINING PROGRAM(S)

OBTAIN ORIGINALS OF THIS FORM FROM DLLC-DO NOT PHOTOCOPY. DOCUMENT IS COMPUTER SCANNED. TYPE OR PRINT WITH BLACK INK.

ALCOHOL TRAINING PROGRAM INDIVIDUAL INFORMATION

TODD TAYLOR
Individual Name (Print)
Todd Taylor
Individual Signature

2003 ALE

3/29/2003
Date Training Completed

TYPE OF TRAINING COMPLETED TRAINER MUST CHECK YES OR NO FOR EACH TYPE

<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO BASIC	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ON SALE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO MANAGEMENT	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO OFF SALE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO BOTH	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO OTHER

IF TRAINEE IS EMPLOYED BY A LICENSEE:

NAME OF THE LICENSEE

BUSINESS NAME

LIQUOR LICENSE NUMBER

ALCOHOL TRAINING PROGRAM PROVIDER INFORMATION

A B C, ALCOHOL AWARENESS TASK FORCE

Company or Individual Name

5052 S. Ash Ave., Suite 116

Address

Tempe, Az., 85282

(480) 777-2333

City

State

Zip

Phone

I Certify the above named individual has successfully completed the specified program(s)

[Signature]
Trainer Signature

JARED REPIWASKI
Trainer Name (Print)

3-29-03
Date

Trainer give original of completed form to trainee, photocopy and maintain completed document for your records

Mandatory Liquor Law Training for all new applications submitted after Nov. 1, 1997. A.R.S. Section 4-112(G)(2). Completion of the Liquor License Training Courses is required at the issuance of a license.

The person(s) required to attend both the Basic Liquor Law and Management Training, (either on-sale or off-sale), will include all of the following owner(s), licensee(s) or manager(s) WHO ARE ACTIVELY INVOLVED IN THE DAY TO DAY OPERATION OF THE BUSINESS. Proof of attendance within the last five years for the required courses must be submitted to the Department before the license application is considered complete.

Before acceptance of a Manager's Questionnaire and/or Agent Change for an existing license, proof of attendance for the Basic Liquor Law and Management Training (either on-sale or off-sale) will be required.

LIC 1021 10/2001

Disabled individuals requiring special accommodations please call (602) 542-6051

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Phoenix AZ 85007-2934
(602) 542-5141



400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

801, 241

QUESTIONNAIRE

SOCIAL SECURITY AND BIRTHDATE INFORMATION IS CONFIDENTIAL BY LAW AND CANNOT BE DISSEMINATED TO THE PUBLIC

Read Carefully, this instrument is a sworn document. Type or print with black ink
An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH OWNER, AGENT, PARTNER, STOCKHOLDER (10% OR MORE), MEMBER, OFFICER OR MANAGER. ALSO EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT THE DEPT. FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY THE DEPARTMENT OF LIQUOR. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE.

There is a \$24.00 processing fee for each fingerprint card submitted.

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44-6852)

Liquor License # 12075481
P1043958 (If the location is currently licensed)

1. Check appropriate box → ☐ Owner ☒ Partner ☐ Stockholder ☐ Member ☐ Officer ☐ Agent ☒ Manager(Only)
☐ Other (Complete Questions 1-20 & 24) Complete All Questions except # 14, 14a & 25
Licensee or Agent must complete # 25 for a Manager Licensee or Agent must complete # 25

2. Name: Karr Zachary Benjamin Date of Birth [REDACTED]
Last First Middle (This Will Not Become a Part of Public Records)

3. Social Security Number: [REDACTED] Drivers License #. B13646149 State: AZ
(This Will Not Become a Part of Public Records)

4. Place of Birth: Salt Lake City Utah USA Height: 5'10" Weight: 220 Eyes: BLU Hair: BLD
City State Country (not county)

5. Marital Status ☒ Single ☐ Married ☐ Divorced ☐ Widowed Residence (Home) Phone: (602) 274-6238

6. Name of Current or Most Recent Spouse: _____ Date of Birth _____
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden

7. You are a bona fide resident of what state? AZ If Arizona, date of residency: 06/16/1994

8. Telephone number to contact you during business hours for any questions regarding this document 480 922-3474

9. If you have been a resident less than three (3) months, submit a copy of driver's license or voter registration card

10. Name of Licensed Premises Pasta Bene Premises Phone: 480 922-3474

11. Licensed Premises Address: 6990 E Shea Blvd #101 Scottsdale Maricopa 85254
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years, if unemployed part of the time, list those dates List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Give street address, city, state & zip)
11/2001	CURRENT	Student	ASU 3302 N. 7th St #163 Phoenix AZ 85014
11/1996	11/2001	Manager	Island Kinetics 6002 S. Ash Ave Tempe AZ 85283

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 4

13. Indicate your residence address for the last five (5) years

FROM Month/Year	TO Month/Year	RESIDENCE Street Address	City	State	Zip
2/1/03	CURRENT	3302 N 7th St. # 163	Phoenix	AZ	85014
2/01/00	2/01/03	750 W Baseline Rd. # 2138	Tempe	AZ	85283
7/27/97	2/1/03	11 E Bell Rd. #137	Phoenix	AZ	85022

If you checked the Manager box on the front of this form skip to # 15

- 14 As an Owner, Agent, Partner, Stockholder, Member or Officer, will you be physically present and operating the licensed premises? If you answered YES, how many hrs/day? 8, answer #14a below. If NO, skip to #15. ☒ YES ☐ NO
- 14a. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☒ YES ☐ NO
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.

15. Have you EVER been detained, cited, arrested, indicted or summoned into court for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☒ YES ☒ NO
- 16 Have you EVER been convicted, fined, posted bond, been ordered to deposit bail, imprisoned, had sentence suspended, placed on probation or parole for violation of ANY law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related. ☐ YES ☒ NO
17. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses PENDING against you or ANY entry in which you are now involved? ☐ YES ☒ NO
18. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor APPLICATION OR LICENSE rejected, denied, revoked, suspended or fined in this or any other state? ☐ YES ☒ NO
- 19 Has anyone EVER filed suit or obtained a judgment against you in a civil action, the subject of which involved fraud or misrepresentation of a business, professional or liquor license? ☐ YES ☒ NO
20. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director, or manager on any other liquor license in this or any other state? ☐ YES ☒ NO

If any answer to Questions 15 through 20 is "YES" YOU MUST attach a signed statement giving complete details. Please be sure to include dates, agencies involved and dispositions.

If you checked the Manager box on the front of this form, fill in #21-23 and 24, all others skip the following box (21-23) and go to # 24

Manager Section

21. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof) ☐ YES ☐ NO
If the answer to #21 is "NO" course must be completed BEFORE ISSUANCE of a new license OR APPROVAL on an existing license.
22. Do you make payments to the licensee? ☐ YES ☐ NO If "yes", how much? \$ _____ per month Total debt to licensee \$ _____
- 23 Is there a formal written contract or agreement between you and the licensee relating to the operation or management of this business? ☐ YES ☐ NO If "yes", attach a copy of such agreement

24. I, Zachary Benjamin Karr, hereby declare that I am the APPLICANT filing this questionnaire.
(Print full name of Applicant)

I have read this questionnaire and the contents and all statements are true, correct and complete.

X Zachary Benjamin Karr State of Arizona County of Maricopa
(Signature of Applicant) OFFICIAL SEAL The foregoing instrument was acknowledged before me this
ANTOINETTE SANDOVAL Notary Public - State of Arizona
MARICOPA COUNTY 31st day of March 2003.
My Commission Expires July 22, 2006
My commission expires on: 7-27-06 Day of Month Month Year
Antoinette Sandoval (Signature of NOTARY PUBLIC)

FILL IN THIS SECTION ONLY IF YOU ARE A LICENSEE OR AGENT APPROVING A MANAGER APPLICATION

Licensee or Agent Approval of Manager

25. I, (Print Licensee/Agent's Name): Taylor Clinton Todd
Last Middle First

Hereby authorize the applicant to act as manager for the named liquor license.

X Todd Taylor State of Arizona County of Maricopa
(Signature of LICENSEE/AGENT) The foregoing instrument was acknowledged before me this
day of April 2003.
Day of Month Month Year
Antoinette Sandoval (Signature of NOTARY PUBLIC)

My commission expires on _____ Year

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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2003 APR -9 A 9 11
CERTIFICATION OF COMPLETED ALCOHOL TRAINING PROGRAM(S)

OBTAIN ORIGINALS OF THIS FORM FROM DLLC-DO NOT PHOTOCOPY. DOCUMENT IS COMPUTER SCANNED TYPE OR PRINT WITH BLACK INK.

ALCOHOL TRAINING PROGRAM INDIVIDUAL INFORMATION

Zach Karr

Individual Name (Print)

Zach Karr

Individual Signature

TYPE OF TRAINING COMPLETED

TRAINER MUST CHECK YES OR NO FOR EACH TYPE

2 15 03

Date Training Completed

☒ YES ☐ NO BASIC

☒ YES ☐ NO ON SALE

☐ YES ☒ NO MANAGEMENT

☐ YES ☒ NO OFF SALE

☐ YES ☒ NO BOTH

☐ YES ☒ NO OTHER

IF TRAINEE IS EMPLOYED BY A LICENSEE:

NAME OF THE LICENSEE

BUSINESS NAME

LIQUOR LICENSE NUMBER

ALCOHOL TRAINING PROGRAM PROVIDER INFORMATION

A B C, ALCOHOL AWARENESS TASK FORCE

Company or Individual Name

5032 S. Ash Ave., Suite 116

Address

Tempe, Az., 85282

(480) 777-2333

City

State

Zip

Phone

I Certify the above named individual has successfully completed the specified program(s)

JARED REYNOLDS

Trainer Name (Print)

2-15-03

Date

Trainer give original of completed form to trainee, photocopy and maintain completed document for your records

Mandatory Liquor Law Training for all new applications submitted after Nov 1, 1997 A.R.S. Section 4-112(G)(2)
Completion of the Liquor License Training Courses is required at the issuance of a license

The person(s) required to attend both the Basic Liquor Law and Management Training (either on-sale or off-sale) will include all of the following owner(s) licensee/agent or manager(s) **WHO ARE ACTIVELY INVOLVED IN THE DAY TO DAY OPERATION OF THE BUSINESS.**
Proof of attendance within the last five years for the required courses must be submitted to the Department before the license application is considered complete.

Before acceptance of a Manager's Questionnaire and/or Agent Change for an existing license, proof of attendance for the Basic Liquor Law and Management Training (either on-sale or off-sale) will be required.

UC 1021 10/2001

Disabled individuals requiring special accommodations please call (602) 542-9051

COMMISSIONERS
MARC SPITZER - Chairman
JIM IRVIN
WILLIAM A. MUNDALL
JEFF HAYCH-MILLER
MIKE GLEASON



ARIZONA CORPORATION COMMISSION

BRIAN C. MONTELL
Executive Secretary
JOANNE C. MACDONNELL
Director, Corporations Division

March 15, 2003

MICHAEL E. DUCKWORTH, P.C.
7500 E. BUTTERUS DR.
SUITE 101
SCOTTSDALE, AZ 85260

RE: T.C. TAYLOR, LLC
File Number: L-1069055-0

We are pleased to notify you that your Articles of Organization were filed on March 14, 2003.

You must publish a notice of the filing of your Articles of Organization OR alternatively, you may publish the Articles of Organization in their entirety. The publication must be in a newspaper of general circulation in the county of the known place of business, in Arizona as filed with the Commission, for three (3) consecutive publications.

For your convenience we have provided a Notice of Publication form. Please complete this form, in its entirety, and submit to the newspaper of your choice. An affidavit from the newspaper, evidencing such publication, must be delivered to the Commission for filing WITHIN NINETY (90) DAYS from the date of this letter.

The Commission strongly recommends that you periodically check Commission records regarding the corporation. The Commission web site www.cc.state.az.us/corp contains information specific to each Limited Liability Company of record and is a good general source of information.

If you have any questions or need further information, please contact us at (602) 542-3135 in Phoenix, (520) 628-6560 in Tucson, or Toll Free (Arizona residents only) at 1-800-345-5019.

Sincerely,

RATIS NASIC
Examiner
Corporations Division

LL:13
Rev: 01/2003

2003 APR -9
DLLO

STATE OF ARIZONA

ACC/FAX

DATE FILED

L-1069055-0
MAR 14 2003

ARTICLES OF ORGANIZATION

DATE APPR 03-14-03
TERM _____
BY DAVE WATKINS

T. C. Taylor, LLC

KNOW ALL MEN BY THESE PRESENTS:

That we, the below-named, do hereby associate ourselves together for the purpose of forming a limited liability company under the laws of the State of Arizona, and do hereby adopt the following Articles of Organization:

1. The name of this limited liability company shall be: T.C. Taylor, LLC *OK*
(the "Company")
2. The Company is organized to transact any and all lawful business for which a limited liability company may be organized pursuant to ARS §§ 29-601 et seq.
3. The name and business address of the initial Statutory Agent of the Company is:

Michael E. Duckworth, Esq.
7500 E. Butherus Dr., Suite 101
Scottsdale, AZ 85260
4. The Company's registered office address and known place of business is:

6990 E. Shea Blvd.
Suite 101
Scottsdale, AZ 85254
5. Management of the Company is vested in the Manager(s). The name and address of the initial Manager of the Company is:

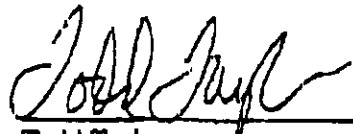
Todd Taylor
6990 E. Shea Blvd
Suite 101
Scottsdale, AZ 85254
6. The Company shall continue in existence in perpetuity, unless and until it is dissolved voluntarily or involuntarily in accordance with Arizona law.
7. Except as specifically provided for in the Arizona Limited Liability Company Act, A.R.S. § 29-601 et. seq., the private property of the organizers, members, managers, employees, officers or agents of the Company shall not be liable, solely by reason of

APR - 9 A 11

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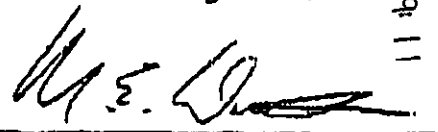
being an organizer, member, manager, employee, officer or agent, for the debts, obligations and liabilities of the Company, whether arising out of contract or tort, under a judgment, decree or order of a court, or otherwise.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13th day of March, 2003.


Todd Taylor
Organizer

ACCEPTANCE BY STATUTORY AGENT:

I, Michael E. Duckworth, having been designated to act as Statutory Agent for the Company, hereby consent to act in that capacity until removal or resignation is submitted in accordance with Arizona Revised Statutes.


Michael E. Duckworth
Statutory Agent

Dated: March 13, 2003

2003 APR - 9
D.L.C.

STATE OF ARIZONA
REST
DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE

License 12073131

Issue Date: 1/4/1996

Expiration Date: 3/31/2004

Issued To
EDWARD LA CAPRA, Agent
ARIZONA SEAFOOD INC, Owner

Restaurant

Location
PASTA BENE
6990 E SHEA BLVD
SCOTTSDALE, AZ 85254

Mailing Address
EDWARD LA CAPRA
ARIZONA SEAFOOD INC
PASTA BENE
6990 E SHEA BLVD
SCOTTSDALE, AZ 85254

EXP 3  1/2004

POST THIS LICENSE IN A CONSPICUOUS PLACE

2003 APR -9 A 9:11



Lunch Menu

Pasta



Fettuccini Alfredo	\$5.99
<i>Fettuccini pasta in our creamy alfredo sauce.</i>	
Penne Alla Vodka	\$6.99
<i>Prosciutto, onions & a splash of vodka in a pink cream sauce.</i>	
Capellini Pomodoro	\$5.99
<i>Angelhair pasta in our fresh and light tasting tomato sauce.</i>	
Ravioli Formaggio	\$5.99
<i>Cheese ravioli, with our marinara sauce & melted mozzarella.</i>	
Spinach Ravioli	\$5.99
<i>Spinach ravioli, in a gorgonzola cream sauce.</i>	
Linguini con Meatballs or Sausage Ragù	\$5.99
<i>Linguini in a meat flavored tomato sauce</i> <i>Choose meatballs <u>or</u> Italian sweet pork sausage <u>or</u> a combo.</i>	
Linguini Bolognese	\$5.99
<i>Linguini pasta in our beef and pork meat sauce</i>	
Capellini Di Mare	\$11.99
<i>Angelhair pasta, shrimp, clams, mussels, & calamari</i> <i>in a seafood infused red sauce.</i>	
Linguini con Vongole	\$9.99
<i>Tender clams in a white <u>or</u> red clam broth.</i>	

Pollo & Vitello

	Veal	Chicken
Marsala	\$9.99	\$7.99
<i>Chicken or veal in a rich mushroom & marsala wine sauce</i>		
Piccata	\$9.99	\$7.99
<i>Chicken or veal scallopine in a lemon & caper sauce.</i>		
Parmigiana	\$9.99	\$7.99
<i>Breaded chicken or veal with melted mozzarella & tomato sauce</i> <i>Served with linguini marinara.</i>		
Chicken Francese	\$7.99	
<i>Battered & lightly sautéed in a lemon & butter sauce</i>		

2003 APR - 9 A 9 11

DELL



Ingalata



Bené Salad

\$1.99

Mixed greens, with choice of dressing

Caesar Classico

Small Large

\$4.99

\$7.99

Romaine lettuce, special dressing, croutons & parmesan

Add grilled chicken. \$2.00

Add grilled shrimp. \$3.00

Sicilian Chopped Salad

\$5.99

\$8.99

Chopped greens, mixed garden vegetables, salami, pepperoni, prosuitto, fresh mozzarella, & provolone cheese in an Italian vinaigrette

Pollo Balsamico

\$6.99

\$9.99

Balsamic marinated chicken, mixed greens, gorgonzolla cheese, walnuts, cranberries & garden vegetables with a balsamic vinaigrette

Gamberi Caldo

\$6.99

\$9.99

Warm jumbo shrimp, mixed greens & garden vegetables with a roasted garlic vinaigrette

Panini Caldo

Hot Sandwiches

Chicken Parmesan Panini

\$7.99

Breaded chicken, tomato sauce & mozzarella cheese

Meatball Parmesan Panini

\$7.99

Beef & pork meatballs, melted mozzarella, & tomato sauce.

Veal Parmesan Panini

\$8.99

Breaded veal, tomato sauce & mozzarella cheese.

Pollo Panini

\$8.99

Grilled chicken, sliced tomato, roasted peppers & melted mozzarella cheese Balsamic dressing.

Panini Fredo

Cold Sandwiches

Rustico

\$8.99

Prosuitto, fresh mozzarella, tomato, roasted peppers & basil Balsamic dressing.

Palermo

\$7.99

Genoa salami, cappocolo & provolone Balsamic dressing.

Panini served with a side salad or penne marinara

Pasta della Casa

Fettuccini Alfredo	\$9.99
<i>Fettuccini pasta in our alfredo sauce</i>	
Gnocchi	\$10.99
<i>Potato pasta in a pink alfredo sauce.</i>	
Penne Alla Vodka	\$9.99
<i>Prosciutto, onions & a splash of vodka in a pink cream sauce.</i>	
Capellini Pomodoro	\$9.99
<i>Angel hair pasta in our fresh and light tasting tomato sauce.</i>	
Linguini con Vongole	\$13.99
<i>Tender whole clams in a white <u>or</u> red sauce</i>	
Ravioli Formaggio	\$9.99
<i>Cheese ravioli, with our marinara sauce & melted mozzarella</i>	
Spinach Ravioli	\$9.99
<i>Spinach ravioli, in a gorgonzola cream sauce</i>	
Linguini con Meatballs or Sausage Ragù	\$9.99
<i>Linguini in a meat flavored tomato sauce</i>	
<i>Choose meatballs <u>or</u> Italian sweet pork sausage <u>or</u> a combo.</i>	
Shrimp Romano	\$14.99
<i>Romano crusted shrimp in a pink cream sauce over fettuccini</i>	
Tri Color Tortellini Alfredo	\$9.99
<i>Three cheese tortellini pasta in our alfredo sauce</i>	
Linguini Bolognese	\$9.99
<i>Linguini pasta in our beef and pork meat sauce.</i>	
Capellini Di Mare	\$14.99
<i>Angel hair pasta, shrimp, clams, mussels, & calamari in a seafood infused red sauce.</i>	
Penne Sinatra	\$14.99
<i>Penne pasta topped with our Chicken Romano in a spicy pink cream sauce</i>	
Meat Lasagna	\$9.99
<i>Beef & pork within layers of ricotta cheese & red sauce.</i>	
Bené Baked Ziti	\$12.99
<i>Penne pasta baked with ricotta, mozzarella, parmesan cheeses & a touch of marinara sauce with meatballs.</i>	

Pizza

Margherita	\$8.99
<i>Pomodoro sauce, fresh mozzarella, olive oil & basil</i>	
Quattro Formaggio	\$9.99
<i>Four cheese Fresh mozzarella, fontina, parmesan & provolone</i>	
Mediterranean	\$9.99
<i>Kalamata olives, sundried tomato, feta cheese, spinach, red onion, pizza sauce & mozzarella cheese.</i>	
Ti Piacere	\$8.99
<i>Create your own pizza You pick the toppings Toppings additional</i>	

DLIC

Antipasti

Calamari Fritti			\$7.99
<i>Lightly fried & served with marinara & roasted red pepper aioli.</i>			
Fried Fresh Mozzarella			\$5.99
<i>Homemade whole-milk cheese breaded & fried.</i>			
Oysters on the half shell			\$6.99 a dozen
Soup of The Day	Cup \$2.99	Bowl \$3.99	
Mussels Fra' Diavolo			\$7.99
<i>Prince Edward Island black mussels in a spicy tomato sauce</i>			
Hot Spinach & Artichoke Dip			\$5.99
<i>Blended with Italian cheeses & served with toasted garlic rounds</i>			
Mozzarella Caprese			\$6.99
<i>Fresh mozzarella, roma tomato & basil with balsamic.</i>			
Pasta Bené			\$6.99
<i>Sautéed shrimp and mushrooms in a balsamic bierre blanc sauce on toasted flat bread with pasta.</i>			
Cold Antipasto for Two:			\$8.99
<i>Imported Italian meats & cheeses, roasted peppers, fresh mozzarella, roma tomato, marinated mushrooms, olives & basil</i>			

Insalata

Bené Salad		\$1.99	
<i>Mixed greens, with choice of dressing.</i>			
<i>Balsamic, ranch, blue cheese, house, low fat roasted red pepper, roasted garlic, thousand island</i>			
Caesar Classico		Small \$4.99	Large \$7.99
<i>Romaine lettuce, special dressing, croutons & parmesan.</i>			
Add grilled chicken	\$2.00		
Add grilled shrimp	\$3.00		
Sicilian Chopped Salad		\$5.99	\$8.99
<i>Chopped greens, mixed garden vegetables, salami, pepperoni, prosciutto, fresh mozzarella, & provolone cheese.</i>			
<i>In an Italian vinaigrette</i>			
Pollo Balsamico		\$6.99	\$9.99
<i>Balsamic marinated chicken, mixed greens, gorgonzola cheese, walnuts, cranberries & garden vegetables with a balsamic vinaigrette.</i>			
Gamberi Caldo		\$6.99	\$9.99
<i>Warm jumbo shrimp, mixed greens & garden vegetables with a roasted garlic vinaigrette</i>			

Secondi Piatti

	Chicken	Veal
Marsala <i>Chicken or veal in a rich mushroom & marsala wine sauce</i>	\$12.99	\$14.99
Piccatta <i>Chicken or veal scallopine in a lemon & caper sauce.</i>	\$12.99	\$14.99
Parmesan <i>Breaded chicken or veal with melted mozzarella & tomato sauce. Served with linguini</i>	\$12.99	\$14.99
Chicken Franchese <i>Battered & lightly fried in a lemon & butter sauce.</i>	\$12.99	
Chicken Romano <i>Romano & parmesan crusted chicken in our picatta sauce</i>	\$14.99	
Veal Saltimbocca <i>Veal scallopine with spinach, prosciutto & melted mozzarella with marsala sauce.</i>		\$14.99
Shrimp Scampi <i>Jumbo shrimp in our butter & lemon scampi sauce with linguini</i>	\$13.99	
Shrimp Parmesan <i>Jumbo shrimp breaded & topped with tomato sauce & mozzarella cheese over linguini.</i>	\$13.99	
Grilled Salmon <i>Basted in our Italian marinade <u>or</u> sundried tomato piccata</i>	\$14.99	
Eggplant Parmesan <i>Breaded eggplant with parmesan & mozzarella cheeses & marinara.</i>	\$10.99	

LIQUOR LICENSE INFORMATION SHEET

Case Name: Pasta Bene

City Case Number: 28-LL-2003 State Lic# 12075481

Date Received: <u>April 11, 2003</u> Date Posted: <u>4/14/03</u> Posting Removal Date: <u>May 5, 2003</u>	<u>License Information</u> New License
<u>Establishment Information</u> Existing Establishment	Council Date: June 3, 2003
<u>Applicant Information</u>	
Applicant: Todd Clinton Taylor	Company/Corporation/LLC: <u>TC Taylor LLC</u>
Business Address: Agua Caliente Shopping Center 6990 E. Shea Blvd. Suite 101 Scottsdale, AZ 85284 Zoning: C-2 (C)	Mailing Address: 1320 W Elliot Rd Ste 103-153
Business Phone: <u>480-922-3474</u>	Home/Cell Phone: <u>602-821-1457</u>
Notes: New license for an existing restaurant not changing names. See section 14 for explanation of offense	
<u>Recommending Body</u>	
<u>Recommendation</u>	<u>Date</u>
Police Department	approval <input checked="" type="checkbox"/> denial <input type="checkbox"/> no response <input type="checkbox"/>
Tax & License	4/21/03
Maricopa County	approval <input checked="" type="checkbox"/> denial <input type="checkbox"/>
Parking Analysis	5/12/03
Applicant Questionnaire	Received <input checked="" type="checkbox"/>
Council Report Submitted	4/23/03
Heard by Council	
Recommendation sent to State	
Scanned	4/11/03