

## Colorado Liquor Retail License Application

<input checked="" type="checkbox"/> <b>New License</b> <input checked="" type="checkbox"/> <b>New-Concurrent</b> <input type="checkbox"/> <b>Transfer of Ownership</b> <input type="checkbox"/> <b>State Property Only</b>			
<b>• All answers must be printed in black ink or typewritten</b> <b>• Applicant must check the appropriate box(es)</b> <b>• Applicant should obtain a copy of the Colorado Liquor and Beer Code: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a></b>			
1. Applicant is applying as a/an <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Association or Other <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (includes Limited Liability and Husband and Wife Partnerships)			
2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation <b>COBBQ, LLC</b>			FEIN Number <b>83-1229511</b>
2a. Trade Name of Establishment (DBA) <b>The Rusty Tapp Colorado BBQ &amp; Catering</b>		State Sales Tax Number <b>32760488</b>	Business Telephone <b>(720) 220-3841</b>
3. Address of Premises (specify exact location of premises, include suite/unit numbers) <b>311 E. County Line Road</b>			
City <b>Littleton</b>	County <b>Arapahoe</b>	State <b>CO</b>	ZIP Code <b>80122</b>
4. Mailing Address (Number and Street) <b>8017 S. Yukon Way</b>	City or Town <b>Littleton</b>	State <b>CO</b>	ZIP Code <b>80128</b>
5. Email Address <b>rustyshaffer11@gmail.com, tappsmith@gmail.com</b>			
6. If the premises currently has a liquor or beer license, you <b>must</b> answer the following questions			
Present Trade Name of Establishment (DBA) <b>N/A</b>	Present State License Number <b>N/A</b>	Present Class of License <b>N/A</b>	Present Expiration Date <b>N/A</b>
<b>Section A                      Nonrefundable Application Fees</b>		<b>Section B (Cont.)                      Liquor License Fees</b>	
<input type="checkbox"/> Application Fee for New License .....\$1,100.00 <input checked="" type="checkbox"/> Application Fee for New License w/Concurrent Review .....\$1,200.00 <input type="checkbox"/> Application Fee for Transfer .....\$1,100.00		<input type="checkbox"/> Lodging & Entertainment - L&E (County) .....\$500.00 <input type="checkbox"/> Manager Registration - H & R .....\$75.00 <input type="checkbox"/> Manager Registration - Tavern .....\$75.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment .....\$75.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex .....\$75.00 <input type="checkbox"/> Master File Location Fee .....\$25.00 X _____ Total _____ <input type="checkbox"/> Master File Background .....\$250.00 X _____ Total _____ <input type="checkbox"/> Optional Premises License (City) .....\$500.00 <input type="checkbox"/> Optional Premises License (County) .....\$500.00 <input type="checkbox"/> Racetrack License (City) .....\$500.00 <input type="checkbox"/> Racetrack License (County) .....\$500.00 <input type="checkbox"/> Resort Complex License (City) .....\$500.00 <input type="checkbox"/> Resort Complex License (County) .....\$500.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (City) .....\$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (County) .....\$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (State) .....\$160.00 <input type="checkbox"/> Retail Gaming Tavern License (City) .....\$500.00 <input type="checkbox"/> Retail Gaming Tavern License (County) .....\$500.00 <input type="checkbox"/> Retail Liquor Store License--Additional (City) .....\$227.50 <input type="checkbox"/> Retail Liquor Store License--Additional (County) .....\$312.50 <input type="checkbox"/> Retail Liquor Store (City) .....\$227.50 <input type="checkbox"/> Retail Liquor Store (County) .....\$312.50 <input type="checkbox"/> Tavern License (City) .....\$500.00 <input type="checkbox"/> Tavern License (County) .....\$500.00 <input type="checkbox"/> Vintners Restaurant License (City) .....\$750.00 <input type="checkbox"/> Vintners Restaurant License (County) .....\$750.00	
<b>Section B                      Liquor License Fees</b>			
<input type="checkbox"/> Add Optional Premises to H & R .....\$100.00 X _____ Total _____ <input type="checkbox"/> Add Related Facility to Resort Complex\$75.00 X _____ Total _____ <input type="checkbox"/> Arts License (City) .....\$308.75 <input type="checkbox"/> Arts License (County) .....\$308.75 <input type="checkbox"/> Beer and Wine License (City) .....\$351.25 <input type="checkbox"/> Beer and Wine License (County) .....\$436.25 <input type="checkbox"/> Brew Pub License (City) .....\$750.00 <input type="checkbox"/> Brew Pub License (County) .....\$750.00 <input type="checkbox"/> Campus Liquor Complex (City) .....\$500.00 <input type="checkbox"/> Campus Liquor Complex (County) .....\$500.00 <input type="checkbox"/> Campus Liquor Complex (State) .....\$500.00 <input type="checkbox"/> Club License (City) .....\$308.75 <input type="checkbox"/> Club License (County) .....\$308.75 <input type="checkbox"/> Distillery Pub License (City) .....\$750.00 <input type="checkbox"/> Distillery Pub License (County) .....\$750.00 <input checked="" type="checkbox"/> Hotel and Restaurant License (City) .....\$500.00 <input type="checkbox"/> Hotel and Restaurant License (County) .....\$500.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (City) .....\$600.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County) .....\$600.00 <input type="checkbox"/> Liquor-Licensed Drugstore (City) .....\$227.50 <input type="checkbox"/> Liquor-Licensed Drugstore (County) .....\$312.50 <input type="checkbox"/> Lodging & Entertainment - L&E (City) .....\$500.00			
<b>Questions? Visit: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a> for more information</b>			
<b>Do not write in this space - For Department of Revenue use only</b>			
<b>Liability Information</b>			
License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$



## Application Documents Checklist and Worksheet

**Instructions:** This checklist should be utilized to assist applicants with filing all required documents for licensure. All documents must be properly signed and correspond with the name of the applicant exactly. All documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable.

**Questions? Visit: [www.colorado.gov/enforcement/liquor](http://www.colorado.gov/enforcement/liquor) for more information**

Items submitted, please check all appropriate boxes completed or documents submitted	
<b>I.</b>	<b>Applicant information</b> <input checked="" type="checkbox"/> A. Applicant/Licensee identified <input checked="" type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input checked="" type="checkbox"/> C. License type or other transaction identified <input checked="" type="checkbox"/> D. Return originals to local authority <input checked="" type="checkbox"/> E. Additional information may be required by the local licensing authority <input checked="" type="checkbox"/> F. All sections of the application need to be completed
<b>II.</b>	<b>Diagram of the premises</b> <input checked="" type="checkbox"/> A. No larger than 8 1/2" X 11" <input checked="" type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) <input checked="" type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input checked="" type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input checked="" type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input checked="" type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2) <input checked="" type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the Landlord and acceptance by the Applicant <input checked="" type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2) <i>N/A</i> (Attach prior lease to show right to assumption)
<b>IV.</b>	<b>Background information and financial documents</b> <input checked="" type="checkbox"/> A. Individual History Records(s) (Form DR 8404-I) <input type="checkbox"/> B. Fingerprints taken and submitted to local authority (State Authority for Master File applicants) <i>Perkins</i> <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license <i>N/A</i> <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor/husband and wife partnership (if applicable)</b> <input type="checkbox"/> A. Form DR 4679 <i>N/A</i> <input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant <i>N/A</i>
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input type="checkbox"/> A. Certificate of Incorporation date stamped by the Colorado Secretary of State's Office <i>N/A</i> <input type="checkbox"/> B. Certificate of Good Standing <i>N/A</i> <input type="checkbox"/> C. Certificate of Authorization if foreign corporation <i>N/A</i> <input type="checkbox"/> D. List of officers, directors and stockholders of applying corporation (If wholly owned, designate a minimum of one person as principal officer of parent) <i>N/A</i>
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> <input type="checkbox"/> A. Partnership Agreement (general or limited). Not needed if husband and wife <i>N/A</i> <input type="checkbox"/> B. Certificate of Good Standing (If formed after 2009) <i>N/A</i>
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input checked="" type="checkbox"/> A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office) <input checked="" type="checkbox"/> B. Certificate of Good Standing <input checked="" type="checkbox"/> C. Copy of operating agreement <input type="checkbox"/> D. Certificate of Authority if foreign company <i>N/A</i>
<b>IX.</b>	<b>Manager registration for Hotel and Restaurant, Tavern, Lodging &amp; Entertainment, and Campus Liquor Complex licenses when included with this application</b> <input type="checkbox"/> A. \$75.00 fee <i>N/A</i> <input type="checkbox"/> B. Individual History Record (DR 8404-I) <i>N/A</i> <input checked="" type="checkbox"/> C. If owner is managing, no fee required

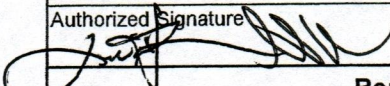


Name <b>COBBQ, LLC</b>		Type of License <b>H+R (City)</b>		Account Number <b>Pending</b>	
7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):					
(a) Been denied an alcohol beverage license?					<input type="checkbox"/> <input checked="" type="checkbox"/>
(b) Had an alcohol beverage license suspended or revoked?					<input type="checkbox"/> <input checked="" type="checkbox"/>
(c) Had interest in another entity that had an alcohol beverage license suspended or revoked?					<input type="checkbox"/> <input checked="" type="checkbox"/>
If you answered yes to 8a, b or c, explain in detail on a separate sheet.					
9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail.					<input type="checkbox"/> <input checked="" type="checkbox"/>
10. Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?					<input type="checkbox"/> <input checked="" type="checkbox"/>
or Waiver by local ordinance? <input type="checkbox"/> <input type="checkbox"/> Other: _____					
11. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.					<input type="checkbox"/> <input type="checkbox"/> N/A
12. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.					<input type="checkbox"/> <input type="checkbox"/> N/A
13a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?					N/A <input type="checkbox"/> <input type="checkbox"/>
13b. Are you a Colorado resident?					N/A <input type="checkbox"/> <input type="checkbox"/>
14. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any <u>current</u> financial interest in said business including any loans to or from a licensee.					<input checked="" type="checkbox"/> <input type="checkbox"/> <b>See Attached Document</b>
15. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement?					<input checked="" type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____					
a. If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:					
Landlord <b>Oakbrook SC LLC</b>		Tenant <b>COBBQ, LLC</b>		Expires <b>06/30/2020</b>	
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16.					<input type="checkbox"/> <input checked="" type="checkbox"/>
c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11".					
16. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.					<input checked="" type="checkbox"/> N/A
Last Name <b>N/A</b>		First Name		Date of Birth	FEIN or SSN
Last Name <b>N/A</b>		First Name		Date of Birth	FEIN or SSN
Interest/Percentage					
<b>Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.</b>					
17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: Has a local ordinance or resolution authorizing optional premises been adopted?					N/A <input type="checkbox"/> <input type="checkbox"/>
Number of additional Optional Premise areas requested. (See license fee chart)					
18. Liquor Licensed Drugstore (LLDS) applicants, answer the following: (a) Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise? If "yes" a copy of license must be attached.					N/A <input type="checkbox"/> <input type="checkbox"/>
19. Club Liquor License applicants answer the following: <b>Attach a copy of applicable documentation</b>					N/A <input type="checkbox"/> <input type="checkbox"/>
(a) Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?					<input type="checkbox"/> <input type="checkbox"/>
(b) Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain?					<input type="checkbox"/> <input type="checkbox"/>
(c) How long has the club been incorporated?					<input type="checkbox"/> <input type="checkbox"/>
(d) Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above?					<input type="checkbox"/> <input type="checkbox"/>
20. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following: (a) Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)					N/A <input type="checkbox"/> <input type="checkbox"/>



Name <b>COBBQ, LLC</b>	Type of License <b>HR (city)</b>	Account Number <b>Pending</b>
<b>21. Campus Liquor Complex applicants answer the following:</b> (a) Is the applicant an institution of higher education? <span style="float:right">N/A</span> <span style="float:right">Yes No</span> <div style="text-align:right"><input type="checkbox"/> <input type="checkbox"/></div> (b) Is the applicant a person who contracts with the institution of higher education to provide food services? If "yes" please provide a copy of the contract with the institution of higher education to provide food services. <span style="float:right"><input type="checkbox"/> <input type="checkbox"/></span>		
<b>22. For all on-premises applicants.</b> a. Hotel and Restaurant, Lodging and Entertainment, Tavern License and Campus Liquor Complex, the Registered Manager must also submit an Individual History Record - DR 8404-I and fingerprints. b. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit a Manager Permit Application - DR 8000 and fingerprints. <span style="float:right">N/A</span>		
Last Name of Manager <b>Shaffer</b>	First Name of Manager <b>Russell</b>	
<b>23. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number.</b> <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span>		
<b>24. Related Facility - Campus Liquor Complex applicants answer the following:</b> a. Is the related facility located within the boundaries of the Campus Liquor Complex? <span style="float:right">N/A</span> <span style="float:right">Yes No</span> <div style="text-align:right"><input type="checkbox"/> <input type="checkbox"/></div> If yes, please provide a map of the geographical location within the Campus Liquor Complex. If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex. b. Designated Manager for Related Facility- Campus Liquor Complex		
Last Name of Manager <b>N/A</b>	First Name of Manager <b>N/A</b>	
<b>25. Tax Distraint Information. Does the applicant or any other person listed on this application including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue? If yes, provide an explanation and include copies of any payment agreements.</b> <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span>		
<b>26. If applicant is a corporation, partnership, association or limited liability company, applicant must list all Officers, Directors, General Partners, and Managing Members. In addition, applicant must list any stockholders, partners, or members with ownership of 10% or more in the applicant. All persons listed below must also attach form DR 8404-I (Individual History Record), and submit fingerprint cards to the local licensing authority.</b>		
Name <b>Lewis Tappan Smith</b>	Home Address, City & State <b>8017 S. Yukon Way, Littleton, CO 80128</b>	<div style="background-color: black; width: 50px; height: 20px; display: inline-block;"></div> <div style="display: inline-block; vertical-align: top; margin-left: 5px;">           Position <b>Managing Partner</b>            %Owned <b>50</b> </div>
Name <b>Russell Ira Shaffer</b>	Home Address, City & State <b>9781 Burberry Way, Highland Ranch, CO 80129</b>	<div style="background-color: black; width: 50px; height: 20px; display: inline-block;"></div> <div style="display: inline-block; vertical-align: top; margin-left: 5px;">           Position <b>Managing Partner</b>            %Owned <b>50</b> </div>
Name	Home Address, City & State	<div style="background-color: black; width: 50px; height: 20px; display: inline-block;"></div> <div style="display: inline-block; vertical-align: top; margin-left: 5px;">           Position             %Owned         </div>
Name	Home Address, City & State	<div style="background-color: black; width: 50px; height: 20px; display: inline-block;"></div> <div style="display: inline-block; vertical-align: top; margin-left: 5px;">           Position             %Owned         </div>
Name	Home Address, City & State	<div style="background-color: black; width: 50px; height: 20px; display: inline-block;"></div> <div style="display: inline-block; vertical-align: top; margin-left: 5px;">           Position             %Owned         </div>
<b>** If applicant is owned 100% by a parent company, please list the designated principal officer on above.</b> <b>** Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)</b> <b>** If total ownership percentage disclosed here does not total 100%, applicant must check this box:</b> <input checked="" type="checkbox"/> Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Title 47 or 48, C.R.S.		



Name <b>COBBQ, LLC</b>	Type of License <b>H+R (City)</b>	Account Number <b>Pending</b>
<b>Oath Of Applicant</b>		
I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer Code which affect my license.		
Authorized Signature 	Printed Name and Title <b>Russell I. Shaffer - Member</b>	Date <b>8/22/18</b>
<b>Report and Approval of Local Licensing Authority (City/County)</b>		
Date application filed with local authority <b>August 27, 2018</b>	Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application) <b>October 10, 2018</b>	
The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) or a DR 8000 (Manager Permit) has been:		
<input type="checkbox"/> Fingerprinted <input type="checkbox"/> Subject to background investigation, including NCIC/CCIC check for outstanding warrants		
That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with and aware of, liquor code provisions affecting their class of license (Check One)		
<input type="checkbox"/> Date of inspection or anticipated date _____ <input checked="" type="checkbox"/> Will conduct inspection upon approval of state licensing authority		
<input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1,500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of > 10,000?		Yes No <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3,000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of < 10,000?		<input type="checkbox"/> <input type="checkbox"/>
<b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.		
<input type="checkbox"/> Does the Liquor-Licensed Drugstore (LLDS) have at least twenty percent (20%) of the applicant's gross annual income derived from the sale of food, during the prior twelve (12) month period?		<input type="checkbox"/> <input type="checkbox"/>
The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 12, Article 46 or 47, C.R.S., and Liquor Rules. <b>Therefore, this application is approved.</b>		
Local Licensing Authority for <b>City of Hillerton</b>	Telephone Number <b>3195-3780</b>	<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print	Title
Signature	Print	Title
		Date



COBBQ LLC Liquor License Application Attached Answer

DBA The Rusty Tapp Colorado BBQ & Catering – New H&R Littleton 2018

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

Lewis Tappan Smith is the President of T&K Smith Enterprises Inc., DBA The Castle Bar and Grill, located at 6657 S Broadway, Littleton CO, 80121. Lewis Tappan Smith's spouse and partner Kara Smith works at The Castle Bar and Grill [Tavern (city), #25510620000].



## Individual History Record

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

**Notice:** This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

1. Name of Business COBBQ LLC d.b.a. The Rusty Tapp <i>Colorado BBQ Catering</i>	Home Phone Number <i>N/A</i>	Cellular Number (720) 220-3841
2. Your Full Name (last, first, middle) Smith, Lewis, Tappan	3. List any other names you have used Lewis T. Smith, Tapp Smith	
4. Mailing address (if different from residence) 8017 S. Yukon Way, Littleton, CO 80128	Email Address tappsmith@gmail.com	

5. List current residence address. Include any previous addresses within the last <b>five</b> years. (Attach separate sheet if necessary)			
Street and Number	City, State, Zip	From	To
8017 S. Yukon Way	Littleton, CO 80128	07/2015	Present
3300 S. Downing Street	Englewood, CO 80113	2009	07/2015

6. List all employment within the last <b>five</b> years. Include any self-employment. (Attach separate sheet if necessary)				
Name of Employer or Business	Address (Street, Number, City, State, Zip)	Position Held	From	To
T&K Smith Enterprises Inc.	6657 S. Broadway, Littleton, CO 80121	Owner/Operator	05/2009	Present

7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.			
Name of Relative	Relationship to You	Position Held	Name of Licensee
Kara Smith	Spouse	Owner/Operator	The Castle Bar and Grill

8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Obtained an H&R License for The Castle Bar and Grill in May 2009.	

9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.)	Yes <input checked="" type="checkbox"/> No



10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) ☐ Yes ☒ No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) ☐ Yes ☒ No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) ☐ Yes ☒ No

### Oath of Applicant

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

Authorized Signature

Print Signature

Title

Date



Lewis T. Smith

Deputy

8/22/18



## Individual History Record

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

**Notice:** This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

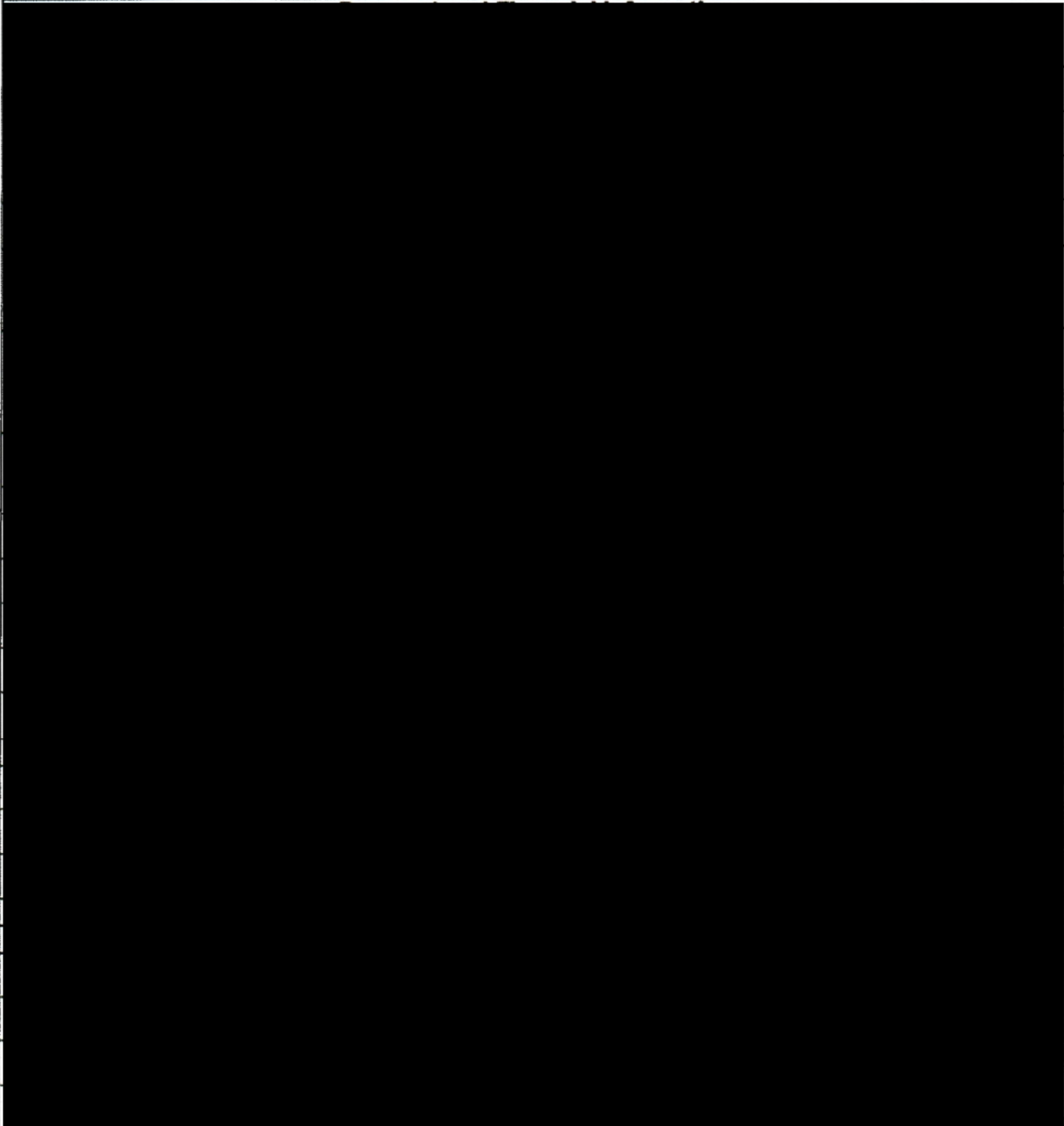
1. Name of Business COBBQ LLC d.b.a. The Rusty Tapp <i>BBQ &amp; Colorado Catering</i>		Home Phone Number <i>N/A</i>	Cellular Number (303) 903-0030	
2. Your Full Name (last, first, middle) Shaffer, Russell, Ira		3. List any other names you have used Russ, Rusty		
4. Mailing address (if different from residence) 9781 Burberry Way, Highlands Ranch, CO 80129		Email Address rustyshaffer11@gmail.com		
5. List current residence address. Include any previous addresses within the last <b>five</b> years. (Attach separate sheet if necessary)				
<b>Street and Number</b>	<b>City, State, Zip</b>	<b>From</b>	<b>To</b>	
9781 Burberry Way	Highlands Ranch, CO 80129	04/2009	Present	
6. List all employment within the last <b>five</b> years. Include any self-employment. (Attach separate sheet if necessary)				
<b>Name of Employer or Business</b>	<b>Address (Street, Number, City, State, Zip)</b>	<b>Position Held</b>	<b>From</b>	<b>To</b>
See Attached Document				
7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.				
<b>Name of Relative</b>	<b>Relationship to You</b>	<b>Position Held</b>	<b>Name of Licensee</b>	
N/A				
8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.) <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.) <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				



10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) ☐ Yes ☒ No

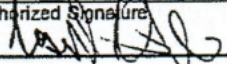
11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) ☐ Yes ☒ No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) ☐ Yes ☒ No



**Oath of Applicant**

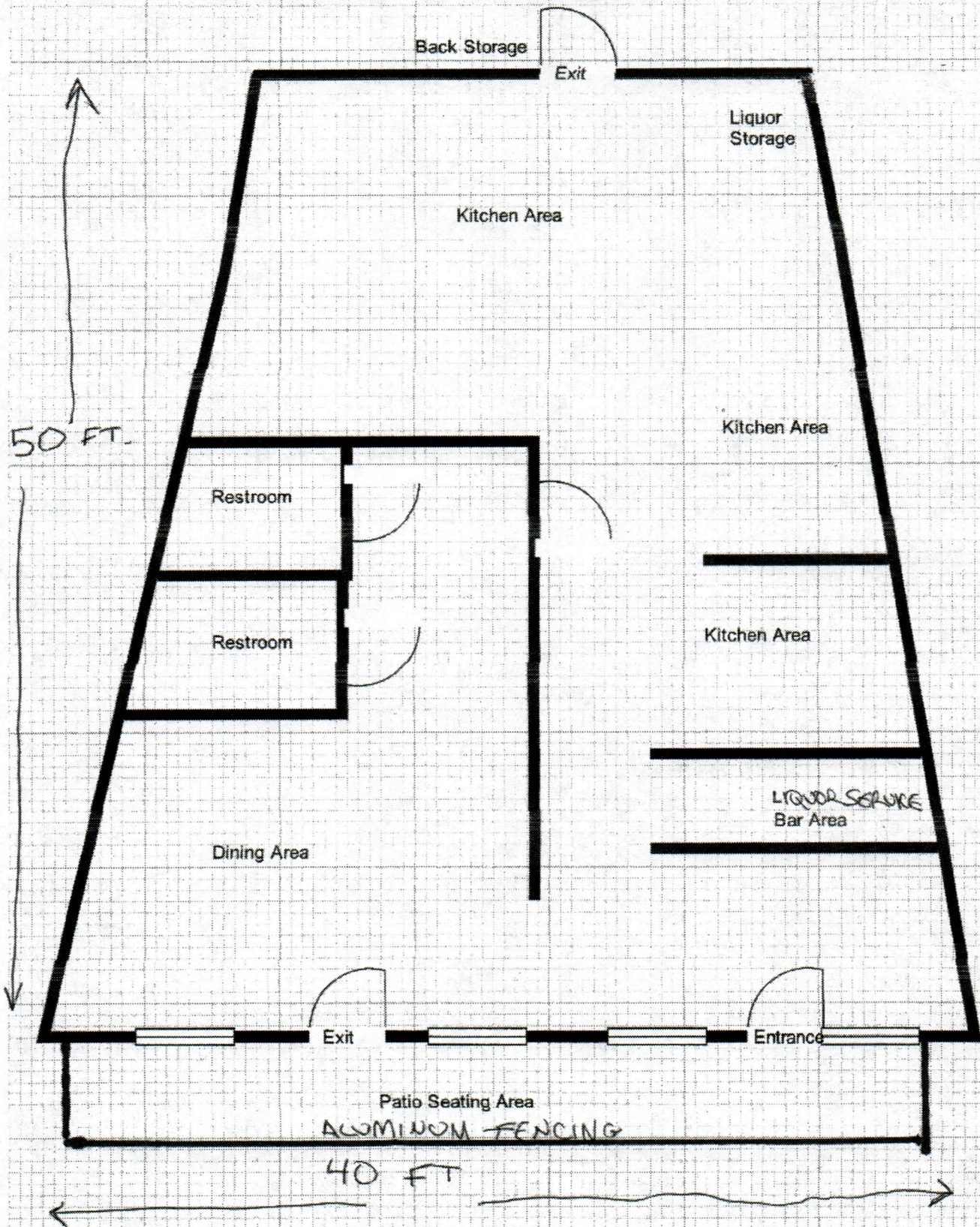
I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Authorized Signature 	Print Signature RUSSELL I SHAFER	Title MEMBER	Date 8-23-18
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The Rusty Tapp Colorado BBQ & Catering- 1905 Sqft.  
311 E. County Line Rd. # A-1 (a-b) Littleton, CO 80122

NORTH ↑





### TENANT ASSIGNMENT OF LEASE AND AGREEMENT

FOR VALUABLE CONSIDERATION, the adequacy and receipt of which are hereby acknowledged, Brickyard BBQ, Inc. ("Assignor") and COBBQ LLC ("Assignee") have entered into this Agreement this 1<sup>st</sup> day of August, 2018 and agree as follows:

1. Effective on October 1, 2018 (the "Effective Date"), Assignor assigns to Assignee all of Assignor's right, title, and interest in: (a) the lease dated April 4, 2006 (the "Lease") between Oakbrook SC LLC (the "Landlord") and Assignor as tenant covering the premises commonly known as 311 E. County Line Road, #A-1(a-b), Littleton, Colorado 80122, consisting of 1905 sq. ft. (the "Premises"), for the balance of the Lease term, which expires on June 30, 2020 (b) the security deposit, if any, made by Assignor pursuant to the Lease; and (c) any rent prepaid by Assignor under the Lease.
2. Assignee assumes and agrees to perform each and every obligation of Assignor under the Lease arising on and after the Effective Date.
3. Assignor warrants to Assignee that: (a) the Lease is in full force and effect (b) Assignor's interest in the Lease is free and clear of any liens, encumbrances, or adverse interests; (c) Assignor has full and lawful authority to assign its interest in the Lease; (d) there is no uncured default on the part of Assignor or Landlord under the Lease or any circumstances which by lapse of time or after notice would be a default on the part of Assignor or Landlord under the Lease; and (e) Assignor is the only party having any right to possession or use of the Premises.
4. Assignor agrees to indemnify Assignee against and hold Assignee harmless from any and all loss, liability, and expense (including reasonable attorneys' fees and court costs) arising out of any breach by Assignor of its warranties contained in this Agreement or any obligations or duties of Assignor as Tenant under the Lease arising prior to the Effective Date; and Assignee agrees to indemnify Assignor against and hold Assignor harmless from any loss, liability, and expense (including reasonable attorneys' fees and court costs) arising out of any breach by Assignee of its obligations contained in this Agreement or any obligations or duties of Assignee as Tenant under the Lease arising after the Effective Date. Payment is not a precondition to liability under either of the foregoing indemnities.
5. The effectiveness of this Agreement is conditioned upon obtaining the Landlord's consent in accordance with the Lease.
6. From and after the Effective Date the liability of Assignor and Assignee to Landlord under the Lease will be joint and several. Landlord shall have a direct claim against Assignee, as well as against Assignor, for all Lease obligations arising after the Effective Date.
7. Assignor and Assignee represent and acknowledge to Landlord that they have not relied on any representations by Landlord or its agents in executing this Agreement.
8. Assignee acknowledges and agrees that any option to renew the Lease or extend the term is personal to Assignor, or that such option does not extend to Assignee; therefore, this Agreement voids any such option and right of extension for renewal. Other than issues that pre-date the expiration of this Lease, Landlord agrees that in the event the Lease is extended for any reason beyond its current expiration date, Assignor and Marc Anthony, as the guarantor of the Lease, shall be fully released from any and all obligations or liabilities pursuant to such Lease.



9. Assignee acknowledges that it has received a copy of the Lease, has had an opportunity to review the Lease, is relying solely upon its own review and its own legal advisors in executing this Agreement, and is not relying on any representations except as expressly set forth in this Agreement. This Agreement embodies the entire agreement between the parties with respect to the Lease and supersedes any prior agreements, whether written or oral. This Agreement may be modified only by a written instrument duly executed by Assignor and Assignee and consented to by Landlord in writing.


10. The terms and provisions of this Agreement shall inure to the benefit of, and shall be binding upon, the respective successors, assigns, personal representatives, heirs, devisees, and legatees of Assignor and Assignee. The terms and provisions of this Agreement shall also inure to the benefit of Landlord and its successors and assignors.

11. Nothing contained in this Agreement shall be construed to permit any further assignment of the Lease or any subletting of the Premises without the consent of the Landlord in accordance with the Lease.

The parties have executed this Agreement on the respective dates set forth beneath their signatures below.

ASSIGNOR: Brickyard BBQ, Inc.

ADDRESS: 2861 E. Geddes Pl.  
Littleton, Colorado 80122

BY:   
Marc Anthony, President

EIN: 84-1583417

DATE: \_\_\_\_\_

ASSIGNEE: COBBQ LLC

ADDRESS: 8017 S. Yukon Way  
Littleton, CO 80122

BY: 

EIN: 83-1229511

DATE: 8/2/18

ADDRESS FOR NOTICES:

\_\_\_\_\_  
\_\_\_\_\_



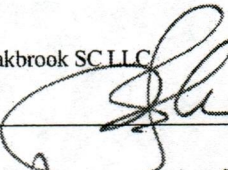
CONSENT OF LANDLORD

The undersigned consents to the Tenant Assignment of Lease between Assignor and Assignee, effective the 1<sup>st</sup> day of October, 2018 upon the condition that Assignor is not released from its obligations under the Lease and Assignor will remain jointly and severally liable with Assignee for the performance of each and every one of the Tenant's obligations under the Lease. The consent shall not be deemed to be a consent to any subsequent assignment of the Lease or any subletting of the leased Premises, and any such subsequent assignment or sublease will require the consent of the Landlord pursuant to the Lease.

LANDLORD: Oakbrook SC LLC

BY: \_\_\_\_\_

DATE: \_\_\_\_\_

  
August 20, 2018



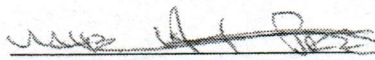
**ACKNOWLEDGMENT AND REAFFIRMATION OF GUARANTOR**

The undersigned ("Guarantor") is the Guarantor of all tenant obligations under a lease between Brickyard BBQ, Inc., as Tenant and Oakbrook SC LLC, as Landlord dated April 4, 2006, covering the premises commonly known as 311 E. County Line Road, #A-1(a-b), Littleton, Colorado 80122 (the "Lease") pursuant to a written guaranty dated March 28, 2006. Guarantor acknowledges that Tenant has assigned its rights and obligations under the Lease to COBBQ LLC, pursuant to a Tenant Assignment of Lease and Agreement dated on or about August 1, 2018. Guarantor consents to such assignment and acknowledges that such assignment does not release or in any other manner affect Guarantor's continuing guarantee of all such obligations of the Tenant under the Lease. Guarantor further acknowledges and agrees that the Guaranty remains in full force and effect, and Guarantor reaffirms Guarantor's continuing guarantee of all such obligations of Tenant under the Lease and all of Guarantor's other obligations under the Guaranty. Notwithstanding anything to the contrary, other than issues that pre-date the expiration of the Lease, Landlord agrees that in the event the Lease is extended for any reason beyond its current expiration date, Guarantor shall be fully released from any and all obligations or liabilities pursuant to such Lease.

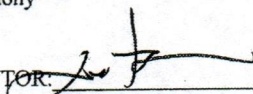
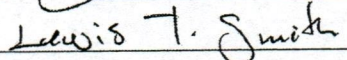
Guarantor acknowledges that Landlord is relying on Guarantor's continuing guarantee in consenting to the above-referenced Assignment.

(ASSIGNOR)

GUARANTOR: Marc Anthony

  
\_\_\_\_\_  
Marc Anthony

(ASSIGNEE)

GUARANTOR:   
BY:   
\_\_\_\_\_  
Lewis T. Smith



OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Articles of Organization

with Document # 20181423826 of  
COBBQ LLC

Colorado Limited Liability Company

(Entity ID # 20181423826 )

consisting of 3 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/30/2018 that have been posted, and by documents delivered to this office electronically through 08/01/2018@ 14:39:51.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/01/2018 @ 14:39:51 in accordance with applicable law. This certificate is assigned Confirmation Number 11039844



A handwritten signature in cursive script, reading "Wayne W. Williams".

Secretary of State of the State of Colorado

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



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

**E-Filed**

Colorado Secretary of State  
Date and Time: 05/24/2018 02:44 PM  
ID Number: 20181423826  
Document number: 20181423826  
Amount Paid: \$50.00

ABOVE SPACE FOR OFFICE USE ONLY

### Articles of Organization

filed pursuant to § 7-90-301 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

COBBQ LLC

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

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

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

Street address

311 East County Line Road

*(Street number and name)*

Littleton

*(City)*

CO

*(State)*

80122

*(ZIP/Postal Code)*

United States

*(Country)*

*(Province - if applicable)*

Mailing address

*(leave blank if same as street address)*

*(Street number and name or Post Office Box information)*

*(City)*

*(State)*

*(ZIP/Postal Code)*

*(Province - if applicable)*

*(Country)*

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

Name

*(if an individual)*

Stapen

*(Last)*

Adam

*(First)*

P.

*(Middle)*

*(Suffix)*

or

*(if an entity)*

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

Street address

455 Sherman Street

*(Street number and name)*

Suite 300

Denver

*(City)*

CO

*(State)*

80203

*(ZIP Code)*

Mailing address

*(leave blank if same as street address)*

*(Street number and name or Post Office Box information)*



\_\_\_\_\_  
(City) CO (State) \_\_\_\_\_ (ZIP Code)

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

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

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

Name  
(if an individual) Smith Tapp  
(Last) (First) (Middle) (Suffix)  
or

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

Mailing address 311 East County Line Road  
(Street number and name or Post Office Box information)  
Littleton CO 80122  
(City) (State) (ZIP/Postal Code)  
United States  
(Province - if applicable) (Country)

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

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

5. The management of the limited liability company is vested in  
(Mark the applicable box.)

☐ one or more managers.

or

☒ the members.

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

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

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

☐ This document contains additional information as provided by law.

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

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

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

#### Notice:

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



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

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

Stapen	Adam	P.	
(Last)	(First)	(Middle)	(Suffix)
455 Sherman Street			
(Street number and name or Post Office Box information)			
Suite 300			
Denver	CO	80203	
(City)	(State)	(ZIP/Postal Code)	
	United States		
(Province - if applicable)	(Country)		

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

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

**Disclaimer:**

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