

CITY AND COUNTY OF DENVER

DEPARTMENT OF EXCISE AND LICENSE

OFFICE OF DIRECTOR 201 West Colfax Avenue, Dept. 206 Denver, Colorado 80202

August 11,2021

Re: H & R Inc.

d/b/a Monroe Discount Liquors

3600 E. Colfax Ave. Denver, Colorado 80206

Dear Neighborhood Organization:

Please be advised that an application for a transfer of ownership has been filed with this department regarding a liquor licensed establishment in your neighborhood. Please review the attached documentation for information regarding this change.

Objections to liquor license transfers <u>must</u> be based only on the character, record, and reputation of the applicant. If the transfer includes a cabaret license, objections may also be raised regarding that license. All objections to this application must be submitted to the Director of Excise and Licenses at 201 West Colfax Avenue, Department 206, Denver, Colorado 80202 or to EXLApplications@denvergov.org, by the close of business twenty (20) calendar days from the date of this letter.

To review this application for a transfer of ownership, please visit the Department of Excise and Licenses at 201 West Colfax Avenue, Department 206, between the hours of 8:00 am and 4:00 pm.

Ayuda En Espanol:

Si necesita ayuda or tiene preguntas en espanol, por favor contactenos por telefono (720-913-1311 o 311) y diga que necesita ayuda en espanol y nosotros lo llamaremos para hablar sobre este tema.

Sincerely,

Ashley Kilroy
Executive Director of Excise and Licenses

Council District 10
Council District 5
Council District 8
Council District 9
Council District At Large
Bellevue-Hale Neighborhood Association
Bluebird Business Improvement District
Capitol Hill United Neighborhoods, Inc.
City Park Friends and Neighbors (CPFAN)

Colorado Abatement Professionals, Inc.

Congress Park for ALL, Inc

Congress Park Neighbors, Inc.

Denver for All

District 10 Neighborhood Coalition, Inc.

District 8 Neighborhood Coalition, Inc.

District 9 Neighborhood Coalition, Inc.

Greater Park Hill Community, Inc.

Inter-Neighborhood Cooperation (INC)

Opportunity Corridor Coalition of United Residents

Reclaim the East Side

South City Park Neighborhood Association

The Points Historical Redevelopment Corp

DR 8404 (09/25/19) COLORADO DEPARTMENT OF REVENUE Liquor Enforcement Division (303) 205-2300

Colorado Liquor Retail License Application

| | | | | | - | | - | |
|--|--|--|---|--|--------------------------------|-----------------------|----------------------------------|--|
| ☐ New License | New-Concus | rrent 🔯 1 | Transfer of Owne | ership 🔲 State F | roper | ty Only | | |
| . All annually must be adjusted in block into or tunewritten | | | | | | | | |
| All answers must be printed in black ink or typewritten Applicant must check the appropriate box(es) | | | | | | | | |
| Applicant should obtain a copy of the Colorado Liquor and Beer Code: www.colorado.gov/enforcement/liquor | | | | | | | | |
| | W-W | | | | | viiquoi | | |
| Applicant is applying as a/an | Individual | Limited Liabil | ity Company | Association or C | other | | | |
| X | Corporation | Partnership (| includes Limited | Liability and Husban | d and | Wife Partnerships) | | |
| 2. Applicant If an LLC, name of LLC; | if partnership, at least 2 | 2 partner's nan | nes; if corporation, | name of corporation | | FEIN Number | _ | |
| HA | R Inc | | | | | 85-43067 | 03 | |
| 2a. Trade Name of Establishment (DB: | A) | VIII. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | State Sales Tax Numb | er | Business Telephone | | |
| Monroe Discou | ut 1=GMOV | 5 | | 9494394 | 4 | 303)312- DA | PP | |
| 3. Address of Premises (specify exac | t location of premises. | include suite/u | nit numbers) | | | | - | |
| 3600 E COLA | | | | | | | | |
| City | | | County | | State | ZIP_Code | | |
| Denver | | | De | 1 ver | Co | 00206 | | |
| 4. Mailing Address (Number and Stre | set) | | City or Town | | State | ZIP Code | | |
| 3600 E COLFOX AL | | | 100 | LUVOV | 60 | 80206 | | |
| 6. Emeil Address | | | | | | | | |
| | | | | | | | | |
| 6. If the premises currently has a liqui | or or beer license, you | must answer | the following questi | ons | - | | | |
| Present Trade Name of Establishment | (DBA) | Present State | License Number | Present Class of Licer | 158 | Present Expiration Da | ate | |
| Mouroe Lignor | | b 49 -1 | 19226-0000 | Potal Line | ~ | 209/11/201 | M | |
| Section A | Nonrefundable Appl | Ication Fees | Section B (Cont.) | 0 | | Liquor License Fees | AND RESIDENCE AND REAL PROPERTY. | |
| Application Fee for New License | | | | rlainmont - LAF (County | Δ. | \$50 | 20.00 | |
| ☐ Application Fee for New License w/ | | | | | | | | |
| Application Fee for Transfer | | | | | | | | |
| Section B | | Joense Fees | | | | nt\$7 | | |
| AND SANSAGE SANSAGE STATE OF THE SANSAGE SANSA | CONTRACTOR - NO. OF THE PROPERTY OF THE PROPER | | | | | sx\$7 | | |
| Add Optional Premises to H & R | - | | | The state of the s | | | | |
| Add Releted Facility to Resort Compl | **** | | | | | XTotal | | |
| Add Sidewelk Service Area | | | Master File Bed | kground\$ | 250.00 | XTotal | | |
| Arts License (City) | | | Optional Premi | ses License (City) | ~ **L. ******* | \$50 | 00.00 | |
| Arts License (County) | | | Optional Premis | ses License (County) | | \$50 | 00.00 | |
| Beer and Wine License (City) | | | Racetrack Lice | nse (Cily) | | \$50 | 00.00 | |
| Beer and Wine License (County) | | | Racetrack Lice | nse (County) | | \$50 | 00.00 | |
| Brew Pub License (City) | | | | | | \$50 | 0.00 | |
| Brew Pub License (County) | | | Resort Complex | x License (County) | | \$50 | 00.00 | |
| Gampus Liquor Complex (City) | | \$500.00 | Related Facility | - Campus Liquor Compi | lex (City | *)\$160 | | |
| Campus Liquor Complex (County) | | | _ 15010100 1 0411sy | | | mky) \$180 | | |
| Campus Liquor Complex (State) | | | Related Facility | - Campus Liquor Comp | lex (Stail | le)\$160 | 0.00 | |
| Club License (City) | | | Retail Geming | Tavem License (City) | *********** | \$50 | 0.00 | |
| Club License (County) | | | Retail Gaming | lavem License (County) | | \$50 | 0.00 | |
| Distillery Pub License (City) | | | | | | \$22 | | |
| Distillery Pub License (County) | | | 00111110 | | | \$31 | | |
| Hotel and Restaurant License (City) | | | | | | \$22 | | |
| Hotel and Restaurant License (Count | | | | | | \$312 | | |
| Hotel and Restaurant License w/one | | | | | | \$50 | | |
| Hotel and Restaurant License wione | | | | | | \$50 | | |
| Liquor-Licensed Drugstore (City) | | | | | | \$75 | | |
| Liquor-Licensed Drugstore (County) | | | Uvintners Restau | rrant License (County) | | \$750 | 0.00 | |
| Lodging & Entertainment - L&E (City) | | Control of the Contro | | 4 | | | | |
| | s? Visit: www.co/c | | THE RESERVE AND ADDRESS OF THE PARTY OF THE | | Annual Printers and Publishers | 1 | | |
| Do n | ot write in this sp | | | Revenue use oni | <u>y</u> | | | |
| | | | formation | | | | | |
| License Account Number | Liability Date | License Issue | d Through (Expirat | ion (Jate) | Total | | | |
| | | | | | \$ | | - 1 | |

DR 8404 (09/25/19)

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 for more information

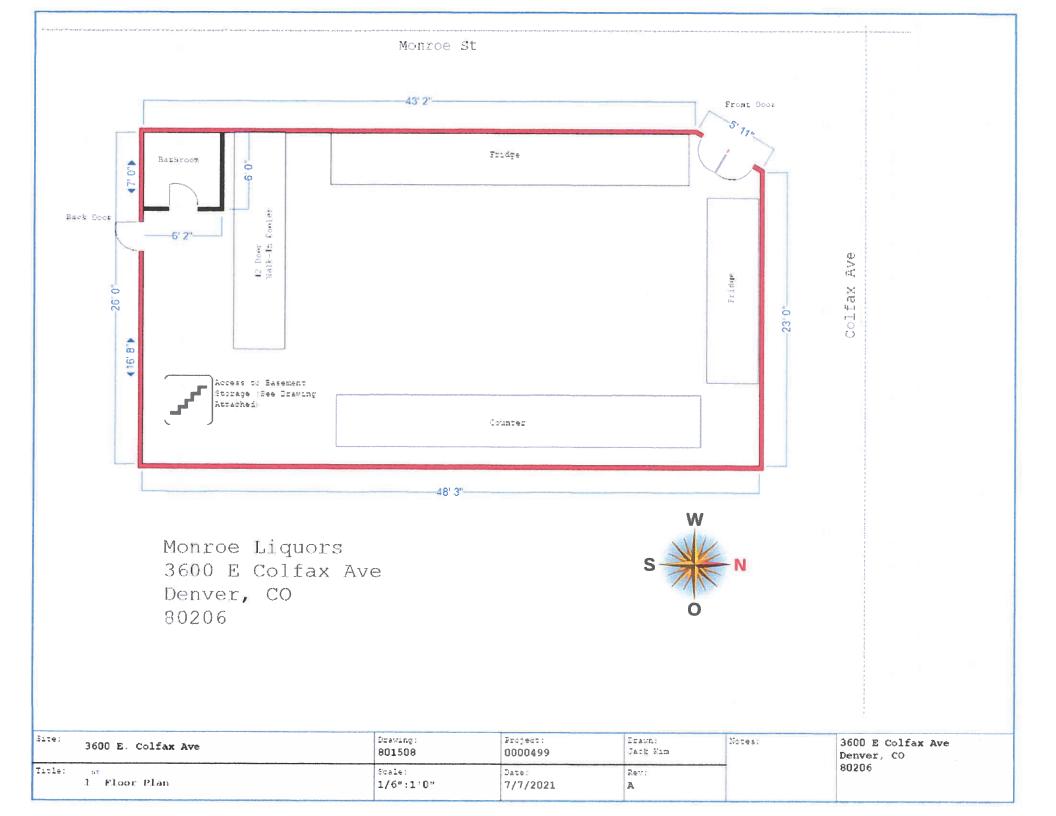
| × ≦ | ≨ ≤ | .< | | ? | F | *** | - | - |
|--|--|--|--|--|--|--|---|--|
| | 0000 | 8 | IdentoGO – https://uenroll.identogo.com/ Phone: 844-539-5539 (toll-free) IdentoGO FAQs: https://www.colorado.gov/pacific/cbi/identification Colorado Fingerprinting – http://www.coloradofingerprinting.com Appointment Scheduling Website: http://www.coloradofingerprintin Phone: 720-292-2722 Toll Free: 833-224-2227 C. Purchase agreement, stock transfer agreement, and/or authorizat D. List of all notes and loans (Copies to also be attached) | D Dack | | | Applicant information A. Applicant/Licensee identified B. State sales tax license number listed or applied for a C. License type or other transaction identified D. Return originals to local authority (additional items n E. All sections of the application need to be completed | items submitted, please check |
| Limited Liability Company applicant information (if applicable) A. Copy of articles of organization B. Certificate of Good Standing C. Copy of Operating Agreement (if applicable) D. Certificate of Authority if foreign LLC (out of state applicants only) Manager registration for Hotel and Restaurant, Tavern, Lodging & Entertainment, and Campus Liquor Complex licenses when included with this application | porate applicant information (if applicable) A. Certificate of Incorporation B. Certificate of Good Standing C. Certificate of Authorization if foreign corporation (out of state applicants only) thership applicant information (if applicable) A. Partnership Agreement (general or limited). B. Certificate of Good Standing | le proprietor/husband and wife partnership (if applicable) A. Form DR 4679 B. Copy of State issued Driver's License or Colorado Identification Card for each applicant | IdentoGO – https://uenroll.identogo.com/ Phone: 844-539-5539 (toll-free) IdentoGO FAQs: https://www.colorado.gov/pacific/cbi/identification-faqs IdentoGO FAQs: https://www.colorado.gov/pacific/cbi/identification-faqs Colorado Fingerprinting – http://www.coloradofingerprinting.com Appointment Scheduling Website: http://www.coloradofingerprinting.com/cabs/ Phone: 720-292-2722 Toll Free: 833-224-2227 Phone: 720-292-2722 Toll Free: 833-224-2227 Purchase agreement, stock transfer agreement, and/or authorization to transfer license List of all notes and loans (Copies to also be attached) | pround information (DR 8404-I) and financial documents Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) partners, members) Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved state vendor. Do not complete fingerprint cards prior to submitting your application. The Vendors are as follows: | of property possession (<u>One Year Needed</u>) Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk Lease in the name of the applicant (or) (matching question #2) Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant Other agreement if not deed or lease. (matching question #2) | nno fithe premises No larger than 8 1/2" X 11" Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) walls, entry/exit points, etc.) Separate diagram for each floor (if multiple levels) Kitchen - identified if Hotel and Restaurant Bold/Outlined Licensed Premises | Applicant/Licensee identified State sales tax license number listed or applied for at time of application License type or other transaction identified Return originals to local authority (additional items may be required by the local licensing authority) All sections of the application need to be completed | items submitted, please check all appropriate boxes completed or documents submitted |

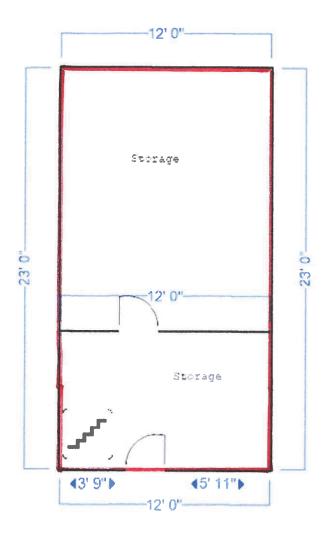
| province | 404 (09/25/ | 19) | | | | | | | | | T-70 | | | | | 10. | | | | | |
|-----------------|--|--------------------|-------------------------------------|--------|-------------|----------|---------|----------|-----------|--|-------------|-----------|--------|------------|-------------|---------|-------------|-----------|-----------|-----|--------|
| Nan | ne H | 水 | R. | | 7 | he C | | | | | 12 | e of Lice | | LIGM | ,JV | Ac | count No | umber | A | | |
| 7. | | | | | | | | | | p; member or the age | | | | | iability co | mpan | y, or offic | cers, | | Yes | No |
| 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): | | | | | | | | | | | | | | | | | | | | |
| | b. Had a | n alcoh | an alcoho ol bevera n another | ge li | icen | se sus | pende | | | je license : | suspe | ended or | reve | oked? | | | | | | | N N |
| Herenius | u answer | | | | | | | | | sheet. as located | l sa ribban | - 600 to | in to | T the erms | ocad any | minan | hana da | was tak | thun the | | [7] |
| 9. | precedin | g two y | ears? If "y | res" | , ex | plain in | detail | i | | | | | | | | | | | | | K |
| 10. | | | | | | | | | | c or private sity or sen | | | mee | ts compu | isary edu | cation | requirer | nents o | f | | DF (X) |
| | | | | | | | | | | | | | | | | Wai | | ocal ordi | inance? | | |
| 11. | sales in a | jurisd ns al th | ction with | a p | opu | lation o | of grea | ster the | m (>) 1 | Store (RLS 0,0000? No ses for wh | OTE | The dist | tanc | e shall be | determin | ned by | a radius | measu | rement | | 12 |
| 12. | sales in a | ns at th | iction with | a p | opu oorw | lation o | of less | than (| <) 10,00 | Store (RLS 000? NOT ses for wh | E: The | e distan | ce st | nall be de | termined | byar | adius mo | asuren | nent | | K |
| 13 | a. For ad | ditional | Retail Liq | not | Sto | e only. | Was | your R | etsił Liq | uor Store | Licen | se issue | ed or | or befor | e January | y 1, 20 | 16? | | | | R |
| 13 | b. Are yo | u a Co | iorado res | ide | nt? | | | | | | | | | | | | | | | | × |
| 14. | Limited L | iability | Company | Ç OF | offic | cers, st | acidho | olders o | or direct | nt (includir ons if a con s to or from | rporati | ion)? If | | | | | | | | | X |
| 16. | arranger | nent? | rit, as liste | | | | | | | legal pos | sessi | on of th | e pn | emises b | y owners | ship, k | ese of o | ther | | X) | |
| | | | | | | - | | | | ration, exa | ctly a | s they e | ppe | ar on the | lease: | | | | | | |
| Land | tlord | | | | | | 1 - | _ | | Tenant | | | | | | | | | xpires | | -2. |
| J | ustin | 6 | Rose | 5 | Ma | rti6 | 1 | rus | F#1 | n to the la | R | , Th | 4 | | | 0 | | - 1 | 6-23 | -2 | PERM |
| | c. Attach | a diag | ram that d | lesiç | gnat | es the | area t | o be lic | ensed | n to the rai in black bo tilized for i | old out | tine (inc | ckudii | ng dimen | sions) wh | ich sh | | | | | IX. |
| 16. | | | | | | | | | | rsons, firm | | | | | | | | | | | |
| Last | Name | w | Pau | - - | | | | Firs | st Name |) | | | Date | e of Birth | FEIN or | SSN | | 1 | nterest/F | | |
| Last | Hanm: Bank Lest Name Date of Birth FEIN or SSN Interest/Perco | | | | | | | | | | - | | | | | | | | | | |
| part | nerehips, | carpoi | retions, fir | miti | ed li | ability | comp | enies, | etc.) w | ritten agre ill share ir eny way b | n the p | profit or | gro | ss proce | eds of th | ils est | abliahm | ent, and | d arry ag | | |
| 17. | | | | | | | | | ral pren | ptional Pre nises been | adop | ited? | | | | | MA | | | | |
| 40 | r 4 | al all his | -4 - Did | | - 0 | -3 | | | | ber of add | - | | | | | | | - | - | - | 600.00 |
| 18. | | govern | ng body a | | | | | | | 47-302(A) cumentati | | | | | | | | use, pe | | | |
| 19. | Liquor Lit | ensed a pha | Drugstore | ense | ed b | y the C | colorad | do Boa | | llowing: harmacy, l | ocate | d within | the d | applicant | s LLOS p | remise | | | | | |

| COMPANY OF PERSONS IN | 404 (09/25/19) | | | | | | | | | | |
|-----------------------|--|------------------------------------|---|---|-------------------------|---------------------------------------|--|---------------------|--|-----------------|----------|
| Nan | | 2. | The | | | ype of Licer | 1 - 4m | m/ | Account Number | | |
| 20. | | | | he following: Attach a | | | document | stion | L ba | _ | |
| | a. Is the applica | nt organize | ition operated s | olely for a national, socia | al, fraterna | al, petriotic, p | oditical or a | thletic purpose | and not for pecuniary gain | | |
| | b. Is the applica | ant organiz | ration a regular | ty chartered branch, loc | dge or chi | epter of a na | ational orga | | th is operated solely for the | Service Control | |
| | | | | zetion or society, but no | ot for pecu | uniary gain? | • | | NIA | | |
| | c. How long ha | | | | | | | | | L | protein, |
| 73-4 | | - | | site or une years (une staurant applicants ans | | | was operan | ed Solely for tr | ne reasons stated above? | | |
| Æ 1 | | | | for a Federal Permit? ((| | | olication m | ust be attache | od) P/A | | |
| 22. | and the same of th | ACAMANA MANAGEMENT | | wer the following: | | | ************************************** | ******************* | *************************************** | - | |
| | a. Is the applica | ınt an însti | tution of higher | education? | | | | | NA | Yes | No |
| | | | | Is with the institution of | | | | | ad anadasa | | |
| 23. | For all on-prem | | | e contract with the in: | sowoon | Ot sudmer o | ducenon | to broatde to | od services, | - | |
| | a. Hotel and Re Individual His | staurani, i story Reco | Lodging and E | 1 0.5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | | | | | istered Manager must also | | |
| | | | | to approved State Vend DS) the Permitted Manager | | | | | ation checklist, Section IV, | for deta | arts |
| | - DR 8000 ar | | | JOJ DIO PERINDEU MENDI | ger musi e | BISU SULFIEL | cara encaracigo | u austriu addini | NIA | | |
| Last | Name of Manag | er | | | F | irst Name o | f Manager | | area a area a | | |
| 24. | | | | of, or have a financial in | | any other li | quor licens | ed establishn | nent in the State of | | W) |
| 25. | | | | license and account nur ex applicants answer th | | or: | | | | Yes | |
| | | | | boundaries of the Cam | | - | ? | | 13.1 | | |
| | If yes, please | provide a | map of the ge | ographical location with | nin the Ca | mpus Liquo | r Complex | | NIA | | |
| | | | | for issues outside the g | | cal location | of the Can | npus Liquor C | complex. | | |
| l act | b. Designated a Name of Manag | | if Related Faci | ity- Campus Liquor Cor | | irst Name o | Monanor | | | | |
| LOS | 1401110 Of Medical | C. | | | 1 | 1131 140H140 Q | s sesas augus | | MIA | | |
| 26. | other person | icant, inclu with a 109 | 6 or greater fin | | plicant, b | een found i | | | ing members (LLC), or an | | No Z |
| | | with a 109 | | | | | | | ing members (LLC), or an imposed pursuant to section | | K |
| Nort | and Managing applicant. All State Vendor th | Members persons li rough the | is ted below m is ted below m ir website. See | pplicant must list any s | stockhold R 8404-l | ers, partner (Individual I | rs, or memi History Re | bers with own | cera, Directora, General nerahip of 10% or more ake an appointment with a Position | in the | oved |
| | Haile, engisteal | Gara | i | | | | | | Position Nee prosident | 5 | |
| Narr | 8 | 1. | | Horne Address, City | & State | - | | DOB | Position | %Ow | vned |
| M | engisteal | 2.50 | amawit | | | | | | Nice presiden | 5 | O |
| Narr | 9 () | | | Horne Address, City | & State | | | DOB | Position * | %Ov | vned |
| Nam | e | | | Home Address, City I | & State | | | DOB | Position | %Ow | med |
| Nem | 10 | - | | Home Address, City | & State | · · · · · · · · · · · · · · · · · · · | | DOB | Position | %Ow | vned |
| ** C | orporations - the total ownership r | President, percentage | Vice-President disclosed her | e does not total 100%, | rer must b applicant | nust check | d for above this box: | (Include own | ership percentage if applica | | in a |

DR 8404 (09/25/19)

| Name Halk, | Turk | | Type of Licen | Ligher stre | Account Number | | - | |
|--|--|---|--------------------|-----------------------------|---|---|---------|------|
| | 100 | Oath O | Applicant | U si | 1 | *************************************** | - | |
| knowledge. I also ackr | | degree that this application sponsibility and the respons | and all ettachma | | | | | |
| Authorized Signature | DocuSigned by: | Printed Name an | d Title Sava | President | | Date 7/ | 27/ | رعدا |
| | AAA10EReport an | d Approval of Local | Licensing A | uthority (City/Cou | inty) | | | |
| Date application filed v | with local authority | Date of local authority hearing | g (for new license | applicants, cannot be les | is than 30 days from d | tale of ap | pticati | on) |
| | | | | | VF-10-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0 | | | |
| That the local authority and aware of, liquor of (Check One) Date of inspe Will conduct i | ckground investigation, y has conducted, or inte- ode provisions affecting ction or anticipated date inspection upon approva | of state licensing authority OS) or Retail Liquor Store (| n of the propose | d premises to ensure the | | | Yes | |
| Is the Liquor I | Licensed Drugstore(LLD | spopulation of > 10,0000? S) or Retail Liquor Store (F population of < 10,0000? | RLS) within 3,000 |) feet of another retail li | quor license for off- | | | |
| | | ined by a radius measureme te and ends at the principal | | | of the LLDS/RLS pri | emises | | |
| | | (LLDS) have at least twenty twelve (12) month period? | percent (20%) o | f the applicant's gross of | annual income deriv | ed | | |
| report that such licens | e, if granted, will meet the | , and the premises, busines: ne reasonable requirements R.S., and Liquor Rules. The | of the neighbort | nood and the desires of | | | | |
| Local Licensing Author | ity for | | Telephone Nu | mber | Town, City | | | |
| Signature | | Print | • | Title | | Date | 9 | |
| Signature | | Print | | Title | | Date | 3 | |





Basement Storage Unit

| Site: | 3600 E. Colfax Ave | Drawing: 801506 | Project: 0000500 | Drawn: Jack Kim | Motes: Monroe Liquors | 3600 E Colfax Ave Denver, CO |
|--------|-----------------------------|---------------------|---------------------|--------------------|--------------------------|---------------------------------|
| Title: | Basement Storage Floor Plan | Scale: 1/6":1'0" | Date: 07/17/2021 | Rev: | | 80206 |