



OREGON LIQUOR CONTROL COMMISSION

# LIQUOR LICENSE APPLICATION

1. Application. Do not include any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1 <sup>st</sup> Location	Date application received:
<input type="checkbox"/> Brewery 2 <sup>nd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Recommends this license be: <i>Rec'd by Portland Liquor Licenses</i>
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	By: _____
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	Date: _____
<input type="checkbox"/> Distillery	<i>MAY 02 2019</i>
<input type="checkbox"/> Full On-Premises, Commercial	<i>PD \$100 CC</i>
<input type="checkbox"/> Full On-Premises, Caterer	<i>* 212041</i>
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1 <sup>st</sup> location	
<input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location	
<input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> location	
<input checked="" type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	<i>4/19/19</i>
<input type="checkbox"/> Warehouse	By: <i>Jan Z.</i>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	Date application accepted as initially complete:
<input type="checkbox"/> Winery 1 <sup>st</sup> Location	<i>4/26/19</i>
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	By: <i>Jan Z.</i>
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	License Action(s): <i>N/O</i>

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

KO LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

# LIQUOR LICENSE APPLICATION

3. Applicant #1 KO, LLC Wooram Min ~52	Applicant #2
Applicant #3	Applicant #4

4. Trade Name of the Business (Name Customers Will See)  
The Bulgogi

5. Business Address (Number and Street Address of the Location that will have the liquor license)  
4232 NE Sandy Blvd

City Portland	County Multnomah OR	Zip Code 97213
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6. Does the business address currently have an OLCC liquor license?  YES  NO

7. Does the business address currently have an OLCC marijuana license?  YES  NO

8. Mailing Address (PO Box, Number, Street, Rural Route (where the OLCC will send your mail))  
4232 NE Sandy Blvd, Portland, OR 97213

City Portland	State OR	Zip Code 97213
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9. Phone Number of the Business Location  
503 329 8609

Email Contact for this Application  
neweara7@gmail.com

Contact Person for this Application  
Wooram Min

Phone Number  
503 724 1600


Mailing Address 4232 NE Sandy Blvd	City Portland	State OR	Zip Code 97213
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I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is prohibited on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.

Wooram Min   
\_\_\_\_\_  
(Applicant #1)

\_\_\_\_\_  
(Applicant #2)

\_\_\_\_\_  
(Applicant #3)

\_\_\_\_\_  
(Applicant #4)

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS: 1518450-97

Please Print or Type

LLC Name: KO LLC Year Filed: 2019

Trade Name (dba): The Bulgogi

Business Location Address: 4232 NE Sandy Blvd

City: Portland ZIP Code: 97213

List Members of LLC:

Percentage of Membership Interest:

1. Wooram Min  
(managing member)

100 %

2. \_\_\_\_\_  
(members)

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: Wooram Min DOB: 3/20/1986

I understand that if my answers are not true and complete, the OLCC may deny my license application.

Signature: Wooram Min President Date: 4/18/19  
(name) (title)