



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	_____
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	_____
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input type="checkbox"/> Full On-Premises, Commercial	Date: _____
<input type="checkbox"/> Full On-Premises, Caterer	
<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	5/30/19
<input type="checkbox"/> Warehouse	By: Jon Z.
<input type="checkbox"/> Wholesale Malt Beverage & Wine	Date application accepted as initially complete:
<input type="checkbox"/> Winery 1 <sup>st</sup> Location	6/5/19
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	By: Jon Z.
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	License Action(s): N/O

Rec'd by Portland  
Liquor Licenses

JUN 07 2019

PD \$ 100.00 ck  
# 2323

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

ARAMARK Educational Services, LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

# LIQUOR LICENSE APPLICATION

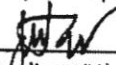
3. Applicant #1 ARAMARK Educational Services, LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) BurgerFi Pioneer Place			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 700 SW 5th Avenue Suite 1113			
City Portland	County Multnomah	Zip Code 97204	
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) 610 Smithfield Street, Suite 300			
City Pittsburgh	State PA	Zip Code 15222	
9. Phone Number of the Business Location TBD		Email Contact for this Application duke@nwalcoholaw.com	
Contact Person for this Application DUKE TUFTY		Phone Number (503) 718-2310 (NO SOLICITATION)	
Mailing Address 7521 NE SANDY BLVD.	City PORTLAND	State OR	Zip Code 97213

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.

  
\_\_\_\_\_  
(Applicant #1)

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

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

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



OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE

Please Print or Type

LLC Name: ARAMARK Educational Services, LLC Year Filed: 1950

Trade Name (dba): BurgerFi Pioneer Place

Business Location Address: 700 SW 5th Avenue Suite 1113

City: Portland ZIP Code: 97204

List Members of LLC:

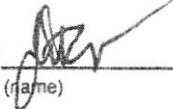
Percentage of Membership Interest:

- |  |                          |
|--|--------------------------|
| 1. _____<br>(managing member)                        | _____                    |
| 2. <u>ARAMARK Educational Group LLC</u><br>(members) | <u>100%</u>              |
| 3. <u>Jeffrey Gilliam (President)</u>                | <u>0% (not a member)</u> |
| 4. <u>Tamsin Fast (Vice President)</u>               | <u>0% (not a member)</u> |
| 5. <u>James Tarangelo (Treasurer)</u>                | <u>0% (not a member)</u> |
| 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: TBD DOB: \_\_\_\_\_

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

Signature:  \_\_\_\_\_ Date: 5/10/19  
(name) Treasurer (title)