



LIQUOR LICENSE APPLICATION

PRINT FORM

RESET FORM

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 st Location | Date application received: |
| <input type="checkbox"/> Brewery 2 nd Location | Name of City or County: |
| <input type="checkbox"/> Brewery 3 rd Location | Recommends this license be: |
| <input type="checkbox"/> Brewery-Public House 1 st location | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| <input type="checkbox"/> Brewery-Public House 2 nd location | By: _____ |
| <input type="checkbox"/> Brewery-Public House 3 rd location | Date: _____ |
| <input type="checkbox"/> Distillery | |
| <input type="checkbox"/> Full On-Premises, Commercial | |
| <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 st location | |
| <input type="checkbox"/> Grower Sales Privilege 2 nd location | |
| <input type="checkbox"/> Grower Sales Privilege 3 rd location | |
| <input type="checkbox"/> Limited On-Premises | |
| <input type="checkbox"/> Off-Premises | |
| <input type="checkbox"/> Off-Premises with Fuel Pumps | |
| <input type="checkbox"/> Warehouse | |
| <input type="checkbox"/> Wholesale Malt Beverage & Wine | |
| <input checked="" type="checkbox"/> Winery 1 st Location | |
| <input type="checkbox"/> Winery 2 nd Location | |
| <input type="checkbox"/> Winery 3 rd Location | |

| OLCC USE ONLY |
|--|
| Date application received: |
| By: _____ |
| Date application accepted as initially complete: |
| By: _____ |
| License Action(s): N/O |

Rec'd by Portland
Liquor Licenses
JUL 24 2019
PD \$100 ck
* 1018

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

Matero Operating Co. LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

| OLCC USE ONLY | OLCC FINANCIAL SERVICES USE ONLY |
|---------------|----------------------------------|
| | |



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

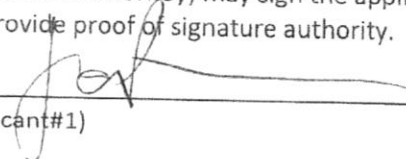
| | | | |
|---|---------------------|---|-------------------|
| 3. Applicant #1 Matero Operating Co. LLC | | Applicant #2 | |
| Applicant #3 | | Applicant #4 | |
| 4. Trade Name of the Business (Name Customers Will See) Arenness Cellars | | | |
| 5. Business Address (Number and Street Address of the Location that will have the liquor license) 2303B N Harding Avenue | | | |
| City Portland | County Multnomah | Zip Code 97227 | |
| 6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <i>AP host Calcia 28 6592</i> | | | |
| 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) 4284 West Bay Road | | | |
| City Lake Oswego | State OR | Zip Code 97035 | |
| 9. Phone Number of the Business Location 503-756-2448 | | Email Contact for this Application judy@winemakerslawyer.com | |
| Contact Person for this Application Judy Parker | | Phone Number 503-862-8583 no solicitations please! | |
| Mailing Address <i>PO Box 6555</i> | City Portland | State OR | Zip Code 97228 |

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



SOS: 1384831-93

Please Print or Type

LLC Name: Makro Operats Co LLC Year Filed: 2017

Trade Name (dba): Avenness Cellars

Business Location Address: 2303 B N Hardy

City: Portland ZIP Code: 97227

List Members of LLC:

Percentage of Membership Interest:

1. Robert Bailey
(managing member)

50%

2. Subanya Matmanocake
(members)

50%

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: Robert Bailey DOB: 09/28/1961

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

Signature: [Signature] (name) Owner (title) Date: 07/21/19