

APPLICATION FOR APPROVAL OF CORPORATE CHANGE

This form is to be used by a corporate licensee to apply for permission to make a corporate change involving (1) change of officers or directors, LLC Members, etc., or (2) any change in ownership interest of existing principals, or (3) any change in ownership interest which would increase the holdings of any one officer, director, LLC Member or stockholder to 10% or more of the licensee.

*Such change cannot become effective under the Alcoholic Beverage Control Law until permission has been granted by the State Liquor Authority. Therefore, it is recommended that any change be made conditional upon approval by the State Liquor Authority.*

**Section A**

Serial No.: 6066023

License ID  County  Telephone #

Full Name of Licensee as listed on the License

Trade Name (DBA) as listed on the License Certificate

Complete Address of Licensed Premises including Zip

Post Office/Mailing Address, if different than premises

FEIN#  Business Website

Business Email Address (required)

Name of Contact   Attorney  Representative  Contact

Office Address

City  State  Zip Code

Telephone Number of Office (Include Area Code)

E-mail Address (if available)

Submit a completed Notice of Appearance

**Section B**

**Change Requested:** Check all that apply

- New stockholding(s)/stockholder(s).
- The removal of officer(s)/director(s)/member(s).
- Appointment of new officer(s)/director(s)/member(s).
- Death of officer(s)/director(s)/member(s)/stockholder(s).

1. How was the interest acquired in the Corporation/LLC?

2. Are there any other licenses held in New York under this corporation/LLC? If yes, list all serial numbers.

**Part 1. Current Approved Corporate Set-Up**

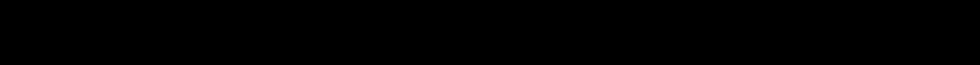
List below the names of all LLC members/managers, officers, directors and individual stockholders that are currently licensed to hold an interest in the subject license. *Attach additional sheets if necessary.*

Name	Current Title(s)	Current % of Interest	Current Number of Shares
Air Mail, LLC	Owner	[REDACTED]	
Edward Graydon Carter	LLC Manager	[REDACTED]	
William Keenan	LLC Manager	[REDACTED]	

**Part 2. Proposed Corporate Set-Up**

List below the names of all LLC members/managers, officers, directors and individual stockholders who will own 10% of more in the subject license upon approval of this corporate change. You must account for 100% of the ownership and you must disclose any percentage of ownership not held by the individuals on this form, confirming no individual owns 10% or more of the remaining interest. *Attach additional sheets if necessary.*

Name	Proposed Title(s)	Proposed % of Interest	Proposed # of Shares	Check if New
Air Mail, LLC *	Owner	[REDACTED]		<input type="checkbox"/>
Sarah Personette	President, Chief Executive Officer, Treasurer & Secretary	[REDACTED]		<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>



*All parties listed in Part 2 and are NEW to the corporation/LLC must complete a Personal Questionnaire as well as submit an Applicant Statement, an original color photo, and a photo ID for themselves. The forms are available for download on our web site at: [www.sla.ny.gov](http://www.sla.ny.gov)*

**ALL NEW APPLICANT PRINCIPALS WILL BE REQUIRED TO BE FINGERPRINTED ELECTRONICALLY**

**NOTE:** Persons CURRENTLY licensed by the State Liquor Authority do not have to be fingerprinted. Each applicant principal that is required to be fingerprinted will be instructed to do so on the application Filing Receipt once the application is received by the Authority. Fingerprinting instructions are available on the Filing Receipt or on our website, [www.sla.ny.gov](http://www.sla.ny.gov).

**Section D**

The licensee represents that there have been no changes other than those set forth herein, in any of the facts required to be set forth in the application for license, and agrees that any application filed by it or by any of its officers, directors or stockholders, for any license or permit under the Alcoholic Beverage Control Law, and the occupation record submitted herewith, shall be deemed and made a part hereof and considered by the Authority in acting upon this Application for Approval of Corporate Change.

I/We, the Applicant(s) also certify that all papers filed in support of this application or any application filed under the Alcoholic Beverage Control Law by any person having an interest, direct or indirect, either in the business to be licensed or any license or permit shall be deemed a part hereof and considered by the State Liquor Authority in acting upon this application.

I/We understand that the information I/we submit will be relied on by the State Liquor Authority in acting on this application. I/ we understand that any false statements or misrepresentations shall constitute sufficient cause for the disapproval of the applications and/or revocation, cancellation or non-renewal of any license which is issued or affected as a result of such application.

I/We verify that all of the above statements are true. If any of the above information changes prior to receipt of the license or approval of the corporate change, I/we will notify the Authority by registered or certified mail within 48 hours. If any changes occur after the issuance of the license or approval applied for, I/we understand that failure to give the required notice may constitute a violation of Section 110 of the Alcoholic Beverage Control Law and/or Rule 36.1(j) of the State Liquor Authority and will result in proceedings to revoke, cancel or suspend such license.

I/We, the Applicant(s) certify that there are no financial transactions involved concerning the license applied for EXCEPT as described herein.

**I/We acknowledge that the licensed premises is bound by the Method of Operation previously approved by the New York State Liquor Authority.**

[Empty box for name]

(Print Name)

certifies that he is

[Empty box for title]

(Title)

of the above named licensee; that he knows the contents of the above application and the statements and answers therein; that the same are true of his own knowledge that he has been authorized by order of the Board of Directors of said licensee to make the statements and answers therein in behalf of said licensee with the same force and effort as if said licensee made such statements and answers itself.

[Empty box for date]

Dated

[Empty box for signature]

(Signature of Currently Authorized Officer)

Sarah Personette

(Print Name)

certifies that he is to be

President, CEO, Treasurer & Secretary

(Title)

of the above named licensee; that he knows the contents of the above application and the statements and answers therein; that the same are true of his own knowledge.

[Empty box for date]

Dated

[Empty box for signature]

(Signature of Proposed Authorized Officer)

**OFFICE USE ONLY:**

[Empty box for date]

Dated

Approved or Disapproved

License Board Member

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## APPLICANT STATEMENT

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I, [print name] Sarah Personette

(the  sole proprietor,  partner,  corporate principal or,  LLC/LLP member)

understand that the State Liquor Authority will rely on each and every answer in the application and accompanying documents in reaching its determination and state, under penalty of perjury, that all statements and representations therein are true to the best of my knowledge and belief; and

I state that the location and description of the premises to be licensed does not violate any requirement of the ABC law or other state or local ordinances; and

I understand that if any change occurs in the information provided to the Authority in the application, the licensee must notify the Authority by certified mail within 48 hours and if any change occurs after receipt of the license, the licensee must notify the Authority by certified mail within 10 days. I understand that failure to give such notice may result in disapproval of the application or revocation or non-renewal of any license for which this application is submitted; and

I understand that the licensee will be bound by the statements and representations made in the application, including, but not limited to the licensee's method of operation and the identity of persons with an ownership or financial interest in the licensed premises; and that all statements and representations made become conditions of the license; and

I understand that any physical alterations to, or changes to the size of the area used for the sale and consumption of alcoholic beverages, must be reported to the Authority and may require the approval of the Authority; and

I understand that the licensee must keep the Authority advised of any change in the mailing addresses of the licensee, the licensee's principals, and the licensee's landlord.

I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the application may result in revocation of any license for which the application was submitted; and

I understand that any false statement or misrepresentation will constitute cause for disapproval of the application or revocation or non-renewal of any license for which this application is submitted.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date