

**NOTICE TO LEGISLATIVE  
AUTHORITY**

**OHIO DIVISION OF LIQUOR CONTROL**  
6606 TUSSING ROAD, P.O. BOX 4005  
REYNOLDSBURG, OHIO 43068-9005  
(614)644-2360 FAX(614)644-3166

TO

<b>4289689</b>		<b>STCK</b>	<b>JIMMY V V LLC</b>	
PERMIT NUMBER		TYPE	DBA JIMMY VS GRILL & PUB	
ISSUE DATE				
<b>12 20 2023</b>		EXCLUDING W/S DRIVE THRU AREA		
FILING DATE				
<b>D5 D6</b>				
PERMIT CLASSES				
<b>45</b>	<b>132</b>	<b>B</b>	<b>F30791</b>	
TAX DISTRICT			RECEIPT NO.	

FROM **02/05/2024**

PERMIT NUMBER		TYPE
ISSUE DATE		
FILING DATE		
PERMIT CLASSES		
TAX DISTRICT		RECEIPT NO.



MAILED **02/05/2024**      RESPONSES MUST BE POSTMARKED NO LATER THAN. **03/07/2024**

**IMPORTANT NOTICE**

PLEASE COMPLETE AND RETURN THIS FORM TO THE DIVISION OF LIQUOR CONTROL  
WHETHER OR NOT THERE IS A REQUEST FOR A HEARING.      **B STCK 4289689**  
REFER TO THIS NUMBER IN ALL INQUIRIES \_\_\_\_\_  
(TRANSACTION & NUMBER)

(MUST MARK ONE OF THE FOLLOWING)

WE REQUEST A HEARING ON THE ADVISABILITY OF ISSUING THE PERMIT AND REQUEST THAT  
THE HEARING BE HELD       IN OUR COUNTY SEAT.       IN COLUMBUS.

WE DO NOT REQUEST A HEARING.   
DID YOU MARK A BOX?      IF NOT, THIS WILL BE CONSIDERED A LATE RESPONSE.

PLEASE SIGN BELOW AND MARK THE APPROPRIATE BOX INDICATING YOUR TITLE:

\_\_\_\_\_  
(Signature)      (Title)-  Clerk of County Commissioner      (Date)  
 Clerk of City Council  
 Township Fiscal Officer

**CLERK OF PATASKALA CITY COUNCIL  
ATTN FISCAL OFFICER/CLERK  
621 W BROAD ST - SUITE 2B  
PATASKALA OHIO 43062**

CK# 1165/100/1ck

Office Hours  
8:00 a.m. - 5:00 p.m.  
For Questions call  
(614) 644-3156

Ohio Department of Commerce - Division of Liquor Control  
6606 Tussing Road, Reynoldsburg, Ohio 43068-9005  
<http://www.com.ohio.gov/licr>  
**APPLICATION FOR CHANGE OF LLC MEMBERSHIP INTERESTS**  
**PROCESSING FEE \$100.00**  
CAUTION: ALLOW 10 TO 12 WEEKS FOR PROCESSING



PERMIT HOLDER REQUESTS APPROVAL OF THE DIVISION OF LIQUOR CONTROL OF THE FOLLOWING:

Permit Holder Name:

Jimmy V V LLC

Permit Premises Address:

14211 E. Broad St  
Reynoldsburg, Ohio 43068

Liquor Permit Number(s):

4289689

Federal Tax ID Number:

Email Address:

j a n d r i o f f @ a o l . c o m

Attorney's Name, Address and Telephone Number (If represented):

James Andrioff, 22 E. Gay St. Suite 201, Columbus, Ohio 43215 (614) 221-2700

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

**PLEASE COMPLETE ALL AREAS OF SECTION A & B BELOW**

Section A - **PREVIOUS** List of managing members and all persons with a 5% or greater membership or voting interest in the LLC

NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) Jim Velio	[REDACTED]	<input checked="" type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest <u>55</u> %		[REDACTED]
2) Josif Stavre	[REDACTED]	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest <u>45</u> %		[REDACTED]
3)	[REDACTED]	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %		[REDACTED]
4)	[REDACTED]	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %		[REDACTED]

Section B - **REVISED** List of managing

a 5% or greater membership or voting interest in the LLC

NAME	OFFICE HELD	INTEREST
1) The Velio Family Trust Kristaq Kane Trustee	<input checked="" type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input checked="" type="checkbox"/> Membership interest <u>55</u> %	
2) Josif Stavre	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest <u>45</u> %	
3)	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	
4)	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest _____ % <input type="checkbox"/> Membership interest _____ %	