

Board of Licensing Commissioners

Application for Transfer of Alcoholic Beverage License

TRANSFER OF: Location X Name X Stock X ?RETAILER CLASS: A BH BM BT BV ✓ BVL C E ED J T

NAME OF TRANSFER APPLICANT

TEL #

Besos Kitchen and Cocktails, LLC 401-965-7648

D/B/A

Besos Kitchen and Cocktails

ADDRESS

378 Main St, Unit 1, EG, RI

The above hereby petitions the Licensing Board to transfer the said license to:

New Location (if any):

Same

New Name (if any)

TMG MAIN STREET ~~THANE~~ HOLDINGS LLC d/b/a

If change of stockholder's, please list old and new stockholders:

Besos Kitchen + CocktailsDoes establishment have a draft system? YES &and Ball's 4-4-18

Signature of Transferor

Date

Erin M. Connor

Printed Name

Erin M. Connor

Witness or Notary Public

[Signature]

Signature of Transferee

4-2-18

Date

Thomas J. McAttee

Printed Name

Witness or Notary Public

4/2/18

Erin M. Connor

Notary Public, State of Rhode Island

My Commission Expires 3/7/21

ID # 51057

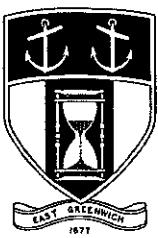
The Board of License Commissioners has set a hearing on: _____ at _____ o'clock p.m.

Located at: _____ and ordered the same to be duly advertised.

The Board of License Commissioners

Date

Title



Board of Licensing Commissioners

Application for Alcoholic Beverage License by Corporation

DECEMBER 1, 2017 to NOVEMBER 30, 2018

(Pursuant to provisions of RIGL Title 3)

RETAILER CLASS:

A BH BM BT BV X BVL C E ED J T (1:00 a.m.)

NAME OF APPLICANT (Corporation Name)

TMG - Main Street Holdings, LLC TEL # 401-316-1004

D/B/A

Besor Kitchen + Cocktails

ADDRESS OF PREMISES

378 Main Street, East Greenwich, RI 02818

STATE INCORPORATED

Rhode Island

DATE INCORPORATED

April - 2018

NAME, ADDRESS AND TELEPHONE NUMBER OF ALL OFFICERS:

PRESIDENT

Thomas (T.S.) Martucci - President (401-316-1004)

VICE-PRESIDENT

SECRETARY

TREASURER

NAME, ADDRESS AND TELEPHONE NUMBER OF ALL DIRECTORS OR BOARD MEMBERS:

Thomas (T.S.) Martucci
195 Old Forge Road
East Greenwich, RI 02818

CLASSES OF STOCK:

(a) Amount of Each Authorized:

1 Class Voting

(b) Amount of Each Issued:

1 Class Voting

NAMES AND ADDRESSES OF ALL REGISTERED OWNERS OF EACH CLASS AND AMOUNT OWNED: (attach list if necessary)

Thomas (T.S.) Martucci
195 Old Forge Road
East Greenwich, RI 02818

IF ANY OF THE ABOVE STOCK IS HYPOTHECATED OR PLEDGED, PROVIDE DETAILS:

N/A

IF APPLICATION IS ON BEHALF OF UNDISCLOSED PRINCIPAL OR PARTY IN INTEREST, PROVIDE DETAILS:

N/A

Does Applicant Own Premises?

Yes

No X

Is Property Mortgaged?

Yes

No X

Is Property Leased?

Yes X

No

NAME AND ADDRESS OF MORTGAGEE OR LESSEE AND AMOUNT OF EXTENT:

MG D Realty Corp
P.O. Box 639 New Port, RI 02840
\$3,200 /mth

LOCATIONS WITHIN OR OUTSIDE OF BUILDING WHERE LIQUOR WILL BE SERVED:

Bar / Lounge / outside patio

During hours of operation

HAVE ANY OFFICERS, BOARD MEMBERS OR STOCKHOLDERS EVER BEEN ARRESTED OR CONVICTED OF A CRIME? YES NO X IF YES, PLEASE EXPLAIN:

IS ANY OTHER BUSINESS TO BE CARRIED ON IN LICENSED PREMISES? YES _____ NO X
IF YES, PLEASE EXPLAIN:

IS ANY OFFICER, BOARD MEMBER OR STOCKHOLDER ENGAGED IN ANY MANNER AS A LAW ENFORCEMENT OFFICER? YES _____ NO X IF YES, PLEASE EXPLAIN:

IS APPLICANT OR ANY OF ITS OFFICERS, BOARD MEMBERS OR STOCKHOLDERS INTERESTED DIRECTLY OR INDIRECTLY AS PRINCIPLE OR ASSOCIATE OR IN ANY MANNER WHATSOEVER IN ANY LICENSE ISSUED UNDER CHAPTER 3 OF THE GENERAL LAWS OF RHODE ISLAND, AS AMENDED? YES _____ NO X IF YES, PLEASE EXPLAIN:

IS APPLICANT THE OWNER OR OPERATOR OF ANY OTHER BUSINESS? YES X NO _____ IF YES, PLEASE EXPLAIN:

The Marucci Group (the Tap / SafeHouse)

STATE AMOUNT OF CAPITAL INVESTED IN THE BUSINESS: \$325,000.

DOES ESTABLISHMENT HAVE A DRAFT SYSTEM (RIGL 3-7-25)? Yes

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT (signature)

4/2/18
DATE

PRINTED NAME AND TITLE

Erin M. Connor
Notary Public, State of Rhode Island
My Commission Expires 3/7/21
ID # 51057

4/2/18
DATE

WITNESS OR NOTARY PUBLIC

Instructions for Applicants

1. Every question on Application Form must be answered. Any false statement made by the Applicant will be sufficient grounds for the denial of the application or the revocation of the license in case one has been granted.
2. Corporations having 25 or more stockholders need not file a list of the names and addresses of stockholders.
3. Attention is called to the requirements of RIGL 3-5-10:
 - a) All newly elected officers or directors must be reported to the Board of License Commissioners within 30 days.
 - b) Any acquisition by any person of more than ten per cent (10%) of any class of corporate stock must be reported within 30 days.
 - c) Any transfer of fifty per cent (50%) or more of any class of corporate stock can be made only by written application to the licensing board subject to the procedures for a transfer of a license.
4. Submit with this application a copy of proposed menu. (Class BV; BVL)
5. Submit a Criminal History Record for all Officers, obtained at the RI Attorney General's office (new applicants only).
6. Submit a copy of Pharmacist's License from the Department of Health (Class E).
7. Should your business close for any reason, please contact the Town Clerk at 401-886-8604.
8. Applicant certifies that under penalties of perjury that such person has filed all required tax returns and paid all taxes due the State per RIGL 5-76-2.

Office Use Only

Date Approved by Council:	Date License Issued:
Fee Paid:	Date License Expires:
License Issued By:	

PETITION FOR TRANSFER OF VIRTUALING LICENSE

TO THE HONORABLE TOWN COUNCIL OF

THE TOWN OF EAST GREENWICH

The undersigned hereby petitions that Virtualing License No. _____ for:

Besos Kitchen and Cocktails LLC
Transferor

378 Main St, Unit 1 be transferred to:
Address

TMG- Main Street Holding, LLC
Transferee

195 ~~198~~ Old Forge Road, East Greenwich RI
Address

[Signature] 4-4-18
Signature of Transferor Date

401-965-7648
Telephone or Email Address

[Signature] 4-2-18
Signature of Transferee Date

* 401-316-1004 / TS@theMaineGraphic.com
Telephone or Email Address

NOTE: All outstanding taxes which are the responsibility of the applicant (real estate, tangible personal property and sewer) should be current prior to applying for transfer per Section 227-38 of the Town Code.

FEE: \$35.00 payable at time of application.

HEARING DATE: _____
DATE ISSUED: _____

DATE GRANTED: _____
RECEIVED BY: _____



Town of East Greenwich, Rhode Island

Town Clerk's Office, 125 Main Street, PO Box 111, East Greenwich, RI 02818

(401) 886-8605

APPLICATION FOR VIRTUALING LICENSE

DECEMBER 1, 2017 to NOVEMBER 30, 2018

(Pursuant to provisions of RIGL Section 5-24-1)

☐

RENEWAL

☒

NEW

BUSINESS NAME TMG- Main Street Holdings, LLC

(D/B/A) Beror Kitchen + Cocktails

LOCATION OF BUSINESS 378 Main Street, East Greenwich, RI 02818

BUSINESS ADDRESS (If different than location) 11 11 11

TELEPHONE 401-398-8855 HOURS OF OPERATION Mon - Sat 11am - 1am

SOLE PROPRIETOR (PRINT NAME, ADDRESS AND DATE OF BIRTH):

NAME

ADDRESS

DATE OF BIRTH

S-Corp
CORPORATIONS/PARTNERSHIPS (PRINT NAME, ADDRESS AND DATE OF BIRTH of all partners or principal officers and stockholders):

NAME

ADDRESS

DATE OF BIRTH

Thomas T. Martini 195 00 Fayer Paul 9/1/73
East Greenwich, RI

DESCRIBE TYPE OF OPERATION (Restaurant, Bakery, etc.):

Is your operation and storage area all on one floor? Yes ☒ No ☐

Seating capacity 100 No. of Dining Rooms 1 No. of Kitchens 1

RI RETAIL SALES TAX PERMIT NO. _____

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE OF APPLICANT: [Signature]

DATE: 4/2/18

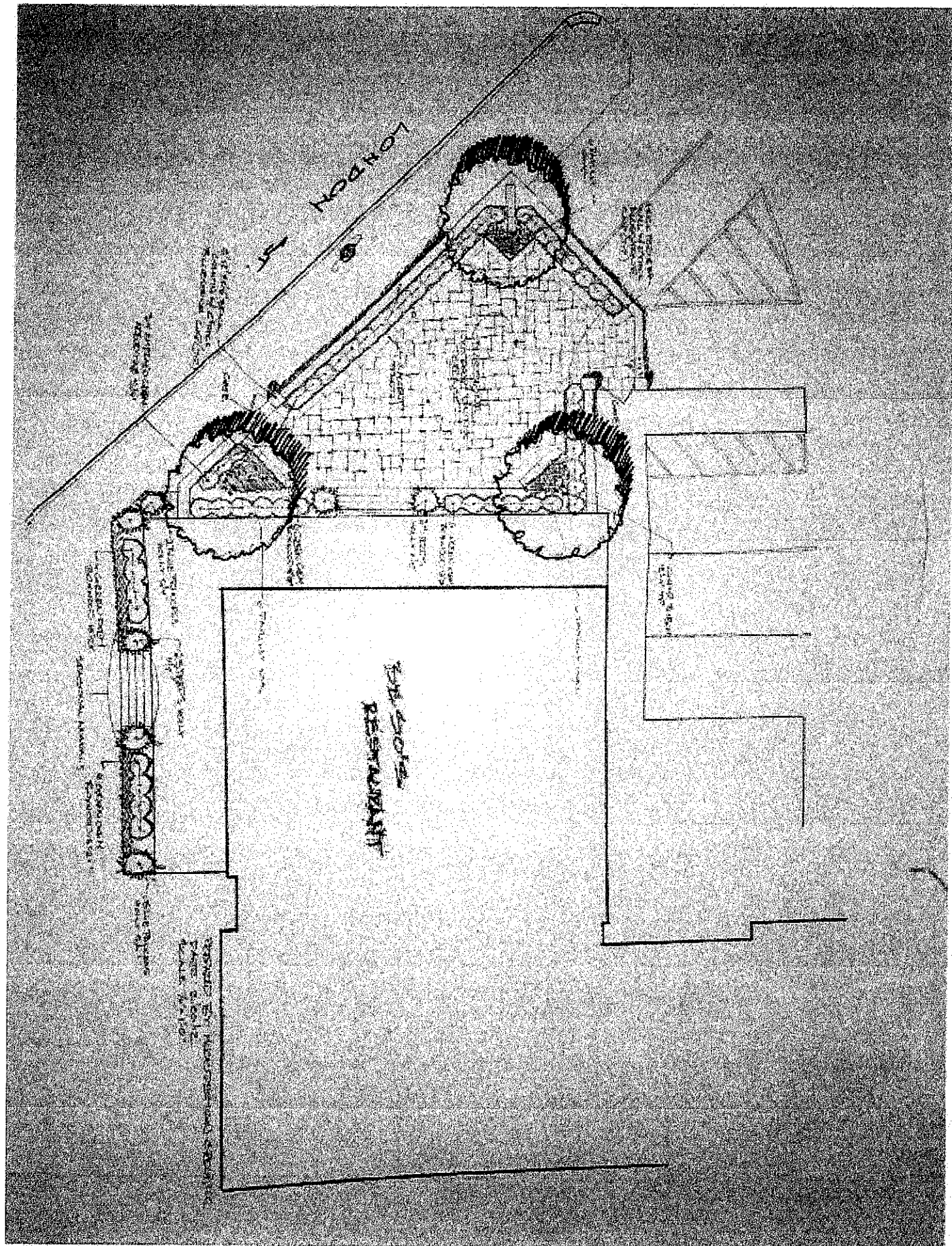
NOTE: INSPECTIONS BY THE RI HEALTH DEPT, BUILDING INSPECTOR AND FIRE MARSHAL ARE REQUIRED. NO ACTIVITY WILL BE AUTHORIZED UNTIL SATISFACTORY CERTIFICATES ARE OBTAINED. ALL TAXES MUST BE PAID.

(A virtualing house is a business where food is prepared and/or consumed on the premises.)

Office Use Only

Date Approved by Council:	Date License Issued:
Fee Paid: \$75.00	Date License Expires:
Extended Hours (1 AM - 4 AM) \$100.00 *	
License Issued By:	

*Please note the extended hours fee is \$100 total not in addition to the \$75



Year/Type/Bill No. 2017 PP-R 472

Customer Account Information
109006091
BESOS KITCHEN & COCKTAILS LLC
378 MAIN STREET
EAST GREENWICH, RI 02818
Special Conditions/Notes

Property Information
Parcel ID
Prop ID 6091
Prop Loc 378 MAIN STREET

Installment Information

Int Dt	Billed	Abt/Adj	Pmt/Crd	Interest	Unpaid bal
09/16/17	568.89	0.00	568.89	0.00	0.00
12/16/17	568.87	0.00	568.87	0.00	0.00
03/16/18	568.87	0.00	568.87	0.00	0.00
06/16/18	568.87	0.00	0.00	0.00	568.87
Fees/Pen	0.00	0.00	0.00	0.00	0.00
Totals	2,275.50	0.00	1,706.63	0.00	568.87

Notes/Alerts
DEC 31 Owner:
DBA: BESOS KITCHEN & COCKTAILS LLC
View prior unpaid bills

Due 04/05/2018
Next Int
Int Paid
Total Paid
1,706.63

Batch Information
Batch # 14195
Deposit
Department Current Receipt
CLERK 0.00
Batch Total 12,509.28
Receipt Count 15
Attachments (0)
19 of 135