



# Change of Officers

City of Madison Clerk  
 210 MLK Jr Blvd, Room 103  
 Madison, WI 53703  
[licensing@cityofmadison.com](mailto:licensing@cityofmadison.com)  
 608-266-4601

Class A:  Beer,  Liquor,  Cider  
 Class B:  Beer,  Liquor,  
 Class C Wine

(Agenda Item Number)

(Legistar file number)

40159-25888

(License number)

6-Rummel

(Alder District # and Name)

Office Use Only

- o This application is to inform the city of any changes in corporate structure.
- o **The fee** for filing this application is \$25.00.
- o Please include a completed a **Background Investigation Form** and copy of a **picture ID** for each **new** officer/member/director with this application (not necessary for title changes).

### Licensed Premises Information

This application modifies existing alcohol license number: 456-0000449052-03  
 Business dba Name: Tex Tubb's Taco Palace  
 Licensed Address: 2009 Atwood Ave.; Madison, Wi 53704  
 Liquor/Beer Agent Name: Aureliano Montes Alder, District #: \_\_\_\_\_

### Corporate Information

Business Legal Name (as on WI State Sellers Permit): La Pepe, Inc  
 Business Mailing Address: 5111 Monona Dr, Monona Wi 53716  
 Business Contact Name, Position: Amanda Jabs, CFO  
 Business Phone: 608-246-2719 Business Email: ajabs@foodfightinc.com

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
Connie Maxwell	Member

Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?

No  Yes, explain: Is listed as officer/member for 5 locations-will be removed from all

After this change, how many total officers/members/directors will be in the organization?: 5

Will this change alter your business plan?  No  Yes, please attach new business plan with application.

*Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.*

DocuSigned by:  
Amanda Jabbs  
Authorized Signature

5/20/2024  
Date

Form submitted by mail/e-mail  
Office Use Only