

Change of Officers

(Agenda Item Number)

(Legistar file number)

LICUIS - 7070 - 00 747

(License number)

4 - Verreer

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

Class A: \square Beer, \square Liquor, \square Cider Class B: $\c Beer$, $\c Beer$, $\c Beer$, $\c Beer$

Class C Wine

licensing@cityofmadison.com 608-266-4601 (Alder District # and Name)
Office Use Only

 This application is to inform the city of any The fee for filing this application is \$25.00. Please include a completed a Background each new officer/member/director with this 	Investigation Form a	and copy of a picture ID for
Licensed Premises Information		
This application modifies existing alcohol license numb	oer: <u>LICL IB-2C</u>	20-007-42
Business dba Name: Wonderstate Coff	ee Madison	
Licensed Address: 27 W Main St Ma	idison wi 5	3703
Liquor/Beer Agent Name: Pavid Blair	Alder, Dis	trict #:
Corporate Information		
Business Legal Name (as on WI State Sellers Permit):	Wonderstate	Coffee Madison L
Business Mailing Address: 27 W Main 5+	Madison	w1 53704
Business Contact Name, Position: Ben Frawley	Cafe Man	eger
Business Legal Name (as on WI State Sellers Permit): Business Mailing Address: 27 W Main 54 Business Contact Name, Position: Ben Frawley Business Phone: (608)516-5691 Business Phone: (608)516-5691 Business Phone: (608)516-5691	ness Email: Ben F	@ wonderstate.com
List New Officers/Members/Directors, if applicab	le (attach backgroun	d check form for each):
Name Benjamin Frawley	Title Cafe Manage	<u> </u>
0		
	-	
Officers/Members/Directors who will no longer h	l old their positions:	
Name	Former Title	
David Blair	Chef de Cuisn	e/ Cafe Manager

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license?	any other class A, B or C
X No ☐ Yes, explain:	
After this change, how many total officers/members/directors will be in the	organization?; <u>3</u>
Will this change alter your business plan? $ ot\!\!{f Z}$ No \qed Yes, please attach new b	ousiness plan with application.
Penalty for materially false application information: Any person who knowingly provides mater application may be required to forfeit not more than \$1,000.	rially false information on this
Berger Franky 4/30/24 Authorized Signature Date	Form submitted by mail/e-mail Office Use Only