Section 2 above [phone 608] 266-2776] 14. If applicant indebted any wholesaler beyond 15 days for beer or 30 days for liquor? 15. Section 2 above [phone 608] 266-2776] 16. If applicant indebted any wholesaler beyond 15 days for beer or 30 days for liquor? 17. Section 2 above [phone 608] 266-2776] 18. Section 3 above [phone 608] 266-2776] 19. Section 3 above [phone 608] 266-2776] 10. Section 3 above [phone 608] 276-2776] 10. Section 3 above [ph	OF	IGINAL ALCOHO	L BEVERAGE LICEN	ISE APPLIC	ATION	Applicant's Wisconsin 4560002 Seller's Permit Number:	2301059-02	2
For the ficense period beginning July 1 20 11	Sub	mit to municipal clerk.				Federal Employer Identification 14-1	934064	
ending JURe 30	For	the license period beginn	ning July 1	20 10	;) •	
TO THE GOVERNING BODY of the:		end	_{ling} June 30	20 11				
TO THE GOVERNING BODY of the:							30	ഹ
County of Danc Aldermanic Dist. No. 6. (if required by ordinance) 1. The named MDIVIDUAL PARTNERSHIP LIMITED LABILITY COMPANY Class 2 Miguor \$	TO:		(of the implication of M	adison		✓ Class B beer	Ψ	·UU
County of Dane Aldermanic Dist. No. 6 (if required by ordinance) Class B fliquor S Class B fliquor S	10	I TE GOVERNING BODI				<u></u>		ኅኅ
Class B loquor Season Composition Class B loquor Season Composition Class B loquor Season Composition		_	City of	_			<u> </u>	UU
Class B loquor Season Composition Class B loquor Season Composition Class B loquor Season Composition	Cou	_{nty of} Dane	Aldermanic Dist. N	lo. 6 (if requ	ired by ordinance	·) <u> </u>		
Publication fee \$40.0000		*	•	-		· · · · · · · · · · · · · · · · · · ·		
hereby makes application for the alonhol beverage license(s) checked above. 2. Name (individual) systems give last justine, first, middle; corporations/limited liability companies give registered name): The Mermatid Cafe L. An "Auxiliary Questionnairs": Form AT-103, must be completed and attached to this application by each individual applicant, by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limite liability company. Let the iname, title, and place of residence of each posson. President/Member Persident, Lisa Jacobson, 1401 Ruttledge St., MSN, 53/03 President/Member Persident, Lisa Jacobson, 1401 Ruttledge St., MSN, 53/03 Post Office & Zip Code Post	1.	The named INDIVIDUA	AL PARTNERSHIP	✓ LIMITED LIABI	LITY COMPANY	<u> </u>	40-	AΛ
Name (noth/dual)praining siles farame, first, middle; corporations/filmited sibility companies give registered name): The Mcrmaid Carte, LLC. An "awality Questionniste," From AT-103, must be completed and attached to this application by each individual applicant, by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limite liability company. List the name; title, and place of residence of oach preson. President/Member Pres		CORPORA	ATION/NONPROFIT ORGANIZATION	NC		THE RESIDENCE OF THE PROPERTY	Ψ	
An "Auxillary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limite liability company. Let the name, title, and place of residence of each person. President/Member CFO, Ben Jacobson, 1401 Rutfledge St., MSN, 53703 President/Member President/Member Treasurer/Member Treasurer/Mem		hereby makes application for t	the alcohol beverage license(s) che	cked above.		TOTAL FEE	\$ 80.	
partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limite liability company. List the name, title, and pack or fresidence of each person. President/Member President/Me	2.	Name (individual/partners give The Mermaid Cafe,	e last name, first, middle; corporation LLC	ons/limited liability co	ompanies give regi	stered name):		
Treasurer/Member Agent Lisa Jacobson Directors/Managers 3. Trade Name The Mermaid Cafe 4. Address of Premises 1929 Winnebago St., Madison, WI		partnership, and by each off liability company. List the natural President/Member President/Member CFC	ficer, director and agent of a cor ame, title, and place of residence of litle ent, Lisa Jacobson, 1401 O, Ben Jacobson, 1401	poration or nonpro- each person. Name Rutledge St., Rutledge St.,	ofit organization, of the organization of the organization, of the organization of	and by each member/manager and	I agent of a lim	ited
Trade Name		Transurar/Mambar						
3. Trade Name The Merrmaid Cafe Business Phone Number Post Office & Zip Code Post Office								
Significial course for this license period? Yes No	2	Trode Name The Merr	naid Cafe		Pueinose	Phone Number 608-249-971	9	
Significial course for this license period? Yes No	J.	Address of Description 192	29 Winnebago St., Madi	son, WI	Dusiness	53704		
training course for this license period? 6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? 7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? 8. (a) Corporate/limited liability company applicants only: Insert state								
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes	5.	is individual, partners or agent training course for this license	: or corporation/limited liability comp	any subject to com	pietion of the respo	onsible beverage server	√Yes □	Nο
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes	6							
8. (a) Corporate/limited liability company applicants only: Insert state	7	Does any other alcohol bevera	age retail licensee or wholesale per	mittee have any inte	erest in or control o	f this business?		
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?								
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 10. Legal description (omit if street address is given above): 11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? 12. Legal description (omit if street address is given above): 13. (a) Was this premises licensed for the sale of liquor or beer during the past license year? 14. Legal description (omit if street address is given above): 15. Legal description (omit if street address is given above): 16. Legal description (omit if street address is given above): 17. (a) Was this premise licensed for the sale of liquor or beer during the past license year? 18. Legal description (omit if street address is given above): 19. Legal description (omit if street address is given above): 10. Legal description (omit if street address is given above): 11. (a) Was this premise direct address is given above): 12. Legal description (omit if street address is given above): 13. Loes the applicant must sign of premise during inspection and is sued in the same name as that shown in second in the same name as that shown in legal properties during inspection and is sued in the same name as that shown in legal properties during inspection and is sued in the same name as that shown in legal properties during inspection in legal properties during inspection beyond 15 days for beer or 30 days for liquor? 12. Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		(b) Is applicant corporation/lin(c) Does the corporation, or a agent hold any interest in	nited liability company a subsidiary any officer, director, stockholder or a any other alcohol beverage license	of any other corporagent or limited liabil or permit in Wiscor	ation or limited liability company, or any sin?	ility company?		
all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 10. Legal description (omit if street address is given above): 11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? 12. Legal description (omit if street address is given above): 13. (a) Was this premises licensed for the sale of liquor or beer during the past license year? 14. Legal description (omit if street address is given above): 15. Legal description (omit if street address is given above): 16. Legal description (omit if street address is given above): 17. Legal description (omit if street address is given above): 18. Legal description (omit if street address is given above): 19. Legal description (omit if street address is given above): 10. Legal description (omit if street address is given above): 11. (a) Was this premises dicense for the sale of liquor or beer during the past license year? 12. Legal description (omit if street address is given above): 13. Legal description (omit if street address is given above): 14. Legal description (omit if street address is given above): 15. Legal description (omit if street address is given above): 16. Legal description (omit if street address is given above): 17. Legal description (omit if street address is given above): 18. Legal description (omit if street address is given above): 19. Legal description (omit if street address is given above): 19. Legal description (omit if street address is given above): 19. Legal description (omit if street address is given above): 19. Legal description (omit if street address): 1		•	-	· ·				
10. Legal description (omit if street address is given above): 11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? 12. Ones the eapplicant lifterstand they must file a Special Occupational Tax return (TTB form 5630.5) 13. Does the eapplicant lifterstand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in 14. Secritor 3 advect phone (608) 266-2776] 15. Secritor 3 advect phone (608) 266-2776] 16. Secritor 3 advect phone (608) 266-2776] 17. Secritor 3 advect phone (608) 266-2776] 18. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Secritor 3 advect phone (608) 266-2776] 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Secritor 3 advect phone (608) 266-2776] 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. Secritor 3 advect phone (608) 266-2776] 11. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Yes No. No. No. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Yes No. No. No. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Yes No. No. No. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 19. Yes No. No. No. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. Secritor 3 advect phone (608) 266-2776] 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. Secritor 3 advect phone (608) 266-2776] 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. Secritor 3 advect phone (608) 266-2776] 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. She applicant indebted a any wholesaler beyond 15 days for beer or 30 days for liquor? 10. She applicant indebted a any	9.	Premises description: Describe all rooms including living quart may be sold and stored only o	e building or buildings where alcohours, if used, for the sales, service on the premises described.)	ol beverages are to and/or storage of alc standing con	be sold and stored cohol beverages ar imercial buil	. The applicant must include nd records. (Alcohol beverages ding		
Average Wind Amange A								
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section Jackes Inhone (608) 266-2776 Yes No		(a) Was this premises license (b) Hyespungs What name w	d for the sale of liquor or beer durin vas license issued?	ig the past license y	ear?		Yes 🔽	No
Section 2 above [phone 608] 266-2776] 14. If applicant indebted any wholesaler beyond 15 days for beer or 30 days for liquor? 15. Section 2 above [phone 608] 266-2776] 16. If applicant indebted any wholesaler beyond 15 days for beer or 30 days for liquor? 17. Section 2 above [phone 608] 266-2776] 18. Section 3 above [phone 608] 266-2776] 19. Section 3 above [phone 608] 266-2776] 10. Section 3 above [phone 608] 276-2776] 10. Section 3 above [ph	* *	Detore Deginning Dusine 6s/ p	onone 1-800-937-8864[<u>.</u>	✓ Yes 🔲	No
REFULLY BPC SE **EGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer stories of the states and responsibilities conferred by the license(s), if granted, will not be assigned to another (Individual applicants and each of the above questions has been truthfully answered to the best of the knowledge of the states of the knowledge of the knowledge of the states of the knowledge of the	☆ (Does the applicant understand Section 2 above? [phone 608	I a Wisconsin Seller's Permit must i	be applied for and is	ssued in the same i	name as that shown in	Yes 🔲	No
of the Sidners Strain of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. SUBSCRIBED AND SWORN TO BEFORE ME this day of (Clerk/Notery Public) My commission expires (Clerk/Notery Public) My commission expires (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK	9 <u>4.</u>	\						
this 3 day of March , 20 il (Officer of Porporation/Member/Manager of Limited Liability Company/Partner/Individual), My commission expires (Clerk/Notery Public)) TO BE COMPLETED BY CLERK	of the	Signers, Signere agree to operate	e this business according to law and the rof a partnership applicant must sign; or	nat the rights and responder (s), many corporate officer(s), m	ponsibilities conferred embers/managers of	d by the license(s), if granted, will not be f Limited Liability Companies must sign.)	assigned to anot Any lack of acces	ther.
(Officer of Jorpofation/Member/Manager of Limited Liability Company/Partner/Individual), (Clerk/Notery Fublic) My commission expires (Officer of Corporation/Member/Manager of Limited Liability Company/Partner) (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK	SUB	$\gamma Z = \gamma A$	· · · · · · · · · · · · · · · · · · ·		1: h			
My commission expires (Clerk/Notery Public) (Clerk/Notery Public) (Clerk/Notery Public) (Clerk/Notery Public) (Clerk/Notery Public) (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK	this _	day of	<u>(avev</u> , 20	11	Officer of Edmodation	Member/Manager of Limited Liability Compa	nv/Partner/Individu	al),
My commission expires 3/3/14 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any) TO BE COMPLETED BY CLERK		Funh (MA MARIONA I	و	The state of the s	Ron A T.	0000500	J
TO BE COMPLETED BY CLERK (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)	***************************************	(Clerky)	Notary Public) /		(Officer of Corpora	ation/Member/Manager of Limited Liability Co	ompany/Partner)	
	Му со	mmission expires3	123/14		(Additional Partri	ner(s)/Member/Manager of Limited Liability C	ompany if Any)	
	то в	E COMPLETED BY CLERK						
Date received and filed with municipal clerk Date reported to council/board bate provisional license issued Signature of Clerk / Deputy Clerk			Date reported to council/board	Date provisional license	e issued S	Signature of Clerk / Deputy Clerk		
Date license granted Date license issued License number issued		,	Date license issued	License number issued				
AT-108 (R. 4-09) AT-108 (R. 4-09) Wisconsin Department of Revenu						A Wisconsin	Department of Reve	enue

LICKIB-2011-00363

City of Madison Sup	ppiemental Class B License	Application
Seller's Permit Number Federal Employer Identification # Notarized Original Application Form Notarized Supplemental Form Orange Sign (Clerk's Office provides at time of application)	 ☑ Written Description of Premise ☑ Background Investigation Form(s) ☑ Notarized Transfer of Ownership ☑ *Articles of Incorporation ☑ *Notarized Appointment of Agent * Corporation/LLC only 	☐ Floor Plans ☐ Lease ☐ Sample Menu ☐ Business Plan
1. Name of Applicant/Partner/Corporation	VLLC The Mermaid Gte	LLC
 Name of Applicant/Partner/Corporation Address of Licensed Premise 192 Telephone Number: 608 249 9 Mailing address if not appring immedia 	7 Winnebago St. Cals	o 1929, 2storefronts
3. Telephone Number: <u>608 249 9</u>	719 4. Anticipated opening da	ite: curiently open, expanded
5. Mailing address if not opening immedia	tely <u>Same</u> as above	
6. Have you contacted the Alderperson, Potential the neighborhood association represent		
7. Are there any special conditions desired	by the neighborhood? □ Yes 🕱 No	0
Explain.		
8. Business Description, including hours of	foreration: Carently a caffee	is Sandwich show
the Mermaid Cafe is open 1	N-6 6:20-3:20 5 7:20	-3120 Sun 9:30-7:30
NENHOURS WILLD BE: MOR	Closed Tas 5-10 Wasat 8.	-10 Sun 9:30-2:30
9. Do you plan to have live entertainment?		
10. Detailed <u>written</u> description of building size and all areas where alcohol bevera below shall not be expanded or change	ges are to be sold and stored. The lic ged without the approval of the Cor	ensed premise described nmon Council.
The Welmid Cita, parcel #0:	110-072-0514-1, is a	1,320 sq foot,
The Welmaid Cife, percel #0: uniquely shoped vintage buil	ding with curkflows and b	on. 1t-in wooden
Seating throughout the flux	rea There are 8 tables as	al 27 chairs w/room
11. Are any living quarters directly or indir Please note that alcohol may be sold an	ectly accessible and under control of	the applicant? ☐ Yes 🌿 No
12. Describe existing parking and how park	ing lot is to be monitored. All exis	ting paking is
metered street parting un	lor well-lit street lights.	
13. Describe your management experience,		
Owner Lisa Jackson has 5+	years hising taining and n	varaging 10+staff monter
Owner Lisa Jacobson has 5th She also marges pay reliberti	, faxes, avall other finan	ces. Manager lover)
14. Identify the registered agent for your Oprocess, notice or demand required or p	Corporation or LLC. This is your corp	poration's agent for service of
Lisa Jacobson Banderss	1401 Rutledge St. M	SN 53703

15. Utilizing your market research, who would you project your target market to be?	
airently or maked research indicates that adults 35-65 are an	ust
likely to frequent the Mermani) Cope at night.	
15. Utilizing your market research, who would you project your target market to be? What age range would you hope to attract to your establishment? 35-65 NON STANDER OF THE PROPERTY OF THE	N3
17. Describe how you plan to advertise/promote your business. What products will you be advertise	sing?
	•
with marmail for the second se	sinual Rd (
We cerrently pointe in the internet using our website www w. mermaid cate made sin. com, freebook w Twitter, as well as an a 18. Are you operating under a lease or franchise agreement? Yes (attach a copy) No	he Isthmus in mother to
19. Owner of building where establishment is located: Ben ¿ Usa Jacobsm	Sril
Address of Owner: 1401 Rutledge St. WSN 53703 Phone Number 68 2	57 2767
20. Private organizations (clubs): Do your membership policies contain any requirement of "Invide to give offense) discrimination in regard to race, creed, color, or national origin? Yes	lious" (likely
21. List the Directors of your Corporation/LLC	
Lisa Sawbson 1401 Ratledge St. MSN 53703 Name Ben Jackson 1401 Rutledge St. MSN 53703 Name Address Address	
Name Address	
Ben Jacobsm 140 (Kutleye St. MISN 33703	
Name Address	
Name Address	
22. List the Stockholders of your Corporation/LLC	
Name Address %	of Ownership
Lise Jauban Same as above Name Address % Ben Jaubson Same as above	
Name Address %	of Ownership
Name Address %	of Ownership
Name Addition / O	of Ownership
23. What type of establishment are you? (Check all that apply) Tavern Nightclub Restau	ırant
Other Please Explain. Whe has 1615 fro	
24 What type of food will you be serving, if any?	
Breakfast Lunch Dinner	
25. Please submit a sample menu with your application, if possible. What might eventually be incl	uded on your
operational menu when you open? Appetizers Salads Soups Sandwiches	Entrees
Desserts Pizza Full Dinners	
26. During what hours of your operation do you plan to serve food? All hows	

21. What hours, if any, will food service not be available?	_
28. Indicate any other product/service offered	
29. Will your establishment have a kitchen manager? Yes No	
30. Will you have a kitchen support staff? Yes No	
31. How many wait staff do you anticipate will be employed at your establishment? 1-2 During what hours do you anticipate they will be on duty? 5-10 pm evening Service	_ <u>,</u>
32. Do you plan to have hosts or hostesses seating customers? Yes	
33. Do your plans call for a full-service bar? Yes No If yes, how many bar stools do you anticipate having at your bar? How many bartenders do you anticipate you would have working at one time on a busy night?	·
34. Will there be a kitchen facility separate from the bar? Yes No	
35. Will there be a separate and specific area for eating only? Yes If yes, what will be the seating capacity for that area?	
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave	;
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? Yes	No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?	
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food?	
What percentage of your advertising budget do you anticipate will be drink related? 1070 (wine	ر ۶
40. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League of the Tavern League of Wisconsin? Yes No	r
41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? Yes No	

)

- 42. What is your estimated capacity? 25-35
- 43. Pursuant to Chapter 23 of the Madison General Ordinances, all restaurants and taverns serving alcohol beverages shall substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. For new establishments, the percentage will be an estimate.

Total Gross Receipts		100%
Gross Receipts from Other	Λ	(~ %
Gross Receipts from Food and Non-Alcoholic Beverages	*	80 %
Gross Receipts from Alcoholic Beverages	Z	20 %

44. Do you have written records to document the percentages shown? Yes You may be required to submit documentation verifying the percentages you've indicated.

Read carefully before signing: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. Any lack of access to any portion of a licensed premise during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Subscribed and Sworn to before me:

this 27 1/2 day of April , 20 // (Officer of Corporation/Member of LLC/Partner/Individual)

(Clerk/Notary Public) My commission expires $\frac{6}{29}/2014$

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Secretary, Department of Financial Institutions, do hereby certify that the annexed copy has been compared by me with the record on file in the Corporation Section of the Division of Corporate & Consumer Services of this department and that the same is a true copy thereof and the whole of such record; and that I am the legal custodian of said record, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department.

RAY ALLEN, Deputy Secretary Department of Financial Institutions

BY:

DATE:

MAR 3 0 2011

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

Sec. 183.0202 Wis. Stats.



State of Wisconsin Department of Financial Institutions

ARTICLES OF ORGANIZATION - LIMITED LIABILITY COMPANY

Executed by the undersigned for the purpose of forming a Wisconsin Limited Liability Company under Chapter 183 of the Wisconsin Statutes:

Article 1.

Name of the limited liability company:

Mermaid Cafe, LLC

Article 2.

The limited liability company is organized under Ch. 183 of the Wisconsin

Statutes.

Article 3.

Name of the initial registered agent:

Lisa M. Jacobson

Article 4.

Street address of the initial registered office:

1401 Rutledge St. Madison, WI 53703 United States of America

Article 5.

Management of the limited liability company shall be vested in:

A member or members

Article 6.

Name and complete address of each organizer:

Lisa M. Jacobson 1401 Rutledge St. Madison, WI 53703 United States of America

Ben A Jacobson 1401 Rutledge St. Madison, WI 53703 United States of America

Other Information. This document was drafted by:

Lisa M. Jacobson

Organizer Signature:

Ben A. Jacobson

Date &	Time	of R	eceipt:
--------	------	------	---------

1/24/2005 2:19:41 PM

Credit Card Transaction Number:

2005124481955

ARTICLES OF ORGANIZATION - Limited Liability Company(Ch. 183)

	ENIDAD CEMENT	
		Total Fee: \$130.00
		Filing Fee: \$130.00

State of Wisconsin Department of Financial Institutions

EFFECTIVE DATE	Name Check Initials
1/24/2005	ЛLА

FILED	Examiner's Initials JLA	
1/26/2005	Entity ID Number M063290	

Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC
I, Was Jacken, officer/member for Melmaid Cafe, LLC
(Corporation/LLC), doing business as <u>Mermaid ate</u> , authorize and appoint
(Name) as the liquor/beer agent for the premise
located at 1927 Winnebagu St.
Subscribed and sworn to before me this Signature of Officer/Member
27^{4} Day of βp_r ; βp
Notary Public, Dane County, Wisconsin & NOTARY 2 My Commission Expires 6/29/2019
PUBLIC
To be completed by appointed Liquor/Eear Agent
I, USA Ja USSM, appointed liquor/beer agent for
Mermoud Cafe (name of Corporation or LLC), being first duly sworn
say I have vested in me, by properly authorized and executed written delegation, full authority
and control of the premise described in the license of such corporation or limited liability
company, and I am involved in the actual conduct of the business as an employee, or have a
direct financial interest in the business of the licensee, therein relating to the intoxicating
liquor/fermented malt beverage. The interest I have in the business is 50 %.
Subscribed and sworn to before me this Signature of Agent
Day of April 20 // CHR/S7/
a CHRISTIA
Notary Public, Dane County, Wiscorism
My Commission Expires 6/29/2019 OTARY

The appointed Liquor/Beer Agent must complete the other side of this form.

MISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name:

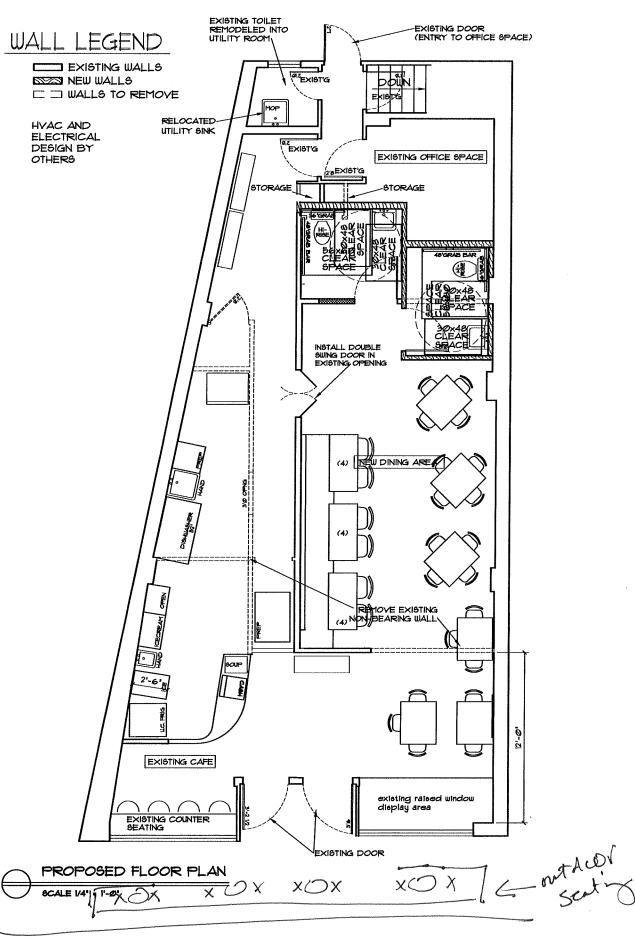
Date of Completion: 04/22/2011 13:04 CST

School Name: Learn2Serve Certification #: WI

certify that the above named person successfully completed an approved Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66

Corporate Headquarters 13801 N. Mopac, Suite 100 Austin, Texas 78727 P: 800-442-1149



Winnelbagu St.

The Mermaid Café

Breakfast

Quiche 9

Ebelskiver (Danish Pancake) Classic 5 Filled 6 Classic Breakfast Sandwich. Scrambled eggs and your choice of meat and cheese 6

OMI (Cult Breakfast sandwich) with scrambled eggs, coconut curry aioli, cheddar, tomato and avocado 7

Parfait. House blended honey-vanilla yogurt, Sunshine granola and seasonal fruit filling 5

Lunch

Sandwiches:

King Club 8

Banh Mi 9

Banh Meatless 9

New Delhi Deli 8

Quiche 9

Market Food:

Lamb Burger with Fig, Caramelized Onion, and Goat Cheese 10
Pea shoots with Seared Flank steak, black radish, sieved egg, and sunflower oil
with sea salt 10

Roasted Chicken tacos with fresh Pico de gayo 12

Dinner

Kina Club 8

Banh Mi 9

Banh Meatless 9

Board: Roasted Red pepper-lentil hummus with oil cured olives, goat feta and assorted bread 9/12

Grill: Lamb Burger with Fig and Fantome Farm Ghost Cheese 10
Salad: Pea shoots with Seared Flank steak, black radish, sieved egg, and sunflower oil with sea salt 10
Special:

Roasted Chicken with Papas and caramelized Brussels sprouts 14

Desserts

Ice cream: Honey lavender or Market flavor 4
Ice cream Sandwich 6
Olive oil cake 6
Les petits pots de crème, *chocolat* 5

Mermaid Café Business Plan for Expanded Evening Hours

Overview

The Mermaid Café was established as an east side coffee shop and café in 2005. It has since gone through two building expansions and countless menu alterations. Mermaid Café as a business and a neighborhood name has grown significantly from a small corner coffee shop to a well known name in the Madison food and coffee scene. When we began our primary focus was on fair trade coffees and teas. Since that time we have grown into an establishment that is known primarily for its commitment to sustainable, locally sourced foods. We currently purchase products from a number of state and city farms, distributors and companies, including bread, meat, dairy, produce, honey, kombucha, cheese and paper products sourced from local business

We have participated in numerous events related to the local food scene including Isthmus green day, Madison Originals, Food for Thought festival and we have been taken part in a number of REAP Food Group fundraisers. In July 2010, we put on one of the largest events on Madison's east side, the East Side Cookout fundraiser located in the Just Coffee and RP's Pasta parking lot. This successful event drew hundreds of people and raised thousands of dollars for a program that Mermaid Café now spearheads, called Chef In the Classroom, at East High and Sherman Middle School. We are the main contributors along with Tory Miller and L'Etoile in teaching students how to cook with fresh food. We have established ourselves in many ways throughout the community and the neighborhood, as both a place for quality coffee, and food and a place for people to hangout, and spend their time.

Over the last six years the Mermaid Café has made a noticeable shift from a small scale coffee shop to a leader in the local food scene in Madison. We have seen a significant shift in our customer base and a spike in the interest people have in the food we are making in the café and our other endeavors. This shift has brought about a significant rise in our food sales at the café.

Current Situation and Rationale for Expansion

Mermaid Café has been successful in providing a place for the neighborhood to get coffee, fresh bakery, breakfast and lunch. During this time, we have expanded our services to include a full service catering company providing food for a number of businesses, meetings, special events, private and public parties. We have included in our retinue private dinners held at the cafe that have proved wildly successful. The Mermaid Café has given other small businesses the opportunity to come into a growing and eventually thriving business community.

During this time of growth for the café the neighborhood and community around us has seen a similar growth. Since opening the competition around the Mermaid Café has grown significantly. We have seen a dramatic increase in the number of establishments in our close proximity that cater to a morning coffee/bakery/breakfast crowd. We now have Ironworks Café, Lazy Janes (previously established) Jane's Bakery, Batch, Victory, Zoma (previously established) Daisy Cupcakery and Café, Monty's(previously established), Honey Bee Bakery, and a number of other establishments in our close proximity.

As a result the early morning coffee shop model has seen a decline in market share. While we believe we provide a superior product, model and experience, the presence of so many business vying for the coffee market share, although not drastic has steadily brought a daily decrease to morning coffee sales. And because of our presence in the food scene we have seen a steady increase in our overall food sales.

Our shift to a more food oriented establishment, along with the upcoming construction, and our desire as members of the community and surrounding neighborhoods, to have and operate an establishment that caters to a wide variety of consumers. We believe we have an ability to provide a space that can be successful in food, and beverage sales.

Expansion Plans

For the Mermaid Café extending our hours to the evening, coupled with providing the option for alchohol purchase allows us to present to the neighborhood a unique establishment unlike anything else. We envision a European style bistro, different from the traditional restaurant setting. We imagine a casual dinning experience, specializing in grilled and slow roasted meats, Bistro style sandwiches, salads, and soups. We will continue to provide an excellent beverage menu featuring many iced teas, fresh lemonade, and a combination of non-alchoholic cocktails, which are already present, and very popular at the café, in addition to serving, artisanal espresso drinks such as cappuccino's and latte's.

We will have operating hours as follows.

Monday- Closed Tuesday- Close in the a.m. Open at 2 for lunch and dinner service Wed-Thu- 8am-9pm Fri and Sat- 8am-10pm Sun- 9am-2pm Brunch only

The Role of Wine & Beer

While our main focus has always been food, we recognize the limitations it has on the success of a restaurant, and the need for Wine/Beer to play a small role. In traditional food culture Wine, and artisanal beer have always played a role in the accompaniment of the food. In general, beverage selection and pairing is incredibly significant in the Euro/French bistro model and has always played a significant role in food culture. We hope to tap into this piece both through our small, but distinguishing wine list, artisanal small batch Beer, and our selection of non alcoholic cocktails.

Our current beverage to food breakdown is about 30% beverage to 70% food. We anticipate this number to drop significantly with the change in direction from a coffee shop to a food service establishment, and then rise slightly due to the sales generated by alcohol. We estimate our sales to be 20% beverage and 80% food.

Another point of recognition for us is the profitability of the alcohol sales and the anticipation of the need for the replacement of coffee sales in general.