



# 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)

(License number)

(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

LICLIB-2012-00797

This application modifies existing alcohol license number: ~~LICFDM-2012-00199~~

Business dba Name: Buffalo Wild Wings #44

Licensed Address: 789 University Avenue

Liquor/Beer Agent Name: Carl Alwin Alder, District #: \_\_\_\_\_

### Corporate Information

Business Legal Name (as on WI State Sellers Permit): Blazin Wings, Inc.

Business Mailing Address: 5500 Wauzatta Blvd. Ste. 1250, Minneapolis, MN 55416

Business Contact Name, Position: Laura Carlson-Heademan, Sr. Licensing Specialist

Business Phone: 952-516-8175 Business Email: BWWLicensing@InspireBrands.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
<u>Emily C. Decker</u>	<u>Vice President</u>

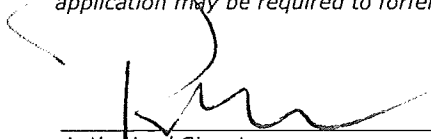
Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?

No  Yes, explain: See attached List of Locations

After this change, how many total officers/members/directors will be in the organization?: 3

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.*



Authorized Signature

5.8.19  
Date

Form submitted by mail/e-mail  
Office Use Only