

Change of Officers

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

This application modifies existing alcohol license number: LICLIB-2018-01255

Business dba Name: Palette Bar & Grill

Licensed Address: 901 East Washington Ave. Madison WI 53703

Liquor/Beer Agent Name: Matt Robert Alder, District #: Marsha A. Rummel

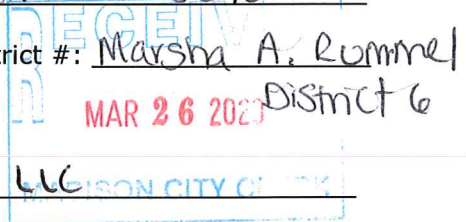
Corporate Information

Business Legal Name (as on WI State Sellers Permit): Palette Grill LLC

Business Mailing Address: 8025 Excelsior Dr. Suite 104 Madison WI 53717

Business Contact Name, Position: Jose Luis Granados, Owner

Business Phone: (608) 515-3925 Business Email: jose.granados@cobaltrestaurant-group.com



List New Officers/Members/Directors, if applicable (attach background check form for each):

Name	Title
<u>Alison Bing</u>	<u>Development Manager</u>

Officers/Members/Directors who will no longer hold their positions:

Name	Former Title
<u>Matt Robert</u>	<u>Director of Operations</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: _____

After this change, how many total officers/members/directors will be in the organization?: 1

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.

Alison Bung
Authorized Signature

3/25/2020
Date

Form submitted by mail/e-mail
Office Use Only