

Change of Officers

City of Madison Clerk

Class A:
Beer,
Liquor,
Cider

Class B:
Beer,
Liquor,
Class C Wine

210 MLK Jr Blvd, Room 103

Madison, WI 53703

licensing@cityofmadison.com
608-266-4601

| (Agena | a Item Number) |
|---------|--------------------------------------|
| (Legist | ar file number) |
| LIC | CLIB-2023-00738 |
| (Licens | e number) |
| 1 | 3 - Evers |
| | District # and Name) Office Use Only |

- 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 n | umber: |
| Business dba Name:Ramen Station | |
| Licensed Address:1124 S Park St | |
| Liquor/Beer Agent Name: Erica X Ni | Alder, District #:13 |
| Corporate Information | |
| Business Legal Name (as on WI State Sellers Perm | nit):Ramen Station Inc |
| Business Mailing Address:1124 S Park St, Ma | |
| Business Contact Name, Position: Erica X Ni | |
| Business Phone: 917-547-5288 | Business Email:xiaohh5@gmail.com |
| | |
| List New Officers/Members/Directors, if appl Name | icable (attach background check form for each): Title |
| | |
| Officers/Members/Directors who will no long | |
| Name Baolan Ni | Former Title |
| | |

| license? | s possess any interest or contro | of in any other Class A, B or C |
|---|----------------------------------|--------------------------------------|
| $oximes$ No \oxin Yes, explain: | | |
| After this change, how many total officer | s/members/directors will be in | the organization?:1 |
| Will this change alter your business plan? | No 🗆 Yes, please attach n | ew business plan with application. |
| Penalty for materially false application information application may be required to forfeit not more that | | materially false information on this |
| N · 1 - | | ☐ Form submitted by mail/e-mail |
| une | 04/16/2025 | Office Use Only |
| Authorized Signature | Date | |