



Select Board Meeting

Monday, August 15, 2022 7:00 PM
Bancroft Elementary School Cafetorium
15 Bancroft Road, Andover, MA 01810

I. Call to Order – 7:00 P.M.

II. Opening Ceremonies

A. Moment of Silence/Pledge of Allegiance

III. Communications/Announcements/Liaison Reports

IV. Citizens Petitions and Presentations

- WECAN Sustainability Declaration

V. Public Hearings

A. Liquor License Wines and Malt Beverages to be Drunk on Premises – Brooksy's

Board to review and consider voting to approve the application of Paradise City Hospitality, LLC d/b/a Brooksy's, for a new Wines and Malt Beverages to be Drunk on Premises License at 90 Main St., Andover, MA.

VI. Regular Business

A. Sustainability Update

Sustainability Director to give an update to the Board.

B. Communications Goal Update

Board to receive an update on the plan for establishing the proposed responsibilities and funding plan for a dedicated resource for town-wide communications.

C. Establishment of Town Manager's FY 2023 Annual Salary

Board to vote to establish Town Manager's FY 2023 Annual Salary.

VII. Consent Agenda

A. Appointments by the Select Board

Board to vote that the following appointments by the Select Board be approved.

Department	Name	Position	Rate	Date of Hire
Town Clerk	David Berman	Election Worker	\$10.25	8/15/2022
Town Clerk	Champa Bilwakesh	Election Worker	\$10.25	8/15/2022
Town Clerk	Jack Hall	Election Worker	\$10.25	8/15/2022
Town Clerk	Ellen Marcus	Election Worker	\$10.25	8/15/2022
Town Clerk	Jim Redman	Clerk	\$11.25	8/15/2022
Town Clerk	Martha Mahoney	Election Worker	\$10.25	8/15/2022
Town Clerk	Judy Reghitto	Warden	\$12.25	8/15/2022

RECEIVED
TOWN CLERK'S OFFICE
2022 AUG 11 PM 3:37
TOWN OF ANDOVER, MASS

Town Clerk	Walter Salvi	Election Worker	\$10.25	8/15/2022
Town Clerk	Edna Allen	Election Worker	\$10.25	8/15/2022
Town Clerk	Mary Bausemer	Election Worker	\$10.25	8/15/2022
Town Clerk	Roberta Brodie	Election Worker	\$10.25	8/15/2022
Town Clerk	Patrick Donahue	Election Worker	\$10.25	8/15/2022
Town Clerk	Patricia Donahue	Election Worker	\$10.25	8/15/2022
Town Clerk	Alexander Iannicelli	Election Worker	\$10.25	8/15/2022
Town Clerk	Vicki Keene	Election Worker	\$10.25	8/15/2022
Town Clerk	Kathy Salvi	Election Worker	\$10.25	8/15/2022
Town Clerk	Susan Schwarz	Election Worker	\$10.25	8/15/2022
Town Clerk	Rajiv Chopra	Election Worker	\$10.25	8/15/2022
Town Clerk	Betsey Couture	Election Worker	\$10.25	8/15/2022
Town Clerk	Robert Decelle	Warden	\$12.25	8/15/2022
Town Clerk	Norma Gammon	Election Worker	\$10.25	8/15/2022
Town Clerk	Amy Janvosky	Election Worker	\$10.25	8/15/2022
Town Clerk	Iris Roskell	Election Worker	\$10.25	8/15/2022
Town Clerk	Jim Sellers	Election Worker	\$10.25	8/15/2022
Town Clerk	Lora Bates	Election Worker	\$10.25	8/15/2022
Town Clerk	Joan Fox	Election Worker	\$10.25	8/15/2022
Town Clerk	Jason Stellakis	Election Worker	\$10.25	8/15/2022
Town Clerk	Cynthia Barakatt	Election Worker	\$10.25	8/15/2022
Town Clerk	Patricia Boutin Skene	Election Worker	\$10.25	8/15/2022
Town Clerk	Cynthia Campbell	Election Worker	\$10.25	8/15/2022
Town Clerk	Gail Demaso	Election Worker	\$10.25	8/15/2022
Town Clerk	Rhonda Fisher	Election Worker	\$10.25	8/15/2022
Town Clerk	Ann Grecoe	Election Worker	\$10.25	8/15/2022
Town Clerk	Lois Kelly	Election Worker	\$10.25	8/15/2022
Town Clerk	MaryRuth Luther	Warden	\$12.25	8/15/2022
Town Clerk	Grenda Mosca	Election Worker	\$10.25	8/15/2022
Town Clerk	Steven Rosenfeld	Election Worker	\$10.25	8/15/2022
Town Clerk	Patricia Simpson	Election Worker	\$10.25	8/15/2022
Town Clerk	Margaret Tenczar	Election Worker	\$10.25	8/15/2022
Town Clerk	George Thomson	Election Worker	\$10.25	8/15/2022
Town Clerk	Kevin Twohig	Election Worker	\$10.25	8/15/2022
Town Clerk	Nancy Vogel	Election Worker	\$10.25	8/15/2022
Town Clerk	Kirsten Ahearn	Election Worker	\$10.25	8/15/2022
Town Clerk	Barbara Burgeios	Election Worker	\$10.25	8/15/2022
Town Clerk	Kathleen Dolan	Election Worker	\$10.25	8/15/2022
Town Clerk	Sandra Levine	Election Worker	\$10.25	8/15/2022
Town Clerk	Mary McGettrick	Election Worker	\$10.25	8/15/2022
Town Clerk	Peter Schwind	Clerk	\$11.25	8/15/2022
Town Clerk	Lenard Zohn	Election Worker	\$10.25	8/15/2022
Town Clerk	Dolores Cleland	Election Worker	\$10.25	8/15/2022

Town Clerk	Cal Perry	Warden	\$12.25	8/15/2022
Town Clerk	Rita Arsenaault	Election Worker	\$10.25	8/15/2022
Town Clerk	John Doherty	Election Worker	\$10.25	8/15/2022
Town Clerk	Denise Doherty	Warden	\$12.25	8/15/2022
Town Clerk	Clinton Reiser	Election Worker	\$10.25	8/15/2022
Town Clerk	Francis Rittershaus	Election Worker	\$10.25	8/15/2022
Town Clerk	Suzanne Soo Hoo	Election Worker	\$10.25	8/15/2022
Town Clerk	Sheila Wescott	Election Worker	\$10.25	8/15/2022
Town Clerk	Peter Witman	Election Worker	\$10.25	8/15/2022
Town Clerk	Danielle Crompton	Election Worker	\$10.25	8/15/2022
Town Clerk	Christine Curran	Election Worker	\$10.25	8/15/2022
Town Clerk	Eleanor Everett	Warden	\$12.25	8/15/2022
Town Clerk	Amanda Gasse	Election Worker	\$10.25	8/15/2022
Town Clerk	Kenneth Gasse	Election Worker	\$10.25	8/15/2022
Town Clerk	William Profenna	Election Worker	\$10.25	8/15/2022
Town Clerk	Michael Wartman	Election Worker	\$10.25	8/15/2022
Town Clerk	Susan Wartman	Election Worker	\$10.25	8/15/2022
Town Clerk	Constantine Bassilakis	Election Worker	\$10.25	8/15/2022
Town Clerk	Mary Kate Allard	Election Worker	\$10.25	8/15/2022
Town Clerk	Sumana Behara	Election Worker	\$10.25	8/15/2022
Town Clerk	Alice Friedenson	Election Worker	\$10.25	8/15/2022
Town Clerk	Bob Friedenson	Election Worker	\$10.25	8/15/2022
Town Clerk	John Gardner	Election Worker	\$10.25	8/15/2022
Town Clerk	Matthew Gosselin	Election Worker	\$10.25	8/15/2022
Town Clerk	Carol Hopkinson	Clerk	\$11.25	8/15/2022
Town Clerk	Susan Hunter	Election Worker	\$10.25	8/15/2022
Town Clerk	Linda Kosinski	Election Worker	\$10.25	8/15/2022
Town Clerk	Ken Ozoonian	Election Worker	\$10.25	8/15/2022
Town Clerk	Nancy Simili	Election Worker	\$10.25	8/15/2022
Town Clerk	Julianne Stein	Election Worker	\$10.25	8/15/2022
Town Clerk	Kathy Vieira	Election Worker	\$10.25	8/15/2022
Town Clerk	David Cleary	Election Worker	\$10.25	8/15/2022
Town Clerk	Susanne Dillman	Election Worker	\$10.25	8/15/2022
Town Clerk	Maureen Finneran	Election Worker	\$10.25	8/15/2022
Town Clerk	Charlie Heseltine	Warden	\$12.25	8/15/2022
Town Clerk	Geraldine Jacobson	Election Worker	\$10.25	8/15/2022
Town Clerk	Shirley Kountze	Election Worker	\$10.25	8/15/2022
Town Clerk	Scott Dianie	Election Worker	\$10.25	8/15/2022
Town Clerk	Shiva Sheel	Clerk	\$11.25	8/15/2022
Town Clerk	Mary Barry	Election Worker	\$10.25	8/15/2022
Town Clerk	Wendy Cassidy-Grobicki	Election Worker	\$10.25	8/15/2022
Town Clerk	Phyllis Jardine	Election Worker	\$10.25	8/15/2022

Town Clerk	Lynn Landry	Election Worker	\$10.25	8/15/2022
Town Clerk	Joanne Lepine	Election Worker	\$10.25	8/15/2022
Town Clerk	John McCarthy	Election Worker	\$10.25	8/15/2022
Town Clerk	Genee Morrissey	Election Worker	\$10.25	8/15/2022
Town Clerk	David Tomlinson	Election Worker	\$10.25	8/15/2022
Town Clerk	Alix Driscoll	Election Worker	\$10.25	8/15/2022
Town Clerk	Chris Hayward	Warden	\$12.25	8/15/2022
Town Clerk	Gal Gramer	Election Worker	\$10.25	8/15/2022
Town Clerk	Nancy Mulvey	Election Worker	\$10.25	8/15/2022
Town Clerk	Ameera Mazraany	Election Worker	\$10.25	8/15/2022
Town Clerk	Judith Birtles	Election Worker	\$10.25	8/15/2022
Town Clerk	Timothy Carter	Election Worker	\$10.25	8/15/2022
Town Clerk	Cynthia Cohen	Election Worker	\$10.25	8/15/2022
Town Clerk	Dianne DeLucia	Election Worker	\$10.25	8/15/2022
Town Clerk	Abigail Harris	Election Worker	\$10.25	8/15/2022
Town Clerk	Brewster LaMacchia	Election Worker	\$10.25	8/15/2022
Town Clerk	Tanner O'ssullivan	Election Worker	\$10.25	8/15/2022
Town Clerk	Joy Sapienza	Election Worker	\$10.25	8/15/2022
Town Clerk	Anthony Sofia	Election Worker	\$10.25	8/15/2022
Town Clerk	Gisella Spreizer	Election Worker	\$10.25	8/15/2022
Town Clerk	Molly Bicking	Election Worker	\$10.25	8/15/2022
Town Clerk	Trish Fleming	Warden	\$12.25	8/15/2022
Town Clerk	Yvette Goulet	Election Worker	\$10.25	8/15/2022
Town Clerk	Paul Hickman	Election Worker	\$10.25	8/15/2022
Town Clerk	Dorothy Hollenbeck	Election Worker	\$10.25	8/15/2022
Town Clerk	Sharon Magunson	Election Worker	\$10.25	8/15/2022
Town Clerk	Sandra Minkkinen	Election Worker	\$10.25	8/15/2022
Town Clerk	Micheline Pelletier	Election Worker	\$10.25	8/15/2022
Town Clerk	Gail Ralston	Election Worker	\$10.25	8/15/2022
Town Clerk	Judith Norton	Clerk	\$11.25	8/15/2022
Town Clerk	Nancy Earnley	Election Worker	\$10.25	8/15/2022
Town Clerk	Marilyn Fulginiti	Election Worker	\$10.25	8/15/2022
Town Clerk	Jennifer Hickman	Election Worker	\$10.25	8/15/2022
Town Clerk	Amy Jaromin	Election Worker	\$10.25	8/15/2022
Town Clerk	Liz Kochakian	Election Worker	\$10.25	8/15/2022
Town Clerk	Jeanne Paskowsky	Election Worker	\$10.25	8/15/2022
Town Clerk	Sarah Slaughter	Election Worker	\$10.25	8/15/2022
Town Clerk	Charlotte Taylor	Clerk	\$11.25	8/15/2022
Town Clerk	Hellen Waldruff	Clerk	\$11.25	8/15/2022
Town Clerk	Dave Brown	Warden	\$12.25	8/15/2022
Town Clerk	George Fulginiti	Election Worker	\$10.25	8/15/2022
Town Clerk	Amy Holland	Election Worker	\$10.25	8/15/2022

Town Clerk	Sandra Morrison	Election Worker	\$10.25	8/15/2022
Town Clerk	Pam Newman	Election Worker	\$10.25	8/15/2022
Town Clerk	Suzanne Rice	Election Worker	\$10.25	8/15/2022
Town Clerk	Catherine Robie	Election Worker	\$10.25	8/15/2022
Town Clerk	Linda Salzman	Election Worker	\$10.25	8/15/2022
Town Clerk	Donna Cooper	Election Worker	\$10.25	8/15/2022
Town Clerk	Donna Dooley	Election Worker	\$10.25	8/15/2022
Town Clerk	Suzanne Hornick	Election Worker	\$10.25	8/15/2022
Town Clerk	Steven Knapp	Election Worker	\$10.25	8/15/2022
Town Clerk	Judith Lugus	Clerk	\$11.25	8/15/2022
Town Clerk	Matt Murphy	Election Worker	\$10.25	8/15/2022
Town Clerk	Marcia O'Donnell	Election Worker	\$10.25	8/15/2022
Town Clerk	Amy Belscher	Election Worker	\$10.25	8/15/2022
Town Clerk	Ruth Shapiro	Election Worker	\$10.25	8/15/2022
Town Clerk	Luan Giannone	Election Worker	\$10.25	8/15/2022
Town Clerk	George Kakridas	Election Worker	\$10.25	8/15/2022
Town Clerk	Sandra DiVencenzo	Election Worker	\$10.25	8/15/2022
Town Clerk	Jane Gifun	Election Worker	\$10.25	8/15/2022
Town Clerk	Joe Gifun	Election Worker	\$10.25	8/15/2022
Town Clerk	Phyliss Herskovits	Election Worker	\$10.25	8/15/2022
Town Clerk	Adam Ibitsky	Election Worker	\$10.25	8/15/2022
Town Clerk	Paul Ordman	Warden	\$12.25	8/15/2022
Town Clerk	Carolyn Page	Election Worker	\$10.25	8/15/2022
Town Clerk	Mildred Raymond	Election Worker	\$10.25	8/15/2022
Town Clerk	Lisa Reid	Election Worker	\$10.25	8/15/2022
Town Clerk	John Saba	Election Worker	\$10.25	8/15/2022
Town Clerk	George Woodward	Election Worker	\$10.25	8/15/2022
Town Clerk	Kitty Craig Comin	Election Worker	\$10.25	8/15/2022
Town Clerk	Susan Fried	Election Worker	\$10.25	8/15/2022
Town Clerk	Remi Machet	Warden	\$12.25	8/15/2022
Town Clerk	Cynthia Stoltz	Election Worker	\$10.25	8/15/2022
Town Clerk	Betsey Streeter	Election Worker	\$10.25	8/15/2022
Town Clerk	Nancy Buckley	Election Worker	\$10.25	8/15/2022
Town Clerk	Deb Hartman	Election Worker	\$10.25	8/15/2022
Town Clerk	Carol Towle	Election Worker	\$10.25	8/15/2022
Town Clerk	Susan Yavner	Election Worker	\$10.25	8/15/2022
Town Clerk	Jennifer Zhang	Election Worker	\$10.25	8/15/2022
Town Clerk	Alice Pincujs	Clerk	\$11.25	8/15/2022
Town Clerk	Sarah Atwood	Election Worker	\$10.25	8/15/2022
Town Clerk	Patricia Dell-Ross	Election Worker	\$10.25	8/15/2022
Town Clerk	Karen Dobbelarr	Election Worker	\$10.25	8/15/2022
Town Clerk	Traci Connor	Election Worker	\$10.25	8/15/2022

Town Clerk	Linda D'Andrea	Election Worker	\$10.25	8/15/2022
Town Clerk	Nancy Donahue	Election Worker	\$10.25	8/15/2022
Town Clerk	Clair Enos	Election Worker	\$10.25	8/15/2022
Town Clerk	Linda O'Connell	Election Worker	\$10.25	8/15/2022
Town Clerk	Daniela Roubicek	Election Worker	\$10.25	8/15/2022
Town Clerk	Dora Volpe	Election Worker	\$10.25	8/15/2022

B. Appointments by the Town Manager

Board to vote that the following appointments by the Town Manager be approved.

Department	Name	Position	Rate/Term	Date of Hire
CD&P – Planning Division	Monica Gregoire <i>(Anthony Collins)</i>	Associate Planner	\$73,758.29/yr	9/6/2022
Facilities	Nicholas Cantone <i>(Richard Reid)</i>	Electrician	\$72,643.70/yr	9/6/2022
Community Services – Recreation	Michael DiTroia	Seasonal	\$24.00/hr	8/2/2022

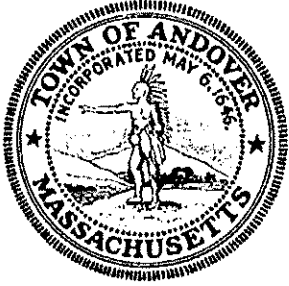
VIII. **Executive Session**

Board to vote to go into Executive Session pursuant to purpose 3 for confidential communication with Town Counsel to discuss strategy with respect to litigation filed by Yvon Cormier, and to approve and not release Executive Session Minutes of June 13, 2022, and for the Chair to declare that an open session may have a detrimental effect on the negotiating position of the Town; and not to return to open session.

IX. **Adjourn**

If any member of the public wishing to attend this meeting seeks special accommodations in accordance with the Americans with Disabilities Act, please contact Kathryn Forina in the Town Manager's Office at 978-623-8215 or by email at kathryn.forina@andoverma.us

MEETINGS ARE TELEVISED ON
COMCAST CHANNEL 22 AND VERIZON CHANNEL 45



TOWN OF ANDOVER

Town Clerk's Office

36 Bartlet Street
Andover, MA 01810
978-623-8230
townclerk@andoverma.gov

Notice is hereby given in accordance with Chapter 138 of the Massachusetts General Laws, as amended, that **Paradise City Hospitality, LLC d/b/a Brooksy's** at 90 Main Street. has applied for a New – Wines and Malt Beverages on Premises Liquor License.

The public hearing will be held on Monday, August 15, 2022, at Bancroft Elementary School, 15 Bancroft Road, Andover, MA at 7:00 p.m. in accordance with the General Laws relating thereto.

By Order of the
Select Board

Patrick J. Lawlor
Acting Town Clerk

Date of Issue: August 4, 2022



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM

APPLICATION FOR A NEW LICENSE

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: ABCC PAYMENT WEBSITE

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

ENTITY/ LICENSEE NAME

ADDRESS

CITY/TOWN STATE ZIP CODE

For the following transactions (Check all that apply):

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual/ Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club/ restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | <input type="checkbox"/> Other <input type="text"/> | | <input type="checkbox"/> Change of DBA |

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS
 TRANSMITTAL FORM ALONG WITH
 COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3
 Chelsea, MA 02150-2358



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
 www.mass.gov/abcc

APPLICATION FOR A NEW LICENSE

Municipality

1. LICENSE CLASSIFICATION INFORMATION

ON/OFF-PREMISES	TYPE	CATEGORY	CLASS
<input type="text" value="On-Premises-12"/>	<input type="text" value="§12 Restaurant"/>	<input type="text" value="Wines and Malt Beverages"/>	<input type="text" value="Annual"/>

Please provide a narrative overview of the transaction(s) being applied for. On-premises applicants should also provide a description of the intended theme or concept of the business operation. Attach additional pages, if necessary.

Brooksys will be a neighborhood pizzeria with a limited menu of pizza, wings, salads, sandwiches, and appetizers. We will focus on a casual theme that all are welcome: families, teens, and adults. We will serve lunch and dinner, but will close at 10:00pm. We will have nine (9) bar seats with two TVs for sports viewing. Our seasonal patio will be for casual outdoor dining (weather permitting).

Is this license application pursuant to special legislation? Yes No Chapter Acts of

2. BUSINESS ENTITY INFORMATION

The entity that will be issued the license and have operational control of the premises.

Entity Name FEIN ✓

DBA Manager of Record

Street Address

Phone Email ✓

Alternative Phone ✓ Website

3. DESCRIPTION OF PREMISES

Please provide a complete description of the premises to be licensed, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage. You must also submit a floor plan.

The licensed premises is one floor with a pizza oven, a cooking line, a walk in cooler, one women's restroom, one men's restroom, 45 indoor dining seats and 16 outdoor dining seats. The licensed premises is 2,288 square feet. See attached floor plan for greater detail

Total Square Footage:	<input type="text" value="2,288 SF"/>	Number of Entrances:	<input type="text" value="2"/>	Seating Capacity:	<input type="text" value="61"/>
Number of Floors	<input type="text" value="1"/>	Number of Exits:	<input type="text" value="7"/>	Occupancy Number:	<input type="text" value="61"/>

4. APPLICATION CONTACT

The application contact is the person whom the licensing authorities should contact regarding this application.

Name: Phone:

Title: Email:

APPLICATION FOR A NEW LICENSE

5. CORPORATE STRUCTURE

Entity Legal Structure	<input type="text" value="LLC"/>	Date of Incorporation	<input type="text" value="05/26/2022"/>
State of Incorporation	<input type="text" value="Massachusetts"/>	Is the Corporation publicly traded? <input type="radio"/> Yes <input checked="" type="radio"/> No	

6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST

List all individuals or entities that will have a direct or indirect, beneficial financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.). Attach additional page(s) provided, if necessary, utilizing Addendum A.

- The individuals and titles listed in this section must be identical to those filed with the Massachusetts Secretary of State.
- The individuals identified in this section, as well as the proposed Manager of Record, must complete a CORI Release Form.
- Please note the following statutory requirements for Directors and LLC Managers:
On Premises (E.g. Restaurant/Club/Hotel) Directors or LLC Managers - At least 50% must be US citizens;
Off Premises (Liquor Store) Directors or LLC Managers - All must be US citizens and a majority must be Massachusetts residents.
- If you are a Multi-Tiered Organization, please attach a flow chart identifying each corporate interest and the individual owners of each entity as well as the Articles of Organization for each corporate entity. Every individual must be identified in Addendum A.

Name of Principal	Residential Address	SSN	DOB
Brooks Rice	[REDACTED]	[REDACTED]	[REDACTED] ✓
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Manager/Member	[REDACTED]	[REDACTED]	[REDACTED] ✓
MA Resident	[REDACTED] ✓		
Name of Principal	Residential Address	SSN	DOB
Kimberly Banfillo	[REDACTED]	[REDACTED]	[REDACTED] ✓
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
Member	[REDACTED]	[REDACTED]	[REDACTED] ✓
MA Resident	[REDACTED] ✓		
Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident	<input type="radio"/> Yes <input type="radio"/> No		
Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident	<input type="radio"/> Yes <input type="radio"/> No		
Name of Principal	Residential Address	SSN	DOB
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Title and or Position	Percentage of Ownership	Director/ LLC Manager	US Citizen
[REDACTED]	[REDACTED]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
MA Resident	<input type="radio"/> Yes <input type="radio"/> No		

Additional pages attached? Yes No

CRIMINAL HISTORY

Has any individual listed in question 6, and applicable attachments, ever been convicted of a State, Federal or Military Crime? If yes, attach an affidavit providing the details of any and all convictions. Yes No

APPLICATION FOR A NEW LICENSE

6A. INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Does any individual or entity identified in question 6, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6B. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 6, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

6C. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Have any of the disclosed licenses listed in question 6A or 6B ever been suspended, revoked or cancelled? Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

7. OCCUPANCY OF PREMISES

Please complete all fields in this section. Please provide proof of legal occupancy of the premises.

- If the applicant entity owns the premises, a deed is required.
- If leasing or renting the premises, a signed copy of the lease is required.
- If the lease is contingent on the approval of this license, and a signed lease is not available, a copy of the unsigned lease and a letter of intent to lease, signed by the applicant and the landlord, is required.
- If the real estate and business are owned by the same individuals listed in question 6, either individually or through separate business entities, a signed copy of a lease between the two entities is required.

Please indicate by what means the applicant will occupy the premises

Lease

Landlord Name

Landlord Phone

Landlord Email

Landlord Address

Lease Beginning Date

Rent per Month

Lease Ending Date

Rent per Year

Will the Landlord receive revenue based on percentage of alcohol sales? Yes No

APPLICATION FOR A NEW LICENSE

8. FINANCIAL DISCLOSURE

A. Purchase Price for Real Estate	N/A
B. Purchase Price for Business Assets	N/A
C. Other * (Please specify [redacted] [redacted])	[redacted]
[redacted]	[redacted]

*Other Cost(s): (I.e. Costs associated with License Transaction including but not limited to: Property price, Business Assets, Renovations costs, Construction costs, Initial Start-up costs, Inventory costs, or specify other costs):"

SOURCE OF CASH CONTRIBUTION

Please provide documentation of available funds. (E.g. Bank or other Financial Institution Statements, Bank Letter, etc.)

Name of Contributor	Amount of Contribution
[redacted]	[redacted]
[redacted]	[redacted]
Total	[redacted]

SOURCE OF FINANCING

Please provide signed financing documentation.

Name of Lender	Amount	Type of Financing	Is the lender a licensee pursuant to M.G.L. Ch. 138.
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

FINANCIAL INFORMATION

Provide a detailed explanation of the form(s) and source(s) of funding for the cost identified above.

[redacted]

9. PLEDGE INFORMATION

Please provide signed pledge documentation.

Are you seeking approval for a pledge? Yes No

Please indicate what you are seeking to pledge (check all that apply) License Stock Inventory

To whom is the pledge being made?

10. MANAGER APPLICATION

A. MANAGER INFORMATION

The individual that has been appointed to manage and control the licensed business and premises.

Proposed Manager Name Date of Birth SSN

Residential Address

Email Phone

Please indicate how many hours per week you intend to be on the licensed premises

B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen? Yes No *Manager must be a U.S. Citizen
If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.

Have you ever been convicted of a state, federal, or military crime? Yes No
If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

Start Date	End Date	Position	Employer	Supervisor Name
		General Manager	Nash Bar & Stage	
05/2020	08/2021	Director of Operations	Max & Leo's Artisan Pizza	
11/2016	05/2019	General Manager	Game On Fenway	
01/2016	10/2016	Product Manager/Quality Control	Max & Leo's @Game On!	

D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? Yes No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature Date

11. MANAGEMENT AGREEMENT

Are you requesting approval to utilize a management company through a management agreement?
 If yes, please fill out section 11.

Yes No

Please provide a narrative overview of the Management Agreement. Attach additional pages, if necessary.

IMPORTANT NOTE: A management agreement is where a licensee authorizes a third party to control the daily operations of the license premises, while retaining ultimate control over the license, through a written contract. *This does not pertain to a liquor license manager that is employed directly by the entity.*

11A. MANAGEMENT ENTITY

List all proposed individuals or entities that will have a direct or indirect, beneficial or financial interest in the management Entity (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name	Address	Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Name of Principal	Residential Address	SSN	DOB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Title and or Position	Percentage of Ownership	Director	US Citizen	MA Resident
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
 If yes, attach an affidavit providing the details of any and all convictions.

Yes No

11B. EXISTING MANAGEMENT AGREEMENTS AND INTEREST IN AN ALCOHOLIC BEVERAGES

LICENSE

Does any individual or entity identified in question 11A, and applicable attachments, have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages; and or have an active management agreement with any other licensees?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

11C. PREVIOUSLY HELD INTEREST IN AN ALCOHOLIC BEVERAGES LICENSE

Has any individual or entity identified in question 11A, and applicable attachments, ever held a direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages, which is not presently held?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Name	License Type	License Name	Municipality

11D. PREVIOUSLY HELD MANAGEMENT AGREEMENT

Has any individual or entity identified in question 11A, and applicable attachments, ever held a management agreement with any other Massachusetts licensee?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Licensee Name	License Type	Municipality	Date(s) of Agreement

11E. DISCLOSURE OF LICENSE DISCIPLINARY ACTION

Has any of the disclosed licenses listed in questions in section 11B, 11C, 11D ever been suspended, revoked or cancelled?

Yes No If yes, list in table below. Attach additional pages, if necessary, utilizing the table format below.

Date of Action	Name of License	City	Reason for suspension, revocation or cancellation

11F. TERMS OF AGREEMENT

- a. Does the agreement provide for termination by the licensee? Yes No
- b. Will the licensee retain control of the business finances? Yes No
- c. Does the management entity handle the payroll for the business? Yes No

d. Management Term Begin Date e. Management Term End Date

f. How will the management company be compensated by the licensee? (check all that apply)

- \$ per month/year (Indicate amount)
- % of alcohol sales (Indicate percentage)
- % of overall sales (Indicate percentage)
- other (please explain)

ABCC Licensee Officer/LLC Manager

Management Agreement Entity Officer/LLC Manager

Signature:

Signature:

Title:

Title:

Date:

Date:

ADDITIONAL INFORMATION

Please utilize this space to provide any additional information that will support your application or to clarify any answers provided above.

10(c) - CONTINUED

Inception - 11/2015; Manager; Stoked Wood Fired Pizza

Inception - 04/2013; Manager; Max & Leo's Artisan Pizza

APPLICANT'S STATEMENT

I, Brooks Rice the: sole proprietor; partner; corporate principal; LLC/LLP manager
Authorized Signatory

of Paradise City Hospitality, LLC
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature: [Redacted]

Date: 7/13/22

Title: Manager/Member

CORPORATE VOTE

The Board of Directors or LLC Managers of Paradise City Hospitality, LLC
Entity Name
duly voted to apply to the Licensing Authority of Andover and the
City/Town
Commonwealth of Massachusetts Alcoholic Beverages Control Commission on
Date of Meeting

For the following transactions (Check all that apply):

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | <input type="checkbox"/> Other <u> </u> | <input type="checkbox"/> Change of DBA | |

"VOTED: To authorize Brooks Rice
Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

"VOTED: To appoint Brooks Rice
Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,



BROOKS RICE
(Print Name)

For Corporations ONLY

A true copy attest,

Corporation Clerk's Signature

(Print Name)

ADDENDUM A

6. PROPOSED OFFICERS, STOCK OR OWNERSHIP INTEREST (Continued...)

List all individuals or entities that will have a direct or indirect, beneficial or financial interest in this license (E.g. Stockholders, Officers, Directors, LLC Managers, LLP Partners, Trustees etc.).

Entity Name <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership in Entity being Licensed (Write "NA" if this is the entity being licensed) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
--	--

Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
--	--	---	--	---

Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
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Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
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Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
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Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
--	--	---	--	---

Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
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Name of Principal <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Residential Address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	SSN <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DOB <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Title and or Position <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Percentage of Ownership <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Director/ LLC Manager <input type="radio"/> Yes <input type="radio"/> No	US Citizen <input type="radio"/> Yes <input type="radio"/> No	MA Resident <input type="radio"/> Yes <input type="radio"/> No
--	--	---	--	---

CRIMINAL HISTORY

Has any individual identified above ever been convicted of a State, Federal or Military Crime?
If yes, attach an affidavit providing the details of any and all convictions.

Yes No



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$500.00

Secretary of the Commonwealth, Corporations Division
One Ashburton Place, 17th floor
Boston, MA 02108-1512
Telephone: (617) 727-9640

Certificate of Organization

(General Laws, Chapter)

Identification Number: [REDACTED]

1. The exact name of the limited liability company is: PARADISE CITY HOSPITALITY, LLC

2a. Location of its principal office:

No. and Street: [REDACTED]
City or Town: [REDACTED] State: MA Zip: [REDACTED] Country: USA

2b. Street address of the office in the Commonwealth at which the records will be maintained:

No. and Street: [REDACTED]
City or Town: [REDACTED] State: MA Zip: [REDACTED] Country: USA

3. The general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:

THE GENERAL CHARACTER OF THE LLC SHALL BE TO OPERATE A RESTAURANT, INCLUDING THE PREPARATION AND SERVICE OF FOOD, WINE, LIQUOR AND BEVERAGES OF ALL TYPES, ALCOHOLIC AND NON-ALCOHOLIC; TO ENTER INTO NECESSARY LEASES, OBTAIN THE NECESSARY LICENSES AND TO ENGAGE IN ANY OTHER LAWFUL ACTIVITY

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: BROOKS RICE
No. and Street: [REDACTED]
City or Town: [REDACTED] State: MA Zip: [REDACTED] Country: USA

I, BROOKS RICE resident agent of the above limited liability company, consent to my appointment as the resident agent of the above limited liability company pursuant to G. L. Chapter 156C Section 12.

6. The name and business address of each manager, if any:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
MANAGER	BROOKS RICE	[REDACTED]

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code
SOC SIGNATORY	BROOKS RICE	[REDACTED]

8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:

Title	Individual Name	Address (no PO Box)
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code
REAL PROPERTY	BROOKS RICE	[REDACTED]

9. Additional matters:

SIGNED UNDER THE PENALTIES OF PERJURY, this 26 Day of May, 2022,

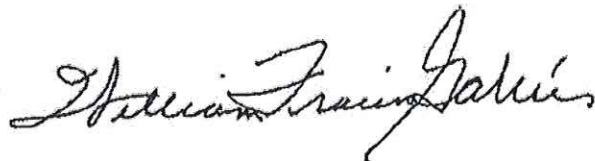
BROOKS RICE

(The certificate must be signed by the person forming the LLC.)

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

May 26, 2022 02:23 PM

A handwritten signature in cursive script that reads "William Francis Galvin".

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

LEASE

Indenture made this 18th day of April, 2022, by and between **90 MAIN STREET REALTY TRUST, c/o L. John Davidson,** [REDACTED] hereinafter referred to as Lessor and Brooks Rice, jointly and individually, of [REDACTED] [REDACTED] as successor owner of said entity Paradise City Hospitality , LLC, hereinafter referred to as Lessee.

WITNESSETH:

ARTICLE I. PREMISES:

In consideration of the mutual covenants herein undertaken Lessor agrees to and hereby does lease to Lessee two thousand six hundred and sixty-seven (2,667) square feet more or less of space on the first floor of Lessor's building located at 90 Main Street, Andover, Massachusetts formerly occupied by Bertucci's Restaurant Corp. as well as all furniture, fixtures and equipment owned by Lessor to be used by Lessee without charge during the term of the Lease as long as Lessee is in good standing under the terms of this Lease. The disposition of Lessor's mentioned furniture and equipment Lessee shall maintain, service and leave the equipment in good and working order together with said mentioned furniture with reasonable wear and tear excepted and provide evidence when requested by Lessor of professional maintenance services to said equipment at Lessee's expense and to continue such throughout the term of the Lease including time of departure as provided under this Lease. Additionally, the three Patio Areas in front of the Restaurant totaling 702 square feet is also included. Spaces are defined as area in front of restaurant 160 sf, area where planter is 230 sf and a small area in drive way 312sf all previously used by Bertucci's.

ARTICLE II. TERMS:

1. **Original Term:** The First Term of this Lease shall be for five (5) years commencing on August 1, 2022 and ending July 31, 2027.

2. **Options:** If in continuous good standing the Lessee shall have options to extend for a second, third and fourth term each of which will be for five (5) years. Notice for Extensions will be provided on each occasion not less than six (6) months prior to the end of the then existing Term.
3. **Notices:** Lessee agrees to provide written Notice of its intent to exercise its option to extend for either or both a second or third Term subject to the terms and conditions outlined herein elsewhere in writing at least six (6) months prior to the termination of the then existing Term together with a deposit in the amount of [REDACTED] dollars to be applied to the first monthly rental charges of the extended Term. Such extended Term will be effective only were all obligations of Lessee to maintain prompt payment of its obligations under this Lease on a timely basis.
4. **Landlord Right to Show Property:** Lessee agrees that Lessor may show the property to prospective tenants beginning one hundred twenty (120) days prior to the expiration of the then current Lease or one hundred twenty days (120) prior to the expiration of the first extension term or the second extension term, if any, as the case may be at reasonable times by appointment and/or during normal business hours providing that Lessee has not provided the Lessor with written notice as provided herein above of Lessee intent to exercise Lessee's option to extend for a second, third and/or fourth term, as the case may be.

ARTICLE III. RENT:

1. **Rent Payee:** Rent checks shall be payable to: **South Down Shores Management Services, Inc.** unless Lessee is otherwise notified by Lessor at least ten (10) days prior to a rent payment due date advising that a change in payee is to become effective. Rent payments are due on the first day of each month and shall be mailed to:

South Down Shores Management Services, Inc.
c/o L. John Davidson

[REDACTED]

[REDACTED]

2. **Base Rent:** [REDACTED]
- [REDACTED]

IN WITNESS WHEREOF, the parties hereto have executed this document as a sealed instrument this 18th day of April, 2022.

LESSEE

Paradise City Hospitality LLC

Witness: Date

By: Date

Authorized

Brooks Rice Owner/Manager

Witness: Date

Date

Authorized

LESSOR

90 MAIN STREET REALTY TRUST

Witness: Date

By: L. John Davidson Date

Authorized

BROOKS RICE

MANAGEMENT/LEADERSHIP

Strategic Team Player with the ability to approach a business with an "ownership" mindset. My leadership style is to approach each employee on an individual basis, and build on their strengths to fit into the overall business plan. Every employee deserves the opportunity to improve and should feel proud and comfortable in the workplace.

- Create a positive, healthy, and safe work culture.
- Open and honest communication.
- Treat employees with respect and dignity.
- Self accountability
- Strategic Planning & Execution
- Pride in brand/product
- Responsible sales growth
- Adherence to a budget
- Create opportunities for growth

PROFESSIONAL EXPERIENCE

NASH BAR & STAGE

Title: General Manager

- Responsible for the day to day operations for multi-level bar/restaurant/entertainment venue with a staff of 20-30 employees
- Collaborate with both BOH/FOH managers on schedules, labor costs, food costs, dry goods
- Worked directly with ownership on concept, design, and build-out
- Responsible for all personnel matters

MAX & LEO'S ARTISAN PIZZA

March 2020-September 2021

Title: Director of Operations

- Responsible for the day to day operations of 3 locations with a staff of 40-50 employees
- Collaborate with both BOH/FOH managers on schedules, labor costs, food costs, dry goods
- Implement COVID protocols to provide both a safe dining and working environment
- Streamline purchasing procedures to reduce excess inventory and maximize buying power
- Responsible for all personnel matters

GAME ON FENWAY

NOVEMBER 2016 - MAY 2019

Title: General Manager

- Responsible for day to day operations of a 600 person capacity, 10,000 sq Ft dining/entertainment venue attached to Fenway Park
- Overall management of a staff of 60-70 employees, including managers, FOH & BOH staff, security and events staff
- Create and manage budgets, sales projections, COGS, payroll, and Repair & Maintenance expenses
- Establish and maintain relationships with 3rd party vendors and partners
- Cultivate staff and provide opportunities for advancement for deserving employees
- **Achievements:**
- Increased operating income by 73% on 4% revenue growth

Starters & Salads

Crispy Fried Calamari, Garlic Butter & Hot Cherry Peppers

Chicken Wings, Lemon Rosemary

Duck Confit Grilled Cheese, Cherry Compote, Swiss Cheese

Sausage Board, Pretzel Bites, Pickled Vegetables, Accompaniments

Chick Pea Fries, Red Pepper Aioli

Cobb Salad-Chopped Lettuce, Turkey, Bacon, Cranberries, Avocado, Tomato, Blue Cheese & Hard Boiled Egg

Kale Salad, Greek Dressing, Hard Boiled Egg, Tomato, Celery, Olives, Chick Peas, Feta Cheese

Spinach Salad, Mustard Vinaigrette, Grilled Chicken, Apple, Goat Cheese

Sliders

Chorizo, Caramelized Onions, Pepperjack Cheese, Guacamole

Waygu Meatloaf, Cheddar Cheese, Bacon Jam

Grilled Vegetable, Brie

Sandwiches

Grass Fed Burger

Portabello Burger: Blue Cheese, Roasted Red Peppers, Caramelized Onions & Greens

Caprese Sandwich, Pesto, Tomato, Fresh Mozzarella

Fried Fish Sandwich w/ Tartar Sauce & Malt Vinegar Fries

Beer Braised Pulled Pork Sandwich

Short Rib & Cheddar Melt

Pizza

The Family

The Ezzoroni

The Margherita

The Sally

The Pig Rock Sausage

The Meat

The Veggie

The Honey Hot

The Koreatown

The Real Brooksy

The Wife

The Baked Potato

The Buffalo Chicken

The Mexico

The Parisian

The Vegan



Town of Andover
OFFICE OF THE TOWN CLERK

36 Bartlet St., Andover, Massachusetts 01810
Telephone - (978) 623-8230

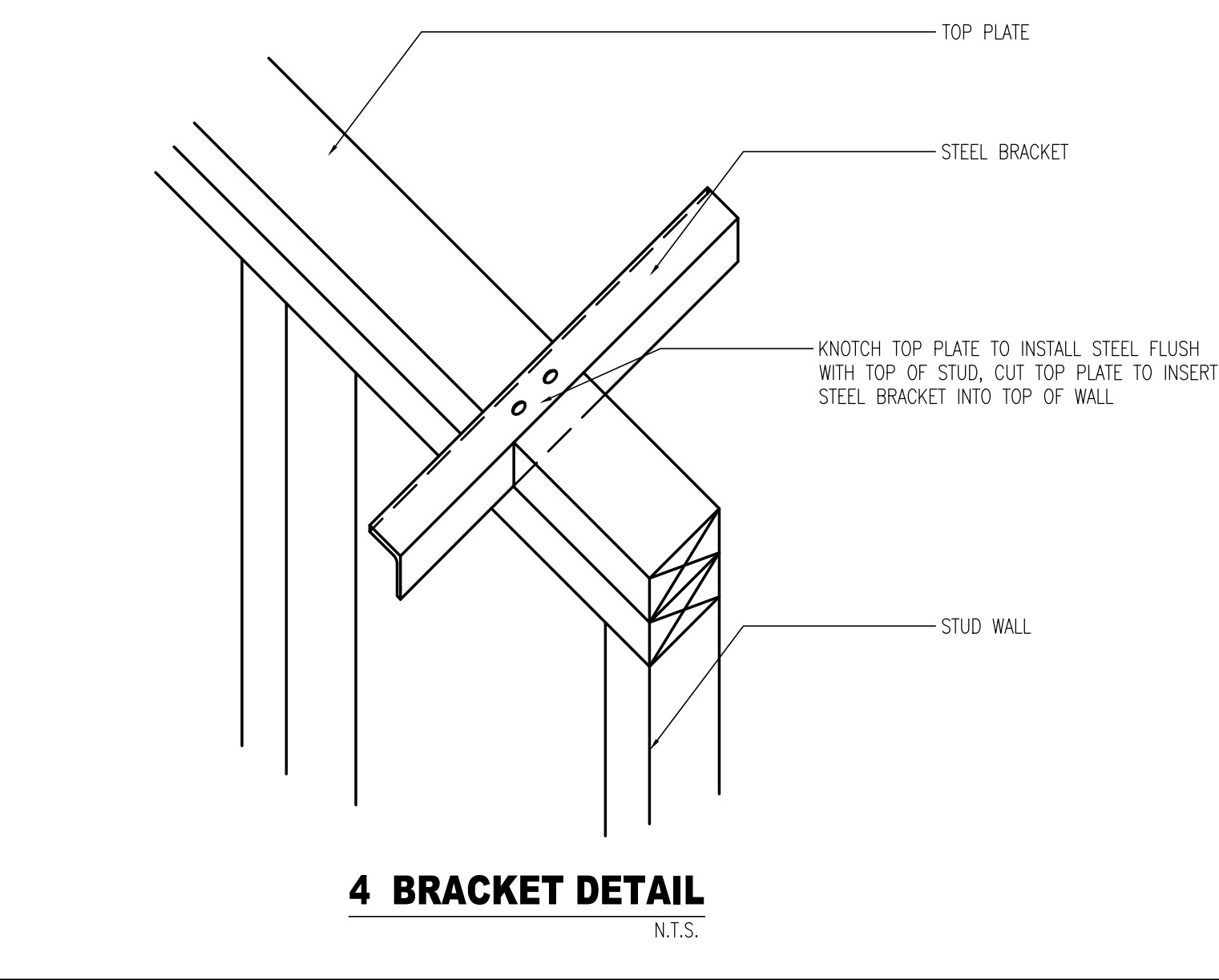
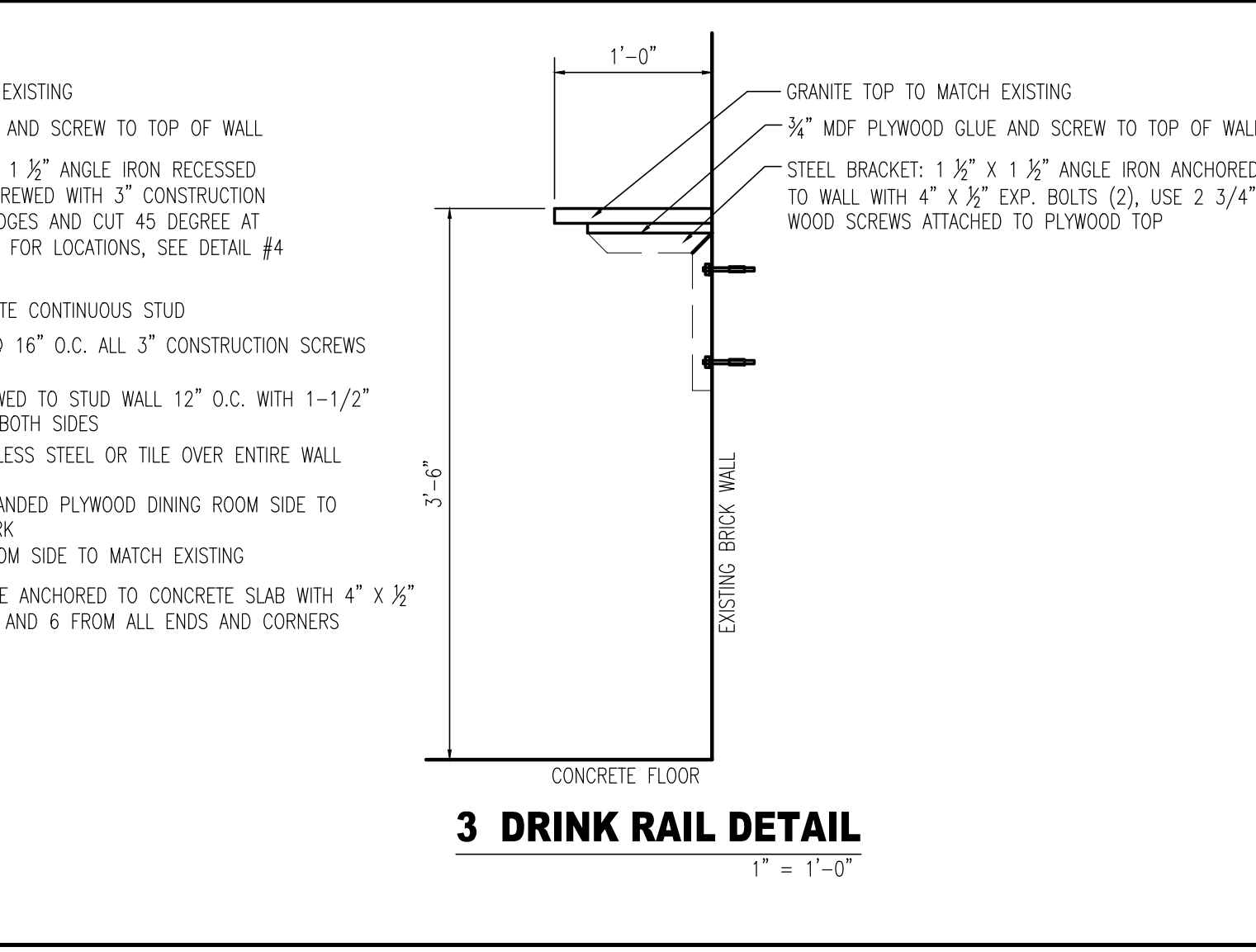
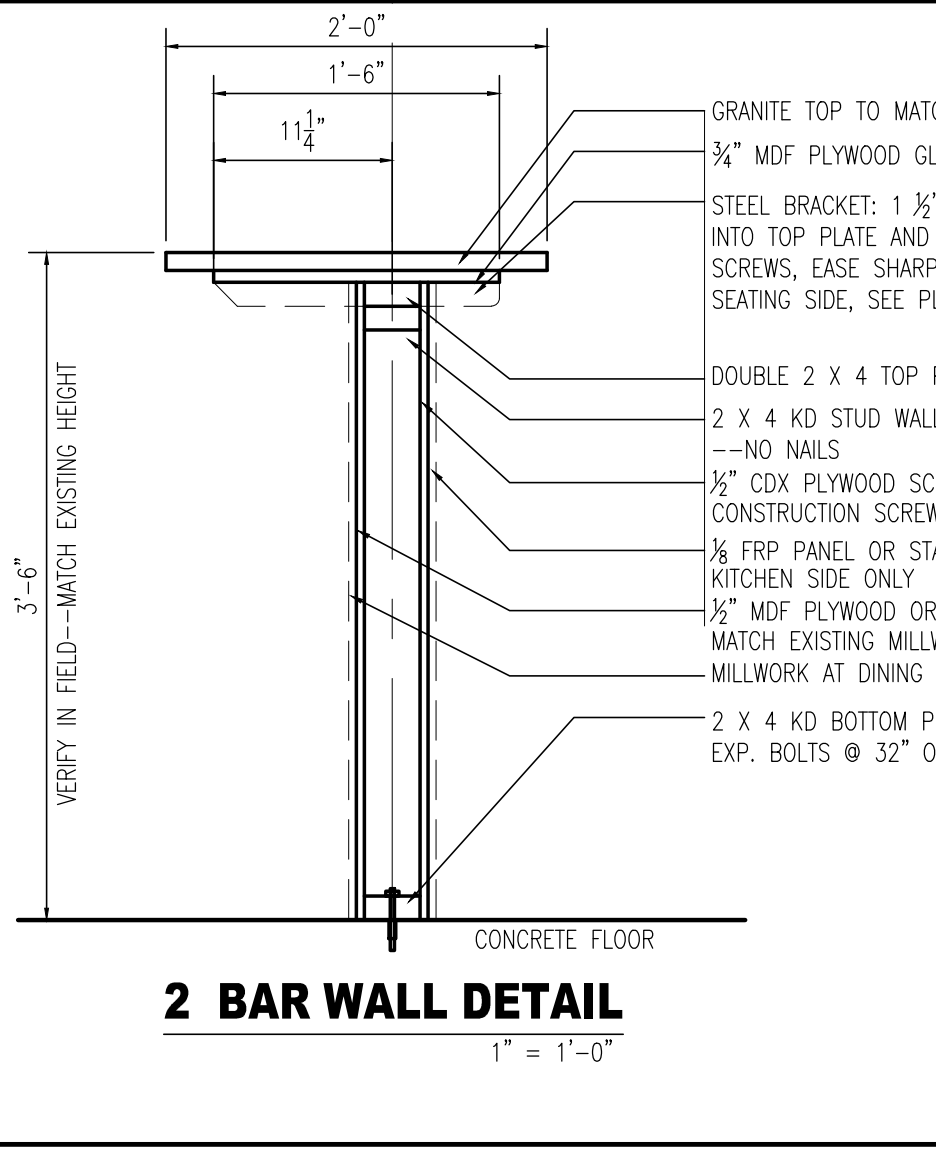
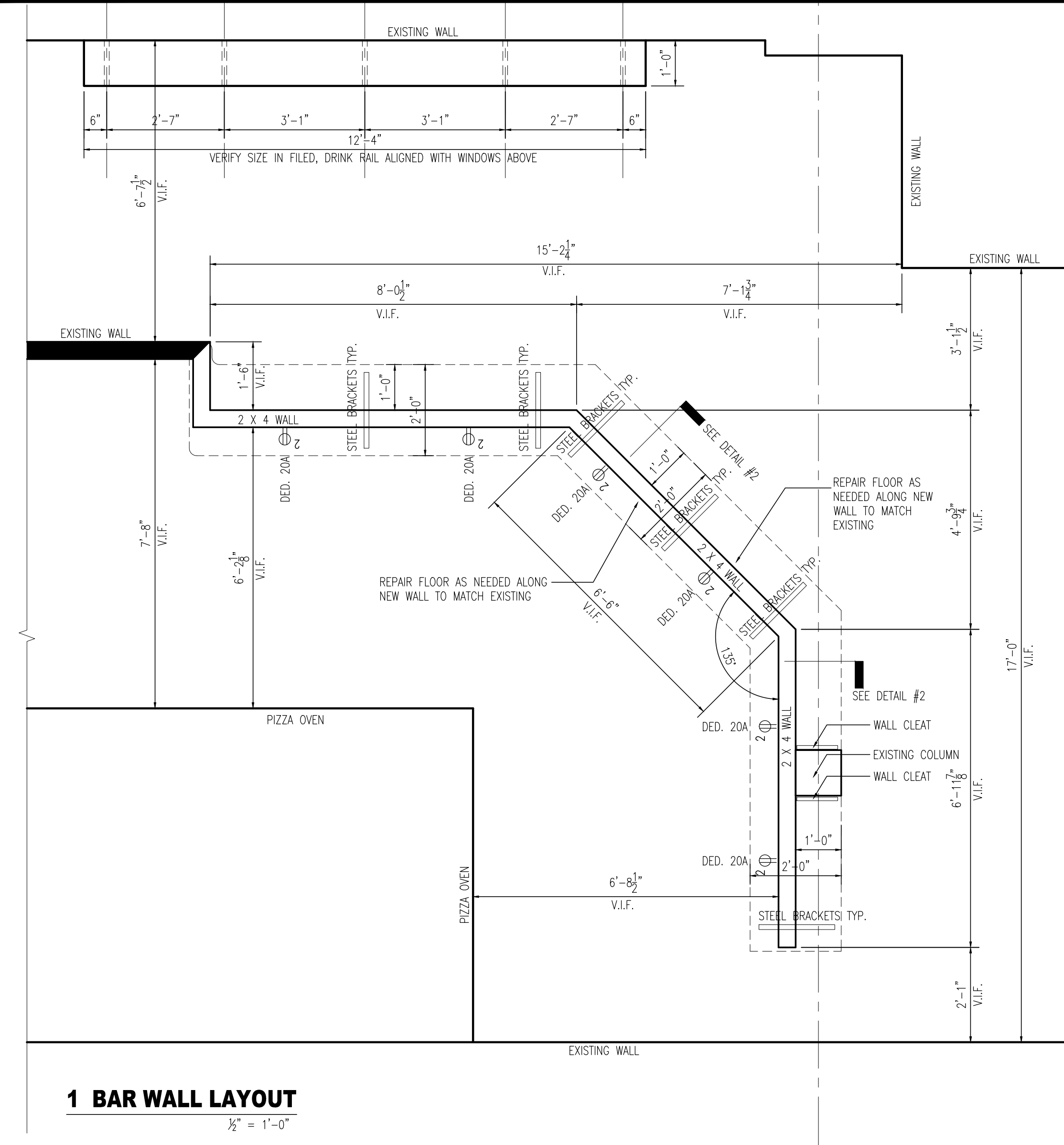
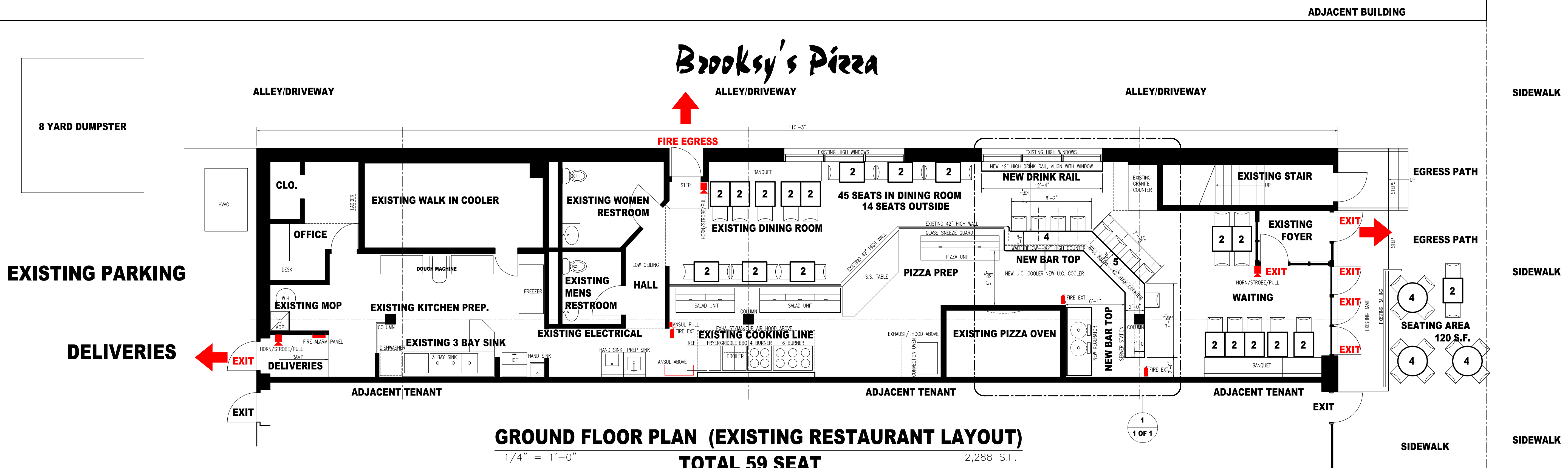
Application Liquor License

License Number:	Licensee:
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Completed Application (PRINT or TYPE Clearly). The application must be signed,
Application Fee: \$125 <i>check should be made payable to the TOWN OF ANDOVER</i>

Business Name: Paradise City Hospitality, LLC D/B/A Brooksys	Tax Id Number - [REDACTED]
Address of Business: 90 Main Street, Andover, MA 01810	Business Phone Number: No business phone number yet
Applicant's Name: Brooks Rice	Applicant's Phone Number: [REDACTED]
Applicant's Residential Address: [REDACTED] MA	Number of Employees: 10-15
Applicant's Email Address(required)	[REDACTED]
24 hour Emergency Contact info: Brooks Rice, [REDACTED]	
Expiration Date of Business Cert	
Circle one Individual Co-Partnership Association <u>Corporation</u>	
Days/Hours of Operation (list the hours per day):	
Monday-Sunday 11AM-10PM	

Brooksy's Pizza



SCOPE OF WORK:
 REMOVE EXISTING COUNTER AND REPLACE WITH NEW BAR TOP COUNTER AT SAME HEIGHT AND SIM. LOCATION
 INSTALL NEW REFRIGERATOR REF. UNIT
 NEW ELECTRICAL OUTLETS AT BAR AREA
 NEW SEATING LAYOUT
 NEW DRINK RAIL ALONG EXTERIOR WALL

NOT IN SCOPE OF WORK:
 NO STRUCTURAL WORK TO BE PERFORMED
 NO HVAC WORK OTHER THAN CLEANING AND TESTING
 NO PLUMBING WORK OTHER THAN CHANGING FAUCETS AND REPLACING FIXTURES IN SAME LOCATION
 NO FIRE ALARM WORK OTHER THAN WHAT FIRE DEPARTMENT WANTS UPGRADED TO MEET CODE
 NO ANSUL SYSTEM OR GREASE HOOD MODIFICATIONS, ALL EXISTING SHALL BE INSPECTED AND REPAIRED TO MEET CODE

JUSTDRAWIT.COM
 133B MAIN STREET
 NORTH READING, MA 01864
 ARCHITECTURAL DESIGNS
 BY ORAZIO
 WWW.JUSTDRAWIT.COM
 ORAZIO@JUSTDRAWIT.COM
 TEL: 781-640-7197

PROJECT NAME:
 Existing Restaurant Renovation
 90 Main Street, Andover, MA 01810

OWNER:
 "Brooksy's" --Paradise City Hospitality
 90 Main Street, Andover, MA 01810

DATE	REVISION

JOB NO. 2022-027

SHEET NO. 1 OF 1