State of Arizona
Department of Liquor Licenses and Control

Created 03/25/2022 @ 03:33:15 PM

Local Governing Body Report

LICENSE

Number:		Type:	012 RESTAURANT
Name:	COLD BEERS & CHEESEBURGERS		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	20350 N JOHN WAYNE PARKWAY #160 MARICOPA, AZ 85139 USA		
Mailing Address:	PO BOX 2502 CHANDLER, AZ 85244 USA		
Phone:	(000)000-0000		
Alt. Phone:	(480)730-2267		
Email:	LIQUORLICENSE@AZLIC.COM		

AGENT

Name:	AMY S NATIONS
Gender:	Female
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	LIQUORLICENSE@AZLIC.COM

OWNER

Name:	CB & CB MARICOPA LLC		
Contact Name:	AMY S NATIONS		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	23234165	State of Incorporation:	AZ
Incorporation Date:	06/09/2021		
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA		
Phone:	(480)730-2675		
Alt. Phone:			
Email:	LIQUORLICENSE@AZLIC.COM		

Officers / Stockholders

Name:	Title:	% Interest:
SHCB 7TH STREET LLC	Member	50.00
SQUARE ONE CONCEPTS INC	Managing Member	50.00

KENDALL SPENCE TRUST - Trustee
MASON SPENCE TRUST - Trustee
PAIGE NAGY TRUST - Trustee
RACHEL SPENCE TRUST - Trustee
SPENCE GRANDCHILDREN TRUST - Trustee
WENDELL SPENCE TRUST - Trustee

Name:	PAIGE CANDACE NAGY
Gender:	Female
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(512)791-4150
Alt. Phone:	
Email:	PNAGY@SPENCEMANAGEMENT.COM

SHCB 7TH STREET LLC - Member,Stockholder

Name:	SPENCE HOLDING LLC
Contact Name:	AMY NATIONS
Type:	LIMITED LIABILITY COMPANY
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	PAIGE NAGY TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	WENDELL SPENCE TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	RACHEL SPENCE TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	MASON SPENCE TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	KENDALL SPENCE TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

SPENCE HOLDING LLC - Stockholder

Name:	SPENCE GRANDCHILDREN TRUST
Contact Name:	AMY NATIONS
Type:	TRUST
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

CB & CB MARICOPA LLC - Managing Member

Name:	SQUARE ONE CONCEPTS INC
Contact Name:	AMY NATIONS
Type:	CORPORATION
AZ CC File Number:	State of Incorporation:
Incorporation Date:	
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	AMYNATIONS@AZLIC.COM

CB & CB MARICOPA LLC - Member

Name:	SHCB 7TH STREET LLC
Contact Name:	AMY S NATIONS
Type:	LIMITED LIABILITY COMPANY
AZ CC File Number:	State of Incorporation: AZ
Incorporation Date:	
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	LIQUORLICENSE@AZLIC.COM

SQUARE ONE CONCEPTS INC - President

Name:	STEVEN BARRETT RINZLER
Gender:	Male
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(602)525-3856
Alt. Phone:	
Email:	SBRINZLER@AOL.COM

MANAGERS

Name:	TRACY ADAM FRAZIER
Gender:	Male
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)313-2562
Alt. Phone:	
Email:	TRACY@SQ1C.COM

APPLICATION INFORMATION

Application Number:	190438
Application Type:	New Application
Created Date:	03/25/2022

QUESTIONS & ANSWERS

012 Restaurant

1) Are you applying for an Interim Permit (INP)?
   No
2) Are you one of the following? Please indicate below.
   Property Tenant
   Subtenant
   Property Owner
   Property Purchaser
   Property Management Company
   PROPERTY TENANT
3) Is there a penalty if lease is not fulfilled?
   Yes
   What is the penalty?
   TERMINATION
4) Is the Business located within the incorporated limits of the city or town of which it is located?
   Yes
5) What is the total money borrowed for the business not including the lease?
   Please list each amount owed to lenders/individuals.
   ZERO
6) Is there a drive through window on the premises?
   No
7) Does the establishment have a patio?
   Yes
   Is the patio contiguous or non-contiguous (within 30 feet)?
   CONTIGUOUS PATIO
8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
   Yes
   If yes, what is your estimated completion date?
   08/01/2022