

LICENSE ALCOHOLIC BEVERAGES

THE LICENSING BOARD OF
THE TOWN OF WINCHESTER
MASSACHUSETTS
HEREBY GRANTS A

RETAIL PACKAGE GOODS STORE

License to Expose, Keep for Sale, and to Sell
WINE AND MALT LIQUOR ONLY

Not To Be Drunk On the Premises

To: Amberghini, Inc d/b/a Craft Beer Cellar, 18 Thompson Street

On the following described premises: Premises located at 18 Thompson St. is 400 sq. ft. of retail space and 165 sq. ft. of storage space in the basement. Sales floor is approximately 20 ft. by 20 ft. The only entrance to 18 Thompson St. is caddy-cornered facing both Thompson St. and Winchester Terrace

This license is granted and accepted upon the express condition that the licensee shall, in all respects, conform to all the provisions of the Liquor Control Act, Chapter 138 of the General Laws, as amended, and any rules or regulations made thereunder by the licensing authorities. This license expires DECEMBER 31, 2016 unless earlier suspended, cancelled or revoked.

IN TESTIMONY WHEREOF, the undersigned have hereunto affixed their official signatures this 29th day of August 2016.

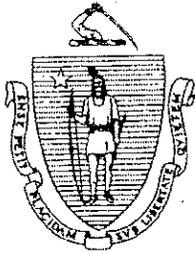
The Hours during which Alcoholic Beverages may be sold are:

*In accordance with the Town of Winchester
Retail Alcoholic Beverage
Rules and Regulations*

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Licensing Board

This License Shall Be Displayed On The Premises In A Conspicuous Position Where It Can Easily Be Read



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street
 Boston, MA 02114
 www.mass.gov/abcc

For Reconsideration

FORM 43
 MUST BE SIGNED BY LOCAL LICENSING AUTHORITY

2152
 ABCC License Number

Winchester
 City/Town

Local Approval Date

TRANSACTION TYPE (Please check all relevant transactions):

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> New Officer/Director | <input type="checkbox"/> Pledge of License | <input type="checkbox"/> Change Corporate Name |
| <input checked="" type="checkbox"/> Transfer of License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Pledge of Stock | <input type="checkbox"/> Seasonal to Annual |
| <input type="checkbox"/> Change of Manager | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Transfer of Stock | <input type="checkbox"/> Change of License Type |
| <input type="checkbox"/> Cordials/Liqueurs Permit | <input type="checkbox"/> Issuance of Stock | <input type="checkbox"/> New Stockholder | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> 6-Day to 7-Day License | <input type="checkbox"/> Management/Operating Agreement | <input type="checkbox"/> Wine & Malt to All Alcohol | |

Name of Licensee: Amberghehi Inc EIN of Licensee:

D/B/A: Craft Beer Cellar Winchester Manager: David Leshowitz

ADDRESS: 18 Thompson Street CITY/TOWN: Winchester STATE: MA ZIP CODE: 01890

Annual or Seasonal: Annual Category: Wine & Malt Type: Package Store
 Granted under Special Legislation? Yes No
 If Yes, Chapter: Year:

Complete Description of Licensed Premises:

400 square feet of retail space and 165 square feet of basement storage space. The sales floor is approximately 20 x 20 and the only entrance to the store is caddy-cornered, facing both Thompson Street and Winchester Terrace.

Application Filed: 06.24.16 Date & Time Advertiser: Date & Attach Publication Abutters Notified: Yes No

Licensee Contact Person for Transaction: Jennifer Caffarella Phone: 781.721.7133

ADDRESS: 71 Mt. Vernon Street CITY/TOWN: Winchester STATE: MA ZIP CODE: 01890

Remarks:

The Local Licensing Authorities By:

Alcoholic Beverages Control Commission
 Ralph Sacramone
 Executive Director

ABCC Remarks:



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street
 Boston, MA 02114
www.mass.gov/abcc

Print Form

**RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
 MONETARY TRANSMITTAL FORM**

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

ECRT CODE: RETA

CHECK PAYABLE TO ABCC OR COMMONWEALTH OF MA: \$200.00

(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL)

CHECK NUMBER

IF USED EPAY, CONFIRMATION NUMBER

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

LICENSEE NAME

ADDRESS

CITY/TOWN STATE ZIP CODE

TRANSACTION TYPE (Please check all relevant transactions):

- Alteration of Licensed Premises
- Cordials/Liqueurs Permit
- New Officer/Director
- Transfer of License
- Change Corporate Name
- Issuance of Stock
- New Stockholder
- Transfer of Stock
- Change of License Type
- Management/Operating Agreement
- Pledge of Stock
- Wine & Malt to All Alcohol
- Change of Location
- More than (3) \$15
- Pledge of License
- 6-Day to 7-Day License
- Change of Manager
- New License
- Seasonal to Annual
- Other

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

**ALCOHOLIC BEVERAGES CONTROL COMMISSION
 P. O. BOX 3396
 BOSTON, MA 02241-3396**

APPLICATION FOR RETAIL ALCOHOLIC BEVERAGE LICENSE

City/Town Winchester, MA

1. LICENSEE INFORMATION:

A. Legal Name/Entity of Applicant:(Corporation, LLC or Individual) Amberghini, Inc.

B. Business Name (if different) : Craft Beer Cellar Winchester C. Manager of Record: David Leshowitz

D. ABCC License Number (for existing licenses only) : 2152

E. Address of Licensed Premises: 18 Thompson Street City/Town: Winchester State: MA Zip: 01890

F. Business Phone: 781.369.1174 G. Cell Phone: 508.380.6801

H. Email: cellar.com I. Website: craftbeercellar.com/winchester

J. Mailing address (If different from E.): 11 Flynn Street City/Town: Natick State: MA Zip: 01780

2. TRANSACTION:

- Transfer of License, New Stockholder, Management/Operating Agreement, Pledge of License

The following transactions must be processed as new licenses:

- Seasonal to Annual, (6) Day to (7)-Day License, Wine & Malt to All Alcohol

IMPORTANT ATTACHMENTS (1): The applicant must attach a vote of the entity authorizing all requested transactions, including the appointment of a Manager of Record or principal representative.

3. TYPE OF LICENSE:

- \$15 Package Store

4. LICENSE CATEGORY:

- Wines & Malt Beverages

5. LICENSE CLASS:

- Annual

6. CONTACT PERSON CONCERNING THIS APPLICATION (ATTORNEY IF APPLICABLE)

NAME: David Leshowitz
ADDRESS: 11 Flynn Street
CITY/TOWN: Natick STATE: MA ZIP CODE: 01760
CONTACT PHONE NUMBER: FAX NUMBER:
EMAIL: david.leshowitz@craftbeercellar.com

7. DESCRIPTION OF PREMISES:

Please provide a complete description of the premises. Please note that this must be identical to the description on the Form 43. **Your description MUST include: number of floors, number of rooms on each floor, any outdoor areas to be included in licensed area, and total square footage.** i.e.: "Three story building, first floor to be licensed, 3 rooms, 1 entrance 2 exits (3200 sq ft); outdoor patio (1200 sq ft); Basement for storage (1200 sq ft). Total sq ft = 5600."

Premises located at 18 Thompson Street is 400 square feet of retail space and 165 square feet of storage space in the basement. Sales floor is approximately 20 feet by 20 feet. The only entrance to 18 Thompson Street is caddy-cornered, facing both Thompson Street and Winchester Terrace.

Total Square Footage: 400 Number of Entrances: 1 Number of Exits: 1
Occupancy Number: n/a Seating Capacity: n/a

IMPORTANT ATTACHMENTS (2): The applicant must attach a floor plan with dimensions and square footage for each floor & room.

8. OCCUPANCY OF PREMISES:

By what right does the applicant have possession and/or legal occupancy of the premises? Final Sub-Lease

IMPORTANT ATTACHMENTS (3): The applicant must submit a copy of the final lease or documents evidencing a legal right to occupy the premises.

Other:

Landlord is a(n): LLC Other:

Name: Craft Beer Initiative LLC Phone: 617.993.3214

Address: 51 Leonard Street City/Town: Belmont State: MA Zip: 02478

Initial Lease Term: Beginning Date 04.01.16 Ending Date 08.31.23

Renewal Term: 10 years Options/Extensions at: 5 years Years Each

Rent: \$21,995.16 Per Year Rent: 1832.93 Per Month

Do the terms of the lease or other arrangement require payments to the Landlord based on a percentage of the alcohol sales?
Yes No

If Yes, Landlord Entity must be listed in Question # 10 of this application.

If the principals of the applicant corporation or LLC have created a separate corporation or LLC to hold the real estate, the applicant must still provide a lease between the two entities.

9. LICENSE STRUCTURE:

The Applicant is a(n):

Other :

If the applicant is a Corporation or LLC, complete the following:

Date of Incorporation/Organization:

State of Incorporation/Organization:

Is the Corporation publicly traded? Yes No

10. INTERESTS IN THIS LICENSE:

List all individuals involved in the entity (e.g. corporate stockholders, directors, officers and LLC members and managers) and any person or entity with a direct or indirect, beneficial or financial interest in this license.

IMPORTANT ATTACHMENTS (4):

1. All individuals or entities listed below are required to complete a Personal Information Form.

3. All shareholders, LLC members or other individuals with any ownership in this license must complete a CORI Release Form (unless they are a landlord entity)

Name	All Titles and Positions	Specific % Owned	Other Beneficial Interest
David Leshowitz	President, Amberghini Inc	50%	
Amanda Leshowitz	VP, Amberghini Inc	50%	
Suzanne L. Schalow	Member, Craft Beer Stellar		2% Monthly Mgmt Fees
Kathryn L. Baker	Member, Craft Beer Stellar		2% Monthly Mgmt Fees
Marla E. Yarid - De La Cruz	Member, Craft Beer Stellar		2% Monthly Mgmt Fees

*If additional space is needed, please use last page.

11. EXISTING INTEREST IN OTHER LICENSES:

Does any individual listed in §10 have any direct or indirect, beneficial or financial interest in any other license to sell alcoholic beverages? Yes No If yes, list said interest below:

Name	License Type	Licensee Name & Address
Suzanne L. Schalow	<input type="text" value="\$15 Package Store"/> <input type="button" value="v"/>	Craft Beer Initiative, 51 Leonard St, Belmont, MA 02478; Craft Beer Stellar
Kathryn L. Baker	<input type="text" value="\$15 Package Store"/> <input type="button" value="v"/>	Craft Beer Initiative, 51 Leonard St, Belmont, MA 02478; Craft Beer Stellar
Marla E. Yarid - De La Cruz	<input type="text" value="\$15 Package Store"/> <input type="button" value="v"/>	Craft Beer Initiative, 51 Leonard St, Belmont, MA 02478; Craft Beer Stellar
	<input type="text" value="Please Select"/>	
	<input type="text" value="Please Select"/>	
	<input type="text" value="Please Select"/>	

*If additional space is needed, please use last page.

12. PREVIOUSLY HELD INTERESTS IN OTHER LICENSES:

Has any individual listed in §10 who has a direct or indirect beneficial interest in this license 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 said interest below:

Name	Licensee Name & Address	Date	Reason Terminated
Suzanne L. Schalow	Craft Beer Cellar Winchester, 18 Thompson Street, Winchester, MA 01890	06-13 - 11/14	Transferred <input type="button" value="v"/>
Kathryn L. Baker	Craft Beer Cellar Winchester, 18 Thompson Street, Winchester, MA	06/13 - 11/14	Transferred <input type="button" value="v"/>
			Please Select

13. DISCLOSURE OF LICENSE DISCIPLINARY ACTION:

Have any of the disclosed licenses to sell alcoholic beverages listed in §11 and/or §12 ever been suspended, revoked or cancelled? Yes No If yes, list said interest below:

Date	License	Reason of Suspension, Revocation or Cancellation

14. CITIZENSHIP AND RESIDENCY REQUIREMENTS FOR A (§15) PACKAGE STORE LICENSE ONLY :

A.) For Individual(s):

1. Are you a U.S. Citizen? Yes No
2. Are you a Massachusetts Residents? Yes No

B.) For Corporation(s) and LLC(s) :

1. Are all Directors/LLC Managers U.S. Citizens? Yes No
2. Are a majority of Directors/LLC Managers Massachusetts Residents? Yes No
3. Is the License Manager a U.S. Citizen? Yes No

C.) For Individual(s), Shareholder(s), Member(s), Director(s) and Officer(s):

1. Are all Individual(s), Shareholders, Members, Directors, LLC Managers and Officers involved at least twenty-one (21) years old? Yes No

15. CITIZENSHIP AND RESIDENCY REQUIREMENTS FOR (§12) RESTAURANT, HOTEL, CLUB, GENERAL ON PREMISE, TAVERN, VETERANS CLUB LICENSE ONLY:

A.) For Individual(s):

1. Are you a U.S. Citizen? Yes No

B.) For Corporation(s) and LLC(s) :

1. Are a majority of Directors/LLC Managers **NOT** U.S. Citizen(s)? Yes No
2. Is the License Manager or Principal Representative a U.S. Citizen? Yes No

C.) For Individual(s), Shareholder(s), Member(s), Director(s) and Officer(s):

1. Are all Individual(s), Shareholders, Members, Directors, LLC Managers and Officers involved at least twenty-one (21) years old? Yes No

16. COSTS ASSOCIATED WITH LICENSE TRANSACTION:

A. Purchase Price for Real Property:	\$30,000
B. Purchase Price for Business Assets:	\$0
C. Costs of Renovations/Construction:	\$0
D. Initial Start-Up Costs:	\$5,000
E. Purchase Price for Inventory:	\$10,000
F. Other: (Specify)	\$0
G: TOTAL COST	\$45,000
H. TOTAL CASH	\$45,000
I. TOTAL AMOUNT FINANCED	\$0

IMPORTANT ATTACHMENTS (5): Any individual, LLC, corporate entity, etc. providing funds of \$50,000 or greater towards this transaction, must provide proof of the source of said funds. Proof may consist of three consecutive months of bank statements with a minimum balance of the amount described, a letter from your financial institution stating there are sufficient funds to cover the amount described, loan documentation, or other documentation.

The amounts listed in subsections (H) and (I) must total the amount reflected in (G).

17. PROVIDE A DETAILED EXPLANATION OF THE FORM(S) AND SOURCE(S) OF FUNDING FOR THE COSTS IDENTIFIED ABOVE (INCLUDE LOANS, MORTGAGES, LINES OF CREDIT, NOTES, PERSONAL FUNDS, GIFTS):

The above costs will be paid in full via personal funds.

*If additional space is needed, please use last page.

18. LIST EACH LENDER AND LOAN AMOUNT(S) FROM WHICH "TOTAL AMOUNT FINANCED" NOTED IN SUB-SECTIONS 16(I) WILL DERIVE:

A.

Name	Dollar Amount	Type of Financing
n/a	n/a	n/a

*If additional space is needed, please use last page.

B. Does any individual or entity listed in §17 or §18 as a source of financing have a direct or indirect, beneficial or financial interest in this license or any other license(s) granted under Chapter 138? Yes No

If yes, please describe:

19. PLEDGE: (i.e. COLLATERAL FOR A LOAN)

A.) Is the applicant seeking approval to pledge the license? Yes No

1. If yes, to whom: n/a

2. Amount of Loan:

3. Interest Rate:

4. Length of Note:

5. Terms of Loan :

B.) If a corporation, is the applicant seeking approval to pledge any of the corporate stock? Yes No

1. If yes, to whom:

n/a

2. Number of Shares:

C.) Is the applicant pledging the inventory? Yes No

If yes, to whom:

n/a

IMPORTANT ATTACHMENTS (6): If you are applying for a pledge, submit the pledge agreement, the promissory note and a vote of the Corporation/LLC approving the pledge.

20. CONSTRUCTION OF PREMISES:

Are the premises being remodeled, redecorated or constructed in any way? If YES, please provide a description of the work being performed on the premises: Yes No

21. ANTICIPATED OPENING DATE: Currently Open & Operating

IF ALL OF THE INFORMATION AND
ATTACHMENTS ARE NOT COMPLETE
THE APPLICATION WILL BE
RETURNED

CORPORATE VOTE FORM

DATE: 06.24.16

At a meeting of the Board of Directors of (name of Corporation),
Mike Fidler Inc, held at
(address of meeting) 11 Newton Road, Arlington, MA 02474, on
(date of meeting) 06.01.16, it was duly voted that the Corporation apply to the Licensing

Board for the City of Boston for (insert action/matter/license being applied for):
(Town of Winchester and State of MA): Transfer of Liquor License of Craft Beer Cellar, 18 Thompson Street, Winchester, MA 01890 to Ambergheni, Inc.

The Directors:

"VOTED: To authorize (name of person) David Leshowitz
to sign the application submitted in the name of (name of Corporation) _____
Ambergheni, Inc, and to execute in the Corporation's behalf, any
necessary papers and do all things required to have the application granted."

"VOTED: To appoint (name of person) David Leshowitz
of (name of business/Corporation) Ambergheni, Inc as its
manager or principal representative, and hereby grant him/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."

"VOTED: That a copy of this vote duly certified by the Clerk of the Corporation and delivered to the manager
appointed, or principal representative, shall constitute the written authority required by G. L. c. 138, § 26."

It is hereby certified that all the Directors of (name of Corporation),
Mike Fidler, Inc, a Corporation
duly organized under the laws of the Commonwealth of Massachusetts, are citizens of the United States and a majority are
residents of the Commonwealth of Massachusetts.

This Corporation has (insert "not," if applicable) not been dissolved.

A true copy attest,



Corporation Clerk's signature

Amberghini, Inc.

CERTIFICATE OF CORPORATE VOTE

This document certifies that on January 31, 2016, a special meeting of the Board of Directors of Amberghini, Inc., was held at the 11 Flynn St, Natick, MA 01760. All members of the Corporation's board of directors being present and voting, it was unanimously voted to appoint the following as board members:

President: David Leshowitz 11 Flynn St, Natick, Ma 01760

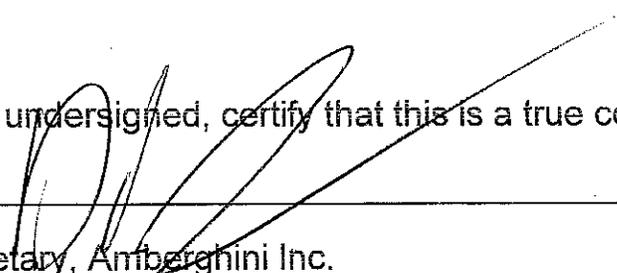
Treasurer: David Leshowitz 11 Flynn St, Natick, Ma 01760

Secretary: David Leshowitz 11 Flynn St, Natick, Ma 01760

Director: David Leshowitz 11 Flynn St, Natick, Ma 01760

Furthermore, the Board of Directors appoint David Leshowitz with the powers and authority to enter into legal contracts on behalf of the Amberghni, Inc.

I, the undersigned, certify that this is a true copy.


Secretary, Amberghini Inc.



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street
 Boston, MA 02114
 www.mass.gov/abcc

MANAGER APPLICATION

All proposed managers are required to complete a Personal Information Form, and attach a copy of the corporate vote authorizing this action and appointing a manager.

1. LICENSEE INFORMATION:

Legal Name of Licensee: Business Name (dba):

Address:

City/Town: State: Zip Code:

ABCC License Number: Phone Number of Premise:
 (If existing licensee)

2. MANAGER INFORMATION:

A. Name: B. Cell Phone Number:

C. List the number of hours per week you will spend on the licensed premises:

3. CITIZENSHIP INFORMATION:

A. Are you a U.S. Citizen: Yes No B. Date of Naturalization: C. Court of Naturalization:

(Submit proof of citizenship and/or naturalization such as US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers)

4. BACKGROUND INFORMATION:

A. Do you now, or have you ever, held any direct or indirect, beneficial or financial interest in a license to sell alcoholic beverages? Yes No

If yes, please describe:

B. Have you ever been the Manager of Record of a license to sell alcoholic beverages that has been suspended, revoked or cancelled? Yes No

If yes, please describe:

C. Have you ever been the Manager of Record of a license that was issued by this Commission? Yes No

If yes, please describe:

D. List your employment for the past ten years (Dates, Position, Employer, Address and Telephone):

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

Signature Date



The Commonwealth of Massachusetts
 Alcoholic Beverages Control Commission
 239 Causeway Street
 Boston, MA 02114
 www.mass.gov/abcc

PERSONAL INFORMATION FORM

Each individual listed in Section 10 of this application must complete this form.

1. LICENSEE INFORMATION:

A. Legal Name of Licensee	Amberghini Inc	B. Business Name (dba)	Craft Beer Cellar Winchester
C. Address	18 Thompson Street	D. ABCC License Number (If existing licensee)	2152
E. City/Town	Winchester	State	MA Zip Code 01890
F. Phone Number of Premise	781.369.1174	G. EIN of License	81-1140390

2. PERSONAL INFORMATION:

A. Individual Name	David Leshowitz	B. Home Phone Number	
C. Address	11 Flynn Street		
D. City/Town	Natick	State	MA Zip Code 01760
E. Social Security Number		F. Date of Birth	01.09.76
G. Place of Employment	Management Recruiters Inc, The Boston Group		

3. BACKGROUND INFORMATION:

Have you ever been convicted of a state, federal or military crime? Yes No

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

4. FINANCIAL INTEREST:

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license (i.e. percentage ownership).

My wife & I are 100% owners of Craft Beer Cellar Winchester.

*If additional space is needed, please use the last page

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

Signature		Date	04.26.16
Title	President, Amberghini Inc	(If Corporation/LLC Representative)	



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 Alcoholic Beverages Control Commission
 239 Causeway Street
 Boston, MA 02114
www.mass.gov/abcc

PERSONAL INFORMATION FORM

Each individual listed in Section 10 of this application must complete this form.

1. LICENSEE INFORMATION:

A. Legal Name of Licensee	Craft Beer Initiative LLC	B. Business Name (dba)	Craft Beer Cellar Belmont
C. Address	51 Leonard Street	D. ABCC License Number (If existing licensee)	008800019
E. City/Town	Belmont	State	MA
		Zip Code	02478
F. Phone Number of Premise	617.932.1885	G. EIN of License	27-2685563

2. PERSONAL INFORMATION:

A. Individual Name	Marla E. Yarid - De La Cruz	B. Home Phone Number	
C. Address	517 Prospect Street		
D. City/Town	Methuen	State	MA
		Zip Code	01844
E. Social Security Number		F. Date of Birth	01.06.76
G. Place of Employment	Craft Beer Initiative LLC & Craft Beer Stellar; 33.3% Member		

3. BACKGROUND INFORMATION:



Have you ever been convicted of a state, federal or military crime? Yes No

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

4. FINANCIAL INTEREST:

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license.

I am a 33.3% Member of both Craft Beer Initiative LLC and Craft Beer Stellar LLC (Franchise Company)

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

Signature		Date	04.26.16
Title	Member	(If Corporation/LLC Representative)	



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PERSONAL INFORMATION FORM

Each individual listed in Section 10 of this application must complete this form.

1. LICENSEE INFORMATION:

A. Legal Name of Licensee	Craft Beer Initiative LLC	B. Business Name (dba)	Craft Beer Cellar Belmont
C. Address	51 Leonard Street	D. ABCC License Number (If existing licensee)	008800019
E. City/Town	Belmont	State	MA Zip Code 02478
F. Phone Number of Premise	617.932.1885	G. EIN of License	27-2685563

2. PERSONAL INFORMATION:

A. Individual Name	Suzanne L. Schalow	B. Home Phone Number	
C. Address	80 Fawcett Street, Unit 153		
D. City/Town	Cambridge	State	MA Zip Code 02138
E. Social Security Number		F. Date of Birth	12.18.69
G. Place of Employment	Craft Beer Initiative LLC & Craft Beer Stellar; 33.3% Member		

3. BACKGROUND INFORMATION:



Have you ever been convicted of a state, federal or military crime? Yes No

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

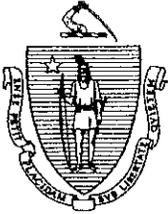
4. FINANCIAL INTEREST:

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license.

I am a 33.3% Member of both Craft Beer Initiative LLC and Craft Beer Stellar LLC (Franchise Company)

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

Signature		Date	04.26.16
Title	Member	(If Corporation/LLC Representative)	



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PERSONAL INFORMATION FORM

Each individual listed in Section 10 of this application must complete this form.

1. LICENSEE INFORMATION:

A. Legal Name of Licensee	Craft Beer Initiative LLC	B. Business Name (dba)	Craft Beer Cellar Belmont
C. Address	51 Leonard Street	D. ABCC License Number (If existing licensee)	008800019
E. City/Town	Belmont	State	MA Zip Code 02478
F. Phone Number of Premise	617.932.1885	G. EIN of License	27-2685563

2. PERSONAL INFORMATION:

A. Individual Name	Kathryn L. Baker	B. Home Phone Number	
C. Address	80 Fawcett Street, Unit 153		
D. City/Town	Cambridge	State	MA Zip Code 02138
E. Social Security Number		F. Date of Birth	12.13.68
G. Place of Employment	Craft Beer Initiative LLC & Craft Beer Stellar; 33.3% Member		

3. BACKGROUND INFORMATION:



Have you ever been convicted of a state, federal or military crime? Yes No

If yes, as part of the application process, the individual must attach an affidavit as to any and all convictions. The affidavit must include the city and state where the charges occurred as well as the disposition of the convictions.

4. FINANCIAL INTEREST:

Provide a detailed description of your direct or indirect, beneficial or financial interest in this license.

I am a 33.3% Member of both Craft Beer Initiative LLC and Craft Beer Stellar LLC (Franchise Company)

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

Signature		Date	04.26.16
Title	Member	(If Corporation/LLC Representative)	



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PETITION FOR TRANSFER OF OWNERSHIP

2152
 ABCC License Number

Winchester
 City/Town

The licensee Mike Fidler Inc and the proposed transferee Amberghen Inc respectfully petition the Licensing Authorities to approve the following transfer of ownership.

Is the PRESENT licensee a Corporation/LLC duly registered under the laws of the Commonwealth of Massachusetts?
 Yes No If YES, please list the officers, directors and stockholders, their residences, and shares owned by each.

Name	Title	Address	Stock or % Owned
David Leshowitz	President	11 Newton Road, Arlington, MA 02474	100%

Is the PROPOSED transferee a Corporation/LLC, duly registered under the laws of the Commonwealth of Massachusetts?
 Yes No If YES, please list the officers, directors and stockholders, their residences, and shares owned by each.

TO: (Place an * before the name of each DIRECTOR/LLC Manager.)

Name	Title	Address	Stock or % Owned
David Leshowitz	President	11 Flynn Street, Natlck, MA 01760	50%
Amanda Leshowitz	Vice President	11 Flynn Street, Natlck, MA 01760	50%

The above named proposed transferee hereby joins in this petition for transfer of said license.

SIGNATURE OF LAST-APPROVED LICENSEE: [Signature]
 (If a Corporation/LLC, by its authorized representative)

Date Signed 06.24.16

SIGNATURE OF PROPOSED TRANSFEREE: [Signature]

APPLICANT'S STATEMENT

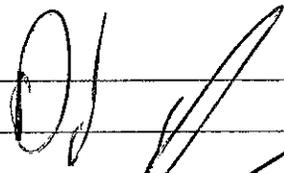
I, David Leshowitz the: sole proprietor; partner; corporate principal; LLC/LLP member
Authorized Signatory

of Amberghini Inc, hereby submit this application for Wines & Malt Beverage License Transfer
Name of the Entity/Corporation Transaction(s) you are applying for

(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 statement 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 does not violate any requirement of the ABCC or other state law or local ordinances;
- (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 Application information 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.

Signature: 
Title: President, Amberghini Inc

Date: 04.26.16

AFFIDAVIT OF NOTICE OF MAILING TO ABUTTER AND OTHERS

To the Licensing Board

For the

Date

I, hereby certify that the following is a true list of the persons shown upon the Assessor's most recent valuation list as the owners of the property abutting the proposed location for an alcoholic beverages license at:

And that the following schools, churches or hospitals are located within the radius of five hundred (500) feet from said proposed location:

If there are none, please so state:

I also certify that the notice of this application/petition concerning an alcoholic beverages license was given to the above by mailing to each of them within three (3) days after publication of same, a copy of the advertisement is attached below. Also attached are the registered receipts/return registered receipts bearing signatures of persons receiving said notice.

Signed and subscribed to under the penalties of perjuries:

Printed: _____

Written: _____

Date:

Notary Public: _____

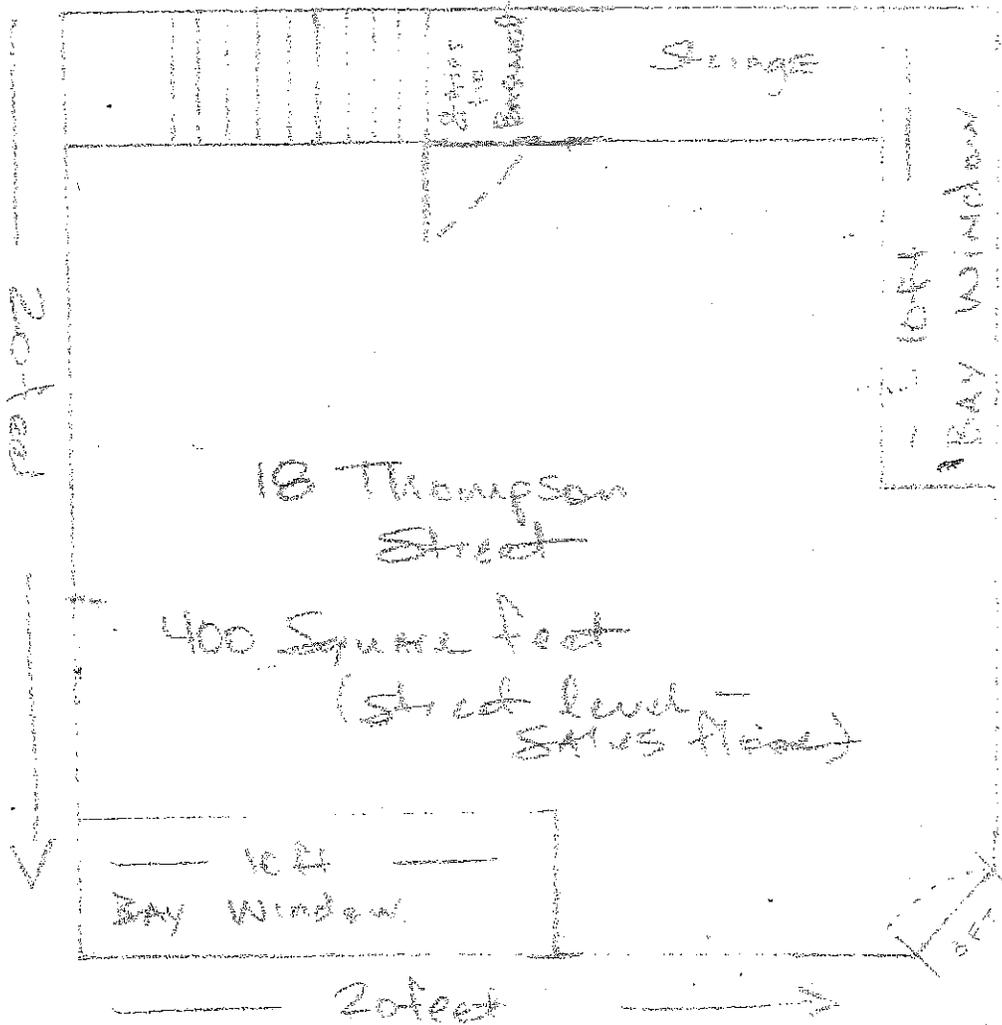
My Commission Expires: _____

Please Attach Advertisement and Receipts

Additional Space

Please note which question you are using this space for.

A large, empty rectangular box with a thin black border, occupying most of the page below the text. It is intended for students to provide additional space for their answers, with the instruction to note which question they are using it for.



Craft Beer Cellar

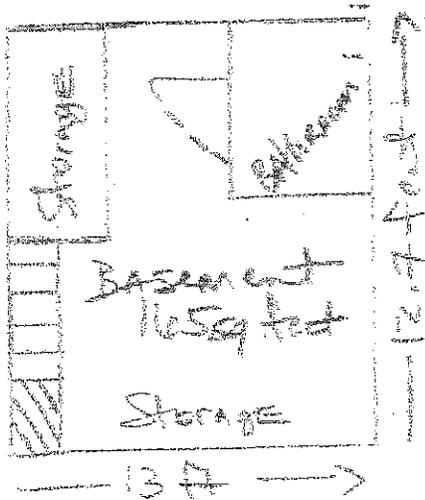
18 Thompson Street

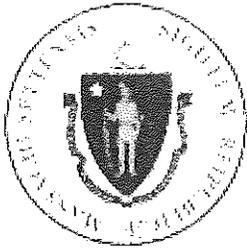
Winchester, MA

01890

1st Floor — 400 Sq feet

Basement — 165 Sq feet





**The Commonwealth of Massachusetts
William Francis Galvin**

Minimum Fee: \$250.00

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

Articles of Organization

(General Laws, Chapter 156D, Section 2.02; 950 CMR 113.16)

Identification Number: 001207228

ARTICLE I

The exact name of the corporation is:

AMBERGHINI INC

ARTICLE II

Unless the articles of organization otherwise provide, all corporations formed pursuant to G.L. C156D have the purpose of engaging in any lawful business. Please specify if you want a more limited purpose:

ARTICLE III

State the total number of shares and par value, if any, of each class of stock that the corporation is authorized to issue. All corporations must authorize stock. If only one class or series is authorized, it is not necessary to specify any particular designation.

Class of Stock	Par Value Per Share Enter 0 if no Par	Total Authorized by Articles of Organization or Amendments		Total Issued and Outstanding
		Num of Shares	Total Par Value	Num of Shares
CNP	\$0.00000	100,000	\$0.00	100,000

G.L. C156D eliminates the concept of par value, however a corporation may specify par value in Article III. See G.L. C156D Section 6.21 and the comments thereto.

ARTICLE IV

If more than one class of stock is authorized, state a distinguishing designation for each class. Prior to the issuance of any shares of a class, if shares of another class are outstanding, the Business Entity must provide a description of the preferences, voting powers, qualifications, and special or relative rights or privileges of that class and of each other class of which shares are outstanding and of each series then established within any class.

ARTICLE V

The restrictions, if any, imposed by the Articles of Organization upon the transfer of shares of stock of any class are:

THERE ARE NO RESTRICTIONS.

ARTICLE VI

Other lawful provisions, and if there are no provisions, this article may be left blank.

Note: The preceding six (6) articles are considered to be permanent and may be changed only by filing appropriate articles of amendment.

ARTICLE VII

The effective date of organization and time the articles were received for filing if the articles are not rejected within the time prescribed by law. If a later effective date is desired, specify such date, which may not be later than the 90th day after the articles are received for filing.

Later Effective Date: Time:

ARTICLE VIII

The information contained in Article VIII is not a permanent part of the Articles of Organization.

a,b. The street address of the initial registered office of the corporation in the commonwealth and the name of the initial registered agent at the registered office:

Name: DAVID RHEE
No. and Street: 47 ELIOT ST
City or Town: NATICK State: MA Zip: 01760 Country: USA

c. The names and street addresses of the individuals who will serve as the initial directors, president, treasurer and secretary of the corporation (an address need not be specified if the business address of the officer or director is the same as the principal office location):

Title	Individual Name	Address (no PO Box)
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code
PRESIDENT	DAVID LESHOWITZ	11 FLYNN ST NATICK, MA 01760 USA
TREASURER	DAVID LESHOWITZ	11 FLYNN ST NATICK, MA 01760 USA
SECRETARY	DAVID LESHOWITZ	11 FLYNN ST NATICK, MA 01760 USA
DIRECTOR	DAVID LESHOWITZ	11 FLYNN ST NATICK, MA 01760 USA

d. The fiscal year end (i.e., tax year) of the corporation:
December

e. A brief description of the type of business in which the corporation intends to engage:

OPERATION OF RETAIL STORES

f. The street address (post office boxes are not acceptable) of the principal office of the corporation:

No. and Street: 11 FLYNN ST
City or Town: NATICK State: MA Zip: 01760 Country: USA

g. Street address where the records of the corporation required to be kept in the Commonwealth are located (post office boxes are not acceptable):

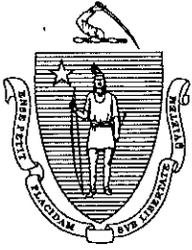
No. and Street: 11 FLYNN ST
City or Town: NATICK State: MA Zip: 01760 Country: USA

which is

its principal office
 an office of its secretary/assistant secretary
 an office of its transfer agent
 its registered office

Signed this 26 Day of January, 2016 at 4:15:42 PM by the incorporator(s). *(If an existing corporation is acting as incorporator, type in the exact name of the business entity, the state or other jurisdiction where it was incorporated, the name of the person signing on behalf of said business entity and the title he/she holds or other authority by which such action is taken.)*

DRL P PIPER INC., A MASSACHUSETTS CORPORATION. DAVID LESHOWITZ, PRESIDENT



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

April 6, 2016

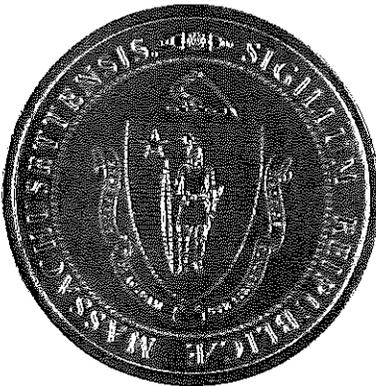
TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

AMBERGHINI INC

is a domestic corporation organized on **January 26, 2016**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth



MASSACHUSETTS DEPARTMENT OF REVENUE
PO BOX 7044
BOSTON, MA 02204
CONTACT CENTER
(617) 887-6367

Letter ID: L1444382720
Notice Date: February 25, 2016
Case ID: 0-000-114-100

CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



MIKE FIDLER INCORPORATED
18 THOMPSON ST
WINCHESTER MA 01890-2904

Why did you receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, MIKE FIDLER INCORPORATED is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

Where can you find additional information?

Visit our website at mass.gov/dor for one-stop access to taxpayer information. You can learn more about state tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights and the appeals process.

You can file your returns, make payments and manage your account at mass.gov/masstaxconnect. You may also contact us by phone at (617) 887-6367 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 9:00 a.m. to 5:00 p.m.

Charlene Hannaford
Acting Deputy Commissioner

PURCHASE AGREEMENT

Craft Beer Cellar

18 Thompson St, Winchester, MA 01890
(781) 369-1174

Date: January 14th, 2016

Page: 1 of 3

1. This is an Offer from **DRL P. PIPER INC.** (Purchaser) to purchase certain assets of the business commonly known as Craft Beer Cellar located at 18 Thompson Street, Winchester, MA 01890.

2. Purchased Assets.
 - 2.1 Purchaser shall purchase from Seller and Seller shall sell to Purchaser all of the tangible assets owned and used by Seller (the "Assets"), free and clear of all liens, judgments and encumbrances whatsoever, including, furniture, fixtures and equipment (Exhibit A), leasehold rights, supplies, customer lists and those assets set forth on Exhibit A attached hereto (the "Assets").
 - 2.2 The Assets shall not include the following: cash, deposits, marketable securities, and other similar Investments.
 - 2.3 Purchaser shall assume responsibility for paying distributors for all inventory which has been financed by the distributor(s), which varies, depending on weekly purchases and payments.

3. Purchase Price.
 - 3.1 The total purchase price to be paid for the Assets is **\$30,000** (the "Purchase Price")
 - 3.2 Franchise Transfer Fee of \$4,000 will be split between purchaser and seller.

5. Conditions of Sale:
 - a. This Agreement is contingent upon Purchaser attaining approval to operate a Craft Beer Cellar franchise from franchisor, which has been given at the time of this Agreement.
 - b. This Agreement is contingent upon Purchaser signing a sublease assignment for the property as 18 Thompson Street in Winchester, MA.
 - c. This Agreement is contingent upon Purchaser obtaining a transfer of / a new liquor license to operate the subject business. Purchaser shall apply for liquor license and pay all expenses relative to issuance of such license within thirty (30) days of acceptance of this Agreement, and do so with intent to be awarded the license. Application is

P.I.
S.I.

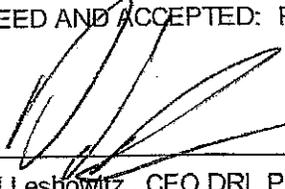
attached. The business will remain in Mike Fidler's possession and daily business responsibility, until David Leshowitz has legal right to operate an establishment with an Alcohol License. If for some unforeseen reason David is not allowed this privilege, all monies will be refunded (within 7 days) and Purchase Agreement becomes null and void.

6. Seller warrants that at the time physical possession is delivered to Purchaser, all equipment will be in working order and that the premises will pass all inspections necessary to conduct such business.
7. This agreement, and any other exhibits and / or addenda attached hereto and signed by the parties, constitutes the entire agreement; there are no oral understandings or representations being relied upon by the parties. Any modifications must be in writing and signed by the parties to this Agreement.
8. From and after the date of this Purchase Agreement, Seller will conduct and operate its business only in the ordinary course consistent with past practices so as to protect such business and to maintain the goodwill it now enjoys, and will use all reasonable efforts to keep available its present employees and its relationship with suppliers, customers, etc.

Purchaser And Seller Individually Acknowledge Receipt Of A Copy Of This Agreement. This Is A Legally Binding Document, Read It Carefully.

AGREED AND ACCEPTED: PURCHASER

X



David Leshowitz, CEO DRL P.PIPER INC.

DATE: 1/14/16, 2016

AGREED AND ACCEPTED: SELLER

X



Mike Fidler INC

DATE: 1-14-16, 2016

P.I. 

S.I. 

EXHIBIT A

**Equipment Inventory List
Décor List
Misc**

Shelving

Shelving Units for Storage (Basement)

Outdoor Sign

TV

Service Counter

Cooler

Two Refrigeration Units

Drop Safe

Alarm Equipment & Keypad

Telephone(s)

Sound System

Brother Print/Fax/Copy/Scan

Dell Computer (and all its hardware & software components)

Mats, Stool, Ladder, and Flag Pole

All Offices Supplies

(including label maker, tape, tape dispenser, tape gun for packing, stapler, pens, markers, etc)

All Paper Supplies (including bags, tissue paper for wrapping, paper towels, etc)

All Cleaning Supplies

All Decorative Beer Signs, Brewery Racks, etc

Customer Lists

Assignment of Craft Beer Cellar Franchise Agreement

This Assignment of the Craft Beer Cellar Franchise Agreement ("Assignment") is made this 21st day of January 2016 by and between Mike Fidler Inc and Amberghini Inc.

Whereas, on August 12th, 2013, Mike Fidler Inc entered into a Franchise Agreement ("Franchise Agreement") with Craft Beer Stellar, LLC.

Whereas, Mike Fidler Inc desires to assign their right, title and interest in and to the Franchise Agreement to Amberghini Inc.

Therefore, Mike Fidler Inc hereby assigns Amberghini Inc all right, title and interest in and to the Franchise Agreement, and Amberghini Inc hereby assumes all responsibilities of Mike Fidler Inc under the Franchise Agreement.

Dated this 21st day of January, 2016

Mike Fidler Inc

Mike Fidler

Amberghini Inc

[Signature] 1/21/16

Craft Beer Stellar, LLC

[Signature]
Sharon Schalow
Managing Member
01. 21. 16

Sublease Form

This is an agreement to sublet real property according to the terms specified below.

The sublessor agrees to sublet and the subtenant agrees to take the premises described below. Both parties agree to keep, perform, and fulfill the promises, conditions and agreements expressed below.

- The sublessor is (who is moving out) Craft Beer Initiative LLC
- The subtenant is (who is moving in) Ambrogini INC
- The location of the premises is (address) 18 Thompson St, Winchester, MA 01890
- The term of this sublease is (in months) 89 beginning (month/day/year) 01 April, 2016 and ending (month/day/year) 31 August, 2023
- The rent is \$ _____ per month, payable in advance on the 1st day of the month, payable to Craft Beer Initiative LLC at address 51 Leonard Street, Belmont, MA 02478
- The sublease agreement will terminate on (month/day/year) 08 / 31 / 2023. There shall be no holding over under the terms of this sublease agreement under any circumstances.
- All charges for utilities connected with premises which are to be paid by the sublessor under the master lease shall be paid by the subtenant for the term of this sublease.
- Subtenant agrees to surrender and deliver to the sublessor the premises in as good of condition as they were at the beginning of the term, reasonable wear and tear excepted. The subtenant will be liable to the sublessor for any damages occurring to the premises or the contents thereof or to the building which are done by the sublessee or his/her guests.
- Subtenant agrees to pay to sublessor a deposit of \$ 0 to cover damages beyond normal wear and tear, unpaid rent, and unpaid utilities. Sublessor agrees that if the premises and contents thereof are returned to him/her in the same condition as when received by the subtenant, reasonable wear and tear thereof excepted, and if there is no unpaid rent or unpaid utility bills owed by subtenant, she will refund to the subtenant \$ 0 at the end of the term, or within 30 days thereafter. Any reason for retaining a portion of the deposit shall be explained in writing within 30 days to the subtenant.
- The sublessor will provide the subtenant with a check-in sheet within three (3) days after the time the sublessee takes possession of the unit/premises.
- The sublease agreement incorporates and is subject to the original lease agreement between the sublessor and his lessor, a copy of which is attached hereto, and which is hereby referred to and incorporated as if it were set out here at length. The subtenant agrees to assume all of the obligations and responsibilities of the sublessor under the original lease for the duration of the sublease agreement.
- The words "sublessor" and "subtenant" as used herein include the plural as well as the singular, no regard for gender is intended by the language of this sublease.

Base
KCF
ORC

- Other terms and conditions All inclusive rent: \$1832.93 (including NAW's and heat). Rental payment increases by 3% each year on the 1st of July. (Triple Net Expenses 100% per the terms of the lease)
- This lease constitutes the sole agreement between the parties and no additions, deletions, or modifications may be accomplished without the written consent of both parties. (Any oral representations made at the time of executing this lease are not legally valid, and therefore, are not binding upon either party.)
- If the subtenant is under 18 years of age, then his/her legal guardian or parent guardian and agrees to perform all of the terms, covenants and conditions of this sublease by affixing his/her signature.
- Each party signing this sublease acknowledges receipt of a copy thereof.
- This sublease is not binding upon either party unless approved by the landlord as provided below, provided such approval is required by the original lease.

4
ORC
KCF

The parties hereby bind themselves to this agreement by their signatures affixed below on this 23rd day of January, 20 16.

Sublessor(s)
[Signature]
Sumner S. Sultow
Managing Member

Subtenant(s)
[Signature]
David Leshowitz
Ankerberg Inc.

(Parent or guardian for subtenant under 18 years of age.)

I hereby give my consent as landlord to subletting of the above described premises as set out in this sublease agreement.

Locatelli's Winchester Realty Trust

Landlord or agent [Signature] Date 3/22/16

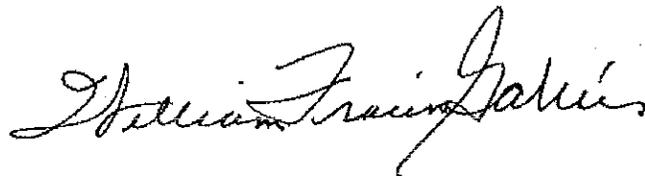
Original Lease Attached	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Inventory Check List Attached	<input type="checkbox"/> YES	<input type="checkbox"/> NO

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:

January 26, 2016 04:13 PM

A handwritten signature in cursive script, reading "William Francis Galvin".

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth



**TOWN OF WINCHESTER
BOARD OF SELECTMEN - GENERAL LICENSE APPLICATION**

This is a general application for a license that the Board of Selectmen may grant. All license applications to the Winchester Board of Selectmen must be accompanied by the following information.

Indicate if license is: New ___ Transfer X Change of d/b/a ___ Other _____

List type of license(s) applying for:

- | | |
|--|---|
| <input type="checkbox"/> Common Victualler _____ | <input type="checkbox"/> Food Vendor _____ |
| <input checked="" type="checkbox"/> Package Store All Alcohol _____ | <input checked="" type="checkbox"/> Package Store Wine & Malt _____ |
| <input type="checkbox"/> Restaurant All Alcohol (100 seats) _____ | <input type="checkbox"/> Restaurant All Alcohol (70 seats) _____ |
| <input type="checkbox"/> Restaurant Wine & Malt _____ | <input type="checkbox"/> Club All Alcohol _____ |
| <input type="checkbox"/> Class I Auto Sales: _____ | <input type="checkbox"/> Class II Auto Sales: _____ |
| <input type="checkbox"/> Vehicle for Hire/Taxi No of Vehicles: _____ | <input type="checkbox"/> Fortune Teller _____ |
| <input type="checkbox"/> Annual Entertainment _____ | <input type="checkbox"/> Automatic Amusement _____ |

Business Name (legal): Amborghini INC dba: CRAFT BEER CELLAR Winchester

Please attach copy of business certificate if applying as dba or individual. If business is a corporation or LLC, please attach:

1. Certificate of Good Standing from the Secretary of State's Office.
2. Corporate Vote authorizing business at the location.

Address of licensed premises (include zip code): 18 Thompson Street

Mailing address (if different than above address): _____

Name of individual/applicant authorized to apply for license: David Leshowitz

Business tel. no. of applicant: 781.369.1174 Business email: David.Leshowitz@craftbeer cellar.com

F.E.I.N. (F.I.N.) 81-1140390

Please check one of the following: own premises lease premises property under P&S

Name and address of property owner if different from license holder:

Loctelli Properties, 67 Leonard Street, Belmont, MA 02478
Name _____ Address _____

If applicable, please attach copy of lease and/or Purchase and Sales Agreement.

Do you currently hold a similar license? No What type? _____

Have you previously applied for a license? (Yes) _____ (No) X

Town of Winchester General Application

Have you ever had a license revoked? (Yes) _____ (No) X If yes, please indicate why:

If there is a building or structure associated with the license, please submit the following (preferably on 8 1/2 x 11" paper - no larger than 8 1/2 x 14"):

- 1. Floor plan (include seating area), and
- 2. Site plan indicating parking areas and access to Town ways.

If applying for a Class I or Class II license, please submit a plot plan that shows:

- 1. The number of the vehicles on display
- 2. The exact location of the vehicles
- 3. Customer parking
- 4. Office area

Proposed hours of operation:

Monday 11-8 Tuesday 11-8 Wednesday 11-8
 Thursday 11-8 Friday 11-9
 Saturday 10-9 Sunday 12-6

Has the applicant operated a similar business? (if applicable) no

Name of Business: _____
 Address: _____
 Federal Tax No. (if applicable): _____

I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state and local taxes required by law.

Date: Oct. 23. 14 Signature: [Signature]

I certify that I have read through the conditions included with this license and agree to comply with any further stipulations that the Licensing Authority may from time to time approve. I also hereby authorize the Licensing Authority or their agent to conduct whatever investigation or inquiry is necessary to verify the information contained in this application.

Date: Oct. 23. 14 Signature: [Signature]

Please contact the Selectmen's Office at 781-721-7133 if you have any questions regarding this application form.

THE COMMONWEALTH OF MASSACHUSETTS

of
APPLICATION FOR LICENSE
(GENERAL)

No. _____

TO THE LICENSING AUTHORITIES:

The undersigned hereby applies for a License in accordance with the provisions of the Statutes relating thereto

Amberghini Inc, dba Craft Beer Cellar Winchester,
18 Thompson Street, Winchester, MA 01890
(Full name of person, firm or corporation making application)

STATE CLEARLY
PURPOSE FOR
WHICH LICENSE
IS REQUESTED

To Transfer of Wine + Matt Beverage
Section 15 License from Mike Fidler Inc
to AMBERGHINI INC

GIVE LOCATION
BY STREET
AND NUMBER

At 18 Thompson Street, Winchester, MA 01890

in said City of Winchester
Town

in accordance with the rules and regulations made under authority of said Statutes.

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

+ [Signature]
Signature of Individual
or Corporate Name (Mandatory)

+ [Signature]
By: Corporate Officer
(Mandatory, if Applicable)

81-140390
** Social Security #
or Federal Identification Number

* This license will not be issued unless this certification clause is signed by the applicant.

** Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c. 62C s. 49A.

Received _____

Signature of Applicant

Hour A.M. _____

Address _____

P.M. _____

Approved _____

License Granted _____

Cafarella, Jennifer

From: Tracy, Sheila
Sent: Wednesday, June 29, 2016 8:37 AM
To: Cafarella, Jennifer
Subject: RE: Change of ownership - Craft Beer Cellars

Jenn,
There is nothing owed on this business
Sheila

-----Original Message-----

From: Cafarella, Jennifer
Sent: Tuesday, June 28, 2016 12:04 PM
To: pmacdonnell@winchesterpd.org; Wile, John; Tracy, Sheila
Subject: Change of ownership - Craft Beer Cellars

All,

Attached is an application for the new owner of Craft Beer Cellars. Please review and send your comments to me. I plan on having them on the Selectmen's docket on July 25th.

Thank you,
Jenn

Cafarella, Jennifer

From: Wile, John
Sent: Tuesday, June 28, 2016 1:26 PM
To: Cafarella, Jennifer; pmacdonnell@winchesterpd.org; Tracy, Sheila
Subject: RE: Change of ownership - Craft Beer Cellars

I have no issues with his. Al

-----Original Message-----

From: Cafarella, Jennifer
Sent: Tuesday, June 28, 2016 12:04 PM
To: pmacdonnell@winchesterpd.org; Wile, John <jwile@winchester.us>; Tracy, Sheila <stracy@winchester.us>
Subject: Change of ownership - Craft Beer Cellars

All,

Attached is an application for the new owner of Craft Beer Cellars. Please review and send your comments to me. I plan on having them on the Selectmen's docket on July 25th.

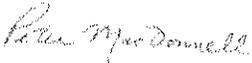
Thank you,
Jenn

Cafarella, Jennifer

From: Barbara Bosco <bbosco@winchesterpd.org>
Sent: Tuesday, August 23, 2016 1:21 PM
To: Cafarella, Jennifer
Cc: Peter MacDonnell; Barbara Bosco
Subject: FW: Change of ownership - Craft Beer Cellars
Attachments: 201606281213.pdf

August 23, 2016

The Winchester Police Department has no objection with the requested transfer of package store license from Michael Fiddler at the Craft beer Cellar at 18 Thompson Street to David Leshowitz.



Peter MacDonnell
Chief of Police

-----Original Message-----

From: Cafarella, Jennifer [mailto:jcafarella@winchester.us]
Sent: Tuesday, August 23, 2016 9:21 AM
To: Peter MacDonnell
Cc: Barbara Bosco
Subject: FW: Change of ownership - Craft Beer Cellars

Chief,

Can I please have your comments? They are going before the Board on Monday night.

Thanks -
Jenn

-----Original Message-----

From: Cafarella, Jennifer
Sent: Tuesday, June 28, 2016 12:04 PM
To: pmacdonnell@winchesterpd.org; Wile, John; Tracy, Sheila
Subject: Change of ownership - Craft Beer Cellars

All,

Attached is an application for the new owner of Craft Beer Cellars. Please review and send your comments to me. I plan on having them on the Selectmen's docket on July 25th.

Thank you,