



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission

☐ For Reconsideration

LOCAL LICENSING AUTHORITY REVIEW RECORD

2018:00028-RS-0768

Natick

April 6, 2018

ABCC License Number

City/Town

Date Filed with LLA

TRANSACTION TYPE (Please check all relevant transactions):

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

APPLICANT INFORMATION

Name of Licensee Z2, LLC

D/B/A Zaftig's Delicatessen

ADDRESS: 1298 Worcester Road

CITY/TOWN: Natick

STATE

MA

ZIP CODE 01760

Manager Amy Gilligan

Granted under Special Legislation? Yes ☐ No ☒

\$12 Restaurant

Annual

All Alcoholic Beverages

If Yes, Chapter
of the Acts of (year)

Type

(i.e. restaurant, package store)

Class

(Annual or Seasonal)

Category

(i.e. Wines and Malts / All Alcohol)

LOCAL LICENSING AUTHORITY DECISION

Please indicate the decision of the
Local Licensing Authority:

Approves this Application

Please indicate what days and hours
the licensee will sell alcohol:

10:00 am - midnight,
Sunday-Saturday

If Approving With Modifications, please indicate below what changes the LLA is making:

Please indicate if the LLA is
downgrading the License
Category (approving only Wines
and Malts if applicant applied for All
Alcohol):

Changes to the Premises Description

Patio/Deck/Outdoor Area

Total Square Footage

Seating Capacity

Indoor Area

Total Square Footage

Number of Entrances

Number of Exits

Floor Number	Square Footage	Number of Rooms

Abutters Notified: Yes ☐ No ☒

Date of Abutter
Notification

Date of
Advertisement

Please add any
additional remarks or
conditions here:

☒ Check here if you are attaching additional documentation

The Local Licensing Authorities By:

Alcoholic Beverages Control Commission
Ralph Sacramone
Executive Director

April 17, 2018

Date APPROVED by LLA



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

BOARD OF SELECTMEN
NATICK, MA

APR - 6 2018

RECEIVED

APPLICATION FOR MULTIPLE AMENDMENTS

The following documentation is required as a part of your retail license amendment application.
ABCC investigators reserve the right to request additional documents as a part of their investigation.

ALL AMENDMENTS REQUIRE

- ☒ Monetary Transmittal Form with \$200 fee
You can PAY ONLINE or include a \$200 check made out to the ABCC
- ☐ Amendment Application (this packet)
- ☐ Vote of the Corporate Board
A corporate vote authorizing all amendments being applied for, signed by an authorized signatory for the licensed entity
- ☐ Additional Documents Required by the Local Licensing Authority

ADDITIONAL REQUIRED DOCUMENTS

CHANGE OF MANAGER

- ☐ CORI Authorization Form
This form must be notarized with a stamp*
- ☐ Proof of Citizenship for proposed manager of record
Passport, US Birth Certificate, Naturalization Papers, Voter Registration

**ALTERATION OF PREMISES /
CHANGE OF LOCATION**

- ☐ Supporting Financial Documents
Documentation supporting any loans or financing, if applicable
- ☐ Floor Plan
Detailed Floor Plan showing square footage, entrances and exits and rooms
- ☐ Lease
Signed by licensee and landlord.

**CHANGE OF BENEFICIAL INTEREST /
TRANSFER OR ISSUANCE OF STOCK**

- ☐ Beneficial Interest - Individual Form
For any individual with direct or indirect interest in the licensee
- ☐ Beneficial Interest - Organization Form
For any organization with direct or indirect interest in the licensee
- ☐ CORI Authorization Form
For any individual with direct or indirect interest in the licensee.
This form must be notarized with a stamp*
- ☐ Business Structure Documents
If Proposed Licensee is applying as:
- A Corporation or LLC - Articles of Organization from the Secretary of the Commonwealth
- A Partnership - Partnership Agreement
- Sole Proprietor - Business Certificate

PLEDGE OF COLLATERAL

- ☐ Signed Promissory Note
- ☐ Signed Pledge Documentation

CHANGE OF CORPORATE NAME

- ☒ Business Structure Documents
If Proposed Licensee is applying as:
- A Corporation or LLC - Articles of Organization from the Secretary of the Commonwealth
- A Partnership - Partnership Agreement
- Sole Proprietor - Business Certificate

CHANGE OF DBA

- ☐ Business Certificate

CHANGE OF CORPORATE STRUCTURE

- ☐ Business Structure Documents
If Proposed Licensee is applying as:
- A Corporation or LLC - Articles of Organization from the Secretary of the Commonwealth
- A Partnership - Partnership Agreement
- Sole Proprietor - Business Certificate

CHANGE OF CATEGORY, CLASS, TYPE

No additional requirements

Payment Confirmation

License Number 00028RS0768
License Type Retail License Filing Fee

Current Payment

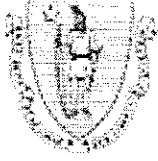
Payment Amount \$200.00
Bank Account Number ****3199
Bank Account Type Business
Bank Routing Number 211371227
Bank Name MIDDLESEX SAVINGS
Name On Account Z2 LLC
E-Mail Address forum@rcn.com

I have authorized Commonwealth ABCC to initiate the entry to my account. I have an agreement with Commonwealth ABCC under which I agreed to be bound by the NACHA Rules. This is a similarly authenticated authorization that satisfies compliance with the Electronic Signatures in the Global and National Commerce Act (15 USC 7001 et seq), which defines electronic records (as contracts or other records created, generates, sent, communicated, received, or stored by electronic means) and electronic signatures. Electronic signatures include, but are not limited to, digital signatures and security codes. I understand I can revoke the authorization by notifying Commonwealth ABCC within 60 days. I have signature authority to this account or have been authorized by an individual who has signature authority to this account to authorize this entry.

☒ I have read and accept the above terms and conditions

To prevent delays, please ensure that your financial institution will allow or whitelist ACH debits from 9751000885 on behalf of the Commonwealth of Massachusetts ABCC prior to entering payment.

[Back To Step 1](#) [Change](#) [Accept](#) [Print](#) [Exit](#)



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

APPLICATION FOR MULTIPLE AMENDMENTS

NAME OF LICENSEE (Business Contact)

ZZ, LLC

ABCC License Number

2618-00028-R5-0768

City/Town of Licensee

Natick

APPLICATION CONTACT

The application contact is required and is the person who will be contacted with any questions regarding this application

First Name: Robert

Middle:

Last Name: Shuman

Title: Member of the Board of Entity

Primary Phone: 508-553-4442

Email: robert1shuman@mac.com

AMENDMENT OPTIONS

☐ **Change in Business Contact Information - Page 2**

This is only to change a mailing or business address (corporate headquarters, NOT premise address), phone number or email

☐ **Change of Manager - Page 3**

☐ **Alteration of Premises / Change of Location - Page 4**

☐ **Change of Beneficial Interest / Transfer or Issuance of Stock - Page 5**

☐ **Pledge of Collateral (License, Inventory, Beneficial Interest) - Page 6**

☒ **Change of Corporate Name - Page 6**

☐ **Change of DBA - Page 6**

☐ **Change of Corporate Structure (i.e. Corporation to LLC, Sole Proprietor to LLC) - Page 6**

☐ **Change of Category (i.e. Wine and Malts to All Alcohol) - Page 6**

☐ **Change of Class (i.e. Seasonal to Annual) - Page 6**

☐ **Change of Type (i.e. Restaurant to General on Premises) - Page 6**

APPLICATION FOR MULTIPLE AMENDMENTS

AMENDMENT APPLICATION FOR:

Change of Corporate Name, Change of DBA, Change of Legal Structure, Change of Class, Change of Category

Please check the amendment that you are applying for and complete the corresponding section. Please refer to the requirements page for required documents.

PLEDGE INFORMATION

Are you seeking approval for a pledge? ☐ Yes ☐ No

To whom is the pledge is being made:

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

Does the lender have a beneficial interest in this license? ☐ Yes ☐ No

☐ License ☐ Stock / Beneficial Interest ☐ Inventory

Does the lease require a pledge of this license? ☐ Yes ☐ No

☒ **Change of Corporate Name**

Last-Approved Corporate Name:

Bob & Holly's, LLC

This is the License Entity

Name or the Business Contact

Requested New Corporate Name:

Z2, LLC

☐ **Change of DBA**

Last-Approved DBA:

Requested New DBA:

☐ **Change of Corporate Structure**

LLC, Corporation, Sole
Proprietor, etc

Last-Approved Corporate Structure

Requested New Corporate Structure

☐ **Change of License Category**

All Alcohol, Wine and Malt,
Wine Malt and Cordials

Last-Approved License Category

Requested New License Category

☐ **Change of License Class**

Seasonal or Annual

Last-Approved License Class

Requested New License Class

☐ **Change of License Type***

i.e. Restaurant to Club

Package Store to Supermarket

Last-Approved License Type

Requested New License Type

*CAN NOT change from an
on-premise to an off-premises
license type.*

APPLICANT'S STATEMENT

I, Robert Shuman the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☒ LLC/LLP member
Authorized Signatory

of Bob & Holly's, LLC, hereby submit this application for Change of Corporate Name
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:



Date: 03/23/2018

Title:

Member

Date March 23, 2018

At a meeting of the Members of Bob & Holly's LLC held at Natick, MA on January 18, 2018 it was duly voted that the LLC would apply for the following:

1. File appropriate paperwork with the Commonwealth of Massachusetts, Secretary of State to change the name of the LLC from Bob & Holly's, LLC to Z2, LLC.
2. File appropriate paperwork with Town of Natick and Massachusetts Alcoholic Beverages Control Commission to change the name on the Alcoholic Beverages License from Bob & Holly's, LLC to Z2, LLC.

Voted to allow Robert Shuman to sign all required forms and applications and to execute in its behalf any necessary papers and to do all things required relative to the change of the corporate name.

A TRUE COPY

ATTEST

A handwritten signature in black ink, appearing to be 'R Shuman', written over a horizontal line.

Robert Shuman, Member



Commonwealth of Massachusetts
Department of Revenue
Christopher C. Harding, Commissioner

mass.gov/dor

Letter ID: L0869961856
Notice Date: March 26, 2018
Case ID: 0-000-342-458



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



BOB & HOLLY'S LLC
1298 WORCESTER ROAD
NATICK MA 01702

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, BOB & HOLLY'S LLC 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.

What if I have questions?

If you have questions, call us at (617) 887-6367 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 8:30 a.m. to 4:30 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau



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)

Federal Employer Identification Number: 001032720 (must be 9 digits)

1. The exact name of the limited liability company is: BOB & HOLLY'S, LLC

2a. Location of its principal office:

No. and Street: 1298 WORCESTER ROAD
SHERWOOD PLAZA
City or Town: NATICK State: MA Zip: 01760 Country: USA

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

No. and Street: 1298 WORCESTER ROAD
SHERWOOD PLAZA
City or Town: NATICK State: MA Zip: 01760 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:

TO OPERATE A RESTAURANT/DELI AND ALL THOSE SERVICES INCIDENTAL THERETO.

4. The latest date of dissolution, if specified:

5. Name and address of the Resident Agent:

Name: LEWIS A. SASSOON, ESQ.
No. and Street: SASSOON & CYMROT, LLP
84 STATE STREET
City or Town: BOSTON State: MA Zip: 02109 Country: USA

I, LEWIS A. SASSOON 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	ROBERT SHUMAN	1298 WORCESTER ROAD NATICK, MA 01760

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.

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code

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 First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	ROBERT SHUMAN	1298 WORCESTER ROAD NATICK, MA 01760

9. Additional matters:

SIGNED UNDER THE PENALTIES OF PERJURY, this 20 Day of July, 2010,

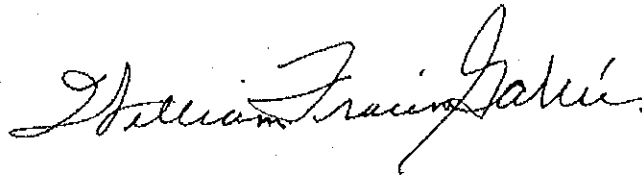
ROBERT SHUMAN

(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:

July 20, 2010 02:53 PM



WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

