CITY OF LINCOLN
NEBRASKA

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492

MAYOR COLEEN J. SENG

lincoln.ne.gov

LINCOLN
The community of opportunity

November 28, 2005

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Bugeater Investments, d.b.a. The Watering Hole West, 1550 Coddington Avenue requesting a class C liquor license.

This location was previously known as Mickey's Irish Pub which held a class C liquor license

The Watering Hole has requested that Bryan McFarland be approved as the manager of the liquor license.

Background information on the applicant will be omitted as the applicant has previously been approved by the City Council as a licensed liquor manager/owner.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

PH: 12/19/05

STATE OF NEBRASKA

Dave Heineman
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: http://www.nol.org/home/NLCC/

CITY CLERK'S OFFICE
2005 NOV 23 PM 2 30
CITY OF LINCOLN
NEBRASKA

November 22, 2005

AS-131143
156

Lincoln City Clerk
555 So 10th St
Suite 103
Lincoln NE 68508

RE: The Watering Hole West, 1550 Coddington Ave.

Dear Local Governing Body: Class C

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

1) There is a recommendation of denial from the local governing body.

2) A citizens protest; or

3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

1) Upon payment of the license fees;
2) Physical possession of the license;
3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Randy Seybert
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

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LICENSE APPLICATION CHECKLIST

Applicant Name BUGEATER INVESTMENTS, Telephone # 402-730-6451

Trade Name THE WATERING HOLE WEST Previous Trade Name MICKEYS IRISH PUB

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. Your operation depends on receiving a liquor license the Nebraska Liquor Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. All applications & attachments must be submitted in triplicate. You may want to check with the city/village or county clerk, where you are making application, to see if any additional local requirements must be met before submitting application to the state.

REQUIRED ATTACHMENTS

EACH ITEM MUST BE CHECKED OFF AND INCLUDED OR MARKED N/A FOR NOT APPLICABLE

1. Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of $33.00 for each person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to a Nebraska State Patrol Agency or law enforcement agency listed in the fingerprint brochure.
2. Enclose registration and license fees for the appropriate class of license, made out to the Nebraska Liquor Control Commission.
3. Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate LLC License - Form 3 and Manager application (with corporate application only). LLC application must include all members.
4. If building is being leased send a copy of the lease. Be sure it is in the individual(s) or corporate name being applied for. Also, the lease must extend through the license year being applied for. If building is owned, send a copy of the deed or purchase agreement in the appropriate name.
5. If you are buying the business of a current licensee, provide a copy of the purchase agreement from licensee. This also needs to be in applicant's name.
6. Enclose a copy of the temporary agency agreement, if applicable. Must be on Commission form only. Include a copy of the signature card from the bank showing both the sellers and buyers name(s) on account.
7. Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes. Inventory may be taken at the time application is being submitted.
8. Enclose a list of any inventory or property owned by other parties that are on the premise.
9. For individual and partnership applications enclose proof of citizenship birth certificates, or naturalization documents for all persons listed on application. Documents must be a certificate from the State, where born, not hospital certificate.

☒ 10. If a corporation enclose a copy of the articles of incorporation. This document must show receipt (barcode) by the Secretary of States Office.

Mail checklist, all applications and attachments to: Nebraska Liquor Control Commission, 301 Centennial Mall South, PO Box 95046, Lincoln NE 68509-5046

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Signature

APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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OFFICE USE ONLY

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS(S)

RETAIL LICENSE(S)

☐	A	Beer, On Sale Only	$45.00
☐	B	Beer, Off Sale Only	$45.00
☑	C	Beer, Wine & Distilled Spirits, On & Off Sale	$45.00
☐	D	Beer, Wine & Distilled Spirits, Off Sale Only	$45.00
☐	I	Beer, Wine & Distilled Spirits, On Sale Only	$45.00

Class K Catering license may be added to any of these classes with an additional fee of $100.00 and filing form 35-4202

MISCELLANEOUS

				Bond
☐	L	Craft Brewery (Brew Pub)	$295.00	1,000 min.
☐	O	Boat	$ 95.00	N/A
☐	V	Manufacturer, Beer, Wine & Distilled Spirits (additional fee of $100 to $1,000-call for exact amount)	$ 45.00	10,000 min.
☐	W	Wholesale Beer	$295.00	5,000 min.
☐	X	Wholesale Liquor	$545.00	5,000 min.
☐	Y	Farm Winery	$295.00	5,000 min.

All Class C licenses expire October 31st
All other licenses expire April 30th
Catering expire same as underlying retail license

TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

☐ Individual License, requires insert form 1
☐ Partnership License, requires insert form 2
☑ Corporate License, requires insert form 3a and manager application 3b

NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(Commission will call this person with any questions we may have)

Name: ANITA HOLDEN McFARLAND Phone: (702) 806-6690

Firm Name: _____

Firm address: BUGEATER INVESTMENTS, INC.

PREMISE INFORMATION

Trade Name (doing business as) THE WATERING HOLE WEST

Street Address #1 1550 CODDINGTON AVENUE

Street Address #2 SUITE P

City LINCOLN **County** LANCASTER

Zip Code 68522

Telephone number at premise to be licensed (402) 477-2900

Is this location inside the city/village corporate limits: ☑ **YES** ☐ **NO**

Mail to Address (where you want receipt of Liquor Control Commission mailings)

Name: BUGEATER INVESTMENTS, INC.

Street Address #1 PO BOX 530686

Street Address #2

City HENDERSON **County** CLARK

Zip Code 89053

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

SEE NEXT PAGE

APPLICANT INFORMATION

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ **Yes** **If yes, please explain below or attach a separate page.**
☐ **No**

Bryan A McFarland - 3/03 Selling Alcohol Off Premises 3/97 Disturbing the Peace - 4/95 Disturbing the Peace - 9/92 Consuming Alcohol in Public

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted.

☑ **Yes**
Current business name and license number Mickey's Irish Pub 61619
☐ **No**

3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. **Please note:** This agreement is not effective until Commissions assigns you a 3-digit ID number.

☑ **Yes**
☐ **No**

4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.

☐ **Yes**

☑ **No**

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.

☐ **Yes**

☑ **No**

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.

☐ **Yes**

☑ **No**

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners)

☐ **Yes**

☑ **No**

8. Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177.

☐ **Yes**

☑ **No**

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.

☐ **Yes**

☑ **No**

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.

WELLS FARGO BANK
Anita Holden McFarland, Bryan A McFarland

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.

The Watering Hole 49599
Cliff's Lounge 55419

12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.

Bryan A. McFarland 20-40 hours per week

13. List the training or experience (when and where) of the person listed in #12 above in connection with selling and/or serving alcohol products.

17 years food and beverage experince as a bartender, cook and manager (Cornhusker Hotel, Mazatlan Mexican Restaurant, Lone Star, ChiChi's, Grisanti's)

14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

- [x] Lease: expiration date _____
- [ ] Deed
- [ ] Purchase Agreement

15. When do you intend to open for business? ~~September 1, 2005.~~ ~~October~~ NOV. 18, 2005

16. What will be the main nature of business? What are the anticipated hours of operation?

Pub & Grill MTW 11-11 ThF 11-1 Sun 12-11

17. List the principal residence(s) for the past 10 years for all persons required to sign application, including spouses. If necessary attach a separate sheet.

Applicant Name	From: Year	To: Year	City/State
SEE ATTACHED SHEET			

The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

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NEBRASKA LIQUOR CONTROL COMMISSION

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

(sign here)	(sign here)
(sign here)	(sign here)
(sign here)	(sign here)
(sign here)	(sign here)
(sign here)	(sign here)

Subscribed in my presence and sworn to before me this

12th day of September, 2005

Notary Public Signature & Seal

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83738-1

In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010
REV. 4/05

Subscribed in my presence and sworn to before me this 18th day of November, 2005

Notary Public Margaret I. Frankforter

STATE OF NEBRASKA GENERAL NOTARY
MARGARET I. FRANKFORTER
MY COMMISSION EXPIRES
October 11, 2008

QUESTION #17:

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NEBRASKA LIQUOR
CONTROL COMMISSION

Anita Holden

Tucson, AZ	1979 - 1984
Stateline, NV	1984 - 1990
Sacramento, CA	1990
Lincoln, NE	1990 - 1997
Tucson, AZ	1997 – 1998
Davis, CA	1998 – 2001
Henderson, Nevada	2001 - Present

Bryan McFarland

Lincoln, NE	1986 – 1989
San Diego, CA	1989 – 1990
Lincoln, NE	1990 – 1997
Ashland, NE	1997 – 1998
Davis, CA	1998 – 2001
Henderson, Nevada	2001 – 2005
Lincoln, Nebraska	2005 – Present

APPLICATION FOR LIQUOR LICENSE
CORPORATION/LLC INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: http://www.lcc.ne.gov/

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CONTROL COMMISSION

Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office.

BUGEATER INVESTMENTS, INC.

Corporate Street Address: 1321 O STREET

City: LINCOLN State: NE Zip Code: 68508

Corporate Telephone Number (402) 438-3054

Total number of shares issued (if corporation) 1000

Is this a Non Profit Corporation? ☐ YES ☑ NO
If yes, what is your Federal ID #?

Name of Registered Agent EVELYN McFARLAND

Name of Proposed Manager BRYAN A. McFARLAND
This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: HOLDEN McFARLAND First Name: ANITA MI K

Address Street PO BOX 530686 City HENDERSON

State NEVADA Zip Code 89053 Home Phone number (702) 806-6690

Social Security Number Date of Birth

List names of all Officers, Directors, Stockholders, Members and their Spouses

Last Name HOLDEN McFARLAND First Name ANITA

Social Security Number _____ Date of Birth _____

Title PRESIDENT Number of Shares 1000

Spouse Name (indicate N/A if single) BRYAN A. McFARLAND

Spouse Social Security Number _____ Date of Birth _____

Title N/A Number of Shares 0

Last Name HOLDEN McFARLAND First Name ANITA

Social Security Number _____ Date of Birth _____

Title VICE PRESIDENT Number of Shares 1000

Spouse Name (indicate N/A if single) BRYAN A. McFARLAND

Spouse Social Security Number _____ Date of Birth _____

Title N/A Number of Shares 0

Last Name HOLDEN McFARLAND First Name ANITA

Social Security Number _____ Date of Birth _____

Title SECRETARY Number of Shares 1000

Spouse Name (indicate N/A if single) BRYAN A. McFARLAND

Spouse Social Security Number _____ Date of Birth _____

Title N/A Number of Shares 0

Last Name HOLDEN McFARLAND First Name ANITA

Social Security Number _____ Date of Birth _____

Title TREASURER Number of Shares 1000

Spouse Name (indicate N/A if single) BRYAN A. McFARLAND

Spouse Social Security Number _____ Date of Birth _____

Title N/A Number of Shares 0

Last Name HOLDEN McFARLAND First Name ANITA

Social Security Number _____ Date of Birth _____

Title DIRECTOR Number of Shares 1000

Spouse Name (indicate N/A if single) BRYAN A. McFARLAND

Spouse Social Security Number _____ Date of Birth _____

Title N/A Number of Shares 0

Last Name _____ First Name _____

Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

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NEBRASKA LIQUOR CONTROL COMMISSION

Is this Corporation or Limited Liability Company controlled by another Corporation?
☐ Yes ☑ No
If yes, give name of corporation and supply organizational chart

Indicate tax year with the IRS
Starting Date 01/01/2005 Ending Date 12/31/2005

Signature of President/Managing Member

Notary Public Signature & Seal

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83738-1

Subscribed in my presence and sworn to before me this
12th day of September, 2005

Notary Public Signature & Seal

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83738-1

In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4183
REV. 4/05

APPLICATION FOR LIQUOR LICENSE
CORPORATION MANAGER - FORM 3b
MUST BE A NEBRASKA RESIDENT

301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: http://www.lcc.ne.gov/

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NEBRASKA LIQUOR CONTROL COMMISSION

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION BUGEATER INVESTMENTS, INC.

CLASS & LICENSE NUMBER

TRADE NAME THE WATERING HOLE WEST

STREET ADDRESS 1550 CODDINGTON AVENUE CITY LINCOLN

SIGNATURE OF CORPORATION PRESIDENT/CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)

NAME BRYAN A. McFARLAND

ADDRESS 762 West Lakeshore Drive

CITY LINCOLN STATE Nebraska ZIP CODE 68521

HOME PHONE NUMBER 730-6451 BUSINESS PHONE NUMBER 477-2900

SEX ☑ MALE ☐ FEMALE SOCIAL SECURITY NUMBER

DATE OF BIRTH PLACE OF BIRTH OAKLAND, CA

DRIVERS LICENSE NUMBER & STATE

SPOUSES INFORMATION (IF NOT MARRIED INDICATE)

SPOUSE NAME ANITA K HOLDEN McFARLAND

SOCIAL SECURITY NUMBER DATE OF BIRTH

DRIVERS LICENSE NUMBER & STATE 1701394155 NEVADA

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**
Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☑ YES ☐ NO

If yes, please explain below or attach a separate page.

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? **IF YES,** for what premise give license number and date.

☑ YES ☐ NO

THE WATERING HOLE #49599 9/18/2000
CLIFF'S LOUNGE #55419 4/29/2002

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☑ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

☑ YES ☐ NO

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☑ YES ☐ NO

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

APPLICANT: CITY & STATE	YEAR FROM	YEAR TO	SPOUSE: CITY & STATE	YEAR FROM	YEAR TO
LINCOLN, NEBRASKA	2,005	2,005	HENDERSON, NEVADA	2,001	2,005
HENDERSON, NEVADA	2,001	2,005	DAVIS, CA	1,998	2,001
DAVIS, CA	1,998	2,001	LINCOLN, NEBRASKA	1,990	1,998
LINCOLN, NEBRASKA	1,968	1,998			

EMPLOYERS - LIST LAST TWO EMPLOYERS

MONTH/YEAR FROM	MONTH/YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
09/01	08/05	BUGEATER INVESTMENTS, INC.	Anita Holden McFarland	(702) 806-6690
05/98	09/01	VALLEY MEDIA	Teresa Cardoni	out of business

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NEBRASKA LIQUOR CONTROL COMMISSION

PERSONAL OATH AND CONSENT OF INVESTIGATION MUST BE SIGNED BY APPLICANT & SPOUSE

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

Signature of ~~Applicant~~ SPOUSE

Signature of ~~Spouse~~ APPLICANT

Subscribed in my presence and sworn to before me this 12th day of September, 2005

Subscribed in my presence and sworn to before me this 12th day of September, 2005

Notary Signature & Seal

Notary Signature & Seal

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83738-1

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83738-1

TEMPORARY AGENCY AGREEMENT **ID#** 61619

1. On NOV. 18th, 2005, Seller and Buyer entered into a contract for sale of the business known as Mickey's Irish Pub, which contract is contingent upon Buyer receiving approval for a liquor license to operate the business.

2. Seller and Buyer agree to allow Buyer to operate the business, subject to approval by the Liquor Control Commission, for a period not to exceed 120 days subsequent to ~~MARCH 11~~ NOVEMBER 12, 2005, the date of filing the application with the Liquor Control Commission.

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NEBRASKA LIQUOR CONTROL COMMISSION

3. Seller will maintain a possessory interest in the property in the form of a lease, use permit or license;

4. Buyer will at all times be the agent of the Seller, but Buyer will be completely and totally responsible for the operation of the business and for all liability associated with the operation of the business during the time when Buyer is acting as Seller's agent; it is specifically understood that Seller shall have no liability for the operation of the business during this period of time and Buyer agrees to indemnify and hold Seller harmless from any claims arising during this period of operation; however, it is understood that the liquor license remains in the name of the Seller and Seller will be responsible for all violations of the liquor laws of the State of Nebraska until such time as Seller's license is canceled;

5. At time of closing, certain funds will be held in escrow pending issuance of the license.

6. **Financial Institution: Name, Address, Account number** of where escrow account is being held

Wells Fargo Bank, 13th & O Street, Lincoln, Nebraska 68508

7. All profits derived from the operation of the business by the buyer, after payment of bills and salaries, shall be paid to the same escrow agent to be held until the issuance of the license, it being specifically understood that the Buyer shall receive no profits from the operation of the business until the liquor license has been issued to Buyer, but shall have the right to direct the investment of profit funds by escrow agent.

8. This agreement constitutes the entire and complete understanding of all parties with regard to the agency relationship, and is binding upon the heirs, personal representatives and successors of the parties.

9. It is hereby understood that in the event the Commission denies this application, this Temporary Agency Agreement is null and void the date of the order.

Signature of Seller X

Signature of Seller

Signature of Buyer Bugeater Investments Inc

Signature of Buyer Anita McFarland

Dated this 8th day of November, 2005.

STATE OF NEBRASKA)
COUNTY OF) ss

The above and foregoing Agency Agreement was acknowledged before me this 8 day of November, 2005, by MIPS, as **Seller**, Mr. John Seltzer, as **Seller.**

The above and foregoing Agency Agreement was acknowledged before me this 12 day of September, 2005, by BUGEATER INVESTMENTS, INC, as **Buyer**, ANITA HOLDEN McFARLAND, as **Buyer.**

Signature & Seal of Notary Public

GENERAL NOTARY - State of Nebraska
JOHN M. NANOS
My Comm. Exp. Oct. 4, 2006

SinDee Knutson
Notary Public
State of Nevada
My appt. exp. Aug. 8, 2007
Certificate No. 03-83728-1

Form 35-4231

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NOV 18 2005
NEBRASKA LIQUOR CONTROL COMMISSION

Addendum to Certificate of Authority

(Deposit Accounts Only)

Bank Name	COID	Date (MM/DD/YYYY)
Wells Fargo Bank , N.A.	00825	11/16/2005
	Branch #	AU/Cost Center
	01751	6474
Officer Name	Officer Number	Phone #
MAYRA SANTOS	N1083	702/263-2901

Use this document when new signers are being added or deleted to a Certificate of Authority currently on file and a new, signed Certificate of Authority has not been obtained. ***This addendum may not be used to add or delete those persons authorized to engage in credit transactions. A new Certificate of Authority, or other proper written notification, must be obtained for that purpose.***

Addendum to Certificate of Authority Dated (MM/DD/YYYY) _____

Customer Name BUGEATERATER INVESTMENT, INC.

Account Number(s) _____ _____ _____

Authorized Signers currently on the account (sample signature not required): *Attach a separate sheet if necessary.*

Signer Name	ANITA HOLDEN-MCFARLAND	Signer Name	
Signer Name	BRYAN A MCFARLAND	Signer Name	
Signer Name		Signer Name	
Signer Name		Signer Name	

Description of the Requested Change to Authorized Signers

Action Requested (Check One)	Print Name and Title	Sample Signature (Required only for persons being added as authorized signers)
☒ Add ☐ Delete	RICHARD E SELTZER Signer	Customer 1 Authorized Signature R. E. Seltz 11/16/2005 ☒ Submit manually ☐ Signature not required
☐ Add ☐ Delete		Customer 2 Authorized Signature ☐ Submit manually ☒ Signature not required
☐ Add ☐ Delete		Customer 3 Authorized Signature ☐ Submit manually ☒ Signature not required
☐ Add		Customer 4 Authorized Signature

1000164426 Pgs 1
BUGEATER INV. STMENTS, INC.
Filed 02/02/2001 03:50 PM

~~DOMESTIC~~ CHANGE OF REGISTERED AGENT and/or OFFICE

Submit in Duplicate

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NEBRASKA LIQUOR CONTROL COMMISSION

~~Scott Moore~~, Secretary of State
Room 1305 State Capitol, P.O. Box 94608
Lincoln, NE 68509
http://www.nol.org/home/SOS/

The following corporation, pursuant to the laws of the state of Nebraska, does hereby wish to change its Registered Agent and/or Registered Office.

Name of Corporation BUGEATER INVESTMENTS, INC.

Previous:

Registered Agent: JAMES McFARLAND

Registered Office: 1321 O STREET (Street Address) LINCOLN (City) NE 68508 (Zip)

New:

Registered Agent: EVELYN McFARLAND

Registered Office*: 1321 O STREET (Street Address) LINCOLN (City) NE 68508 (Zip)

* The street address of the registered office and the street address of the registered agent must be identical.

DATED 1-17-01

Signature

ANITA HOLDEN-McFARLAND CEO
Printed Name/Title

NOTE: Every filing must be signed by the chairperson of the board of directors, the president, or one of the officers of the corporation. If the corporation has not yet been formed or directors have not yet been selected, the filing shall be signed by an incorporator. If the corporation is in the hands of a receiver, trustee, or other court appointed fiduciary, the filing shall be signed by that fiduciary.

Registered Agent: Please check A (current agent) or B (new agent) below and sign

____ A. I hereby state that the above named corporation has been notified of the change in address of my registered office.

X B. I hereby consent to act as registered agent for the above named corporation.

Evelyn M. McFarland
Signature of Registered Agent

FILING FEE: $30.00

Revised 2/11/99

Neb. Rev. Stat. §~~21-2032~~

1000142741 Pgs: 3
BUGEATER INVESTMENTS, INC.
Filed: 09/18/2000 03:47 PM

OR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS

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NEBRASKA LIQUOR CONTROL COMMISSION

Scott Moore, Secretary of State
Room 1305 State Capitol, P.O. Box 94608
Lincoln, NE 68509
http://www.nol.org/home/SOS/

Submit in Duplicate

Attach a certificate of good standing duly authenticated by the official having custody of the corporate records in the state or country under whose law the corporation is incorporated. Such certificate shall not be more than 60 days old. A certified copy of the articles of incorporation should not be submitted and is not acceptable in lieu of such certificate.

Name of Corporation BUGEATER INVESTMENTS, INC.

Fictitious Name of Corporation _____
(to be used only if actual corporate name is unavailable for use or does not comply with Nebraska law)

Incorporated under the laws of NEVADA

Date Incorporation AUGUST 16 #2000

Period of Duration PERPETUAL

Address of Principal Office 116 PALMER CT #A (Street Address) DAYTON (City) NV (State) 89403 (Zip)

Registered Agent JAMES F. MCFARLAND

Registered Office 1321 "O" ST (Street Address) LINCOLN (City) NE 68508 (Zip)

DATED 9/15/00

Anita K. Holden
Signature

ANITA K HOLDEN / PRES/CEO
Printed Name/Title

NOTE: The Business Corporation Act requires that every filing be signed by the chairperson of the board of directors, the president, or one of the officers of the corporation. If the corporation has not yet been formed or directors have not yet been selected, the filing shall be signed by an incorporator. If the corporation is in the hands of a receiver, trustee, or other court appointed fiduciary, the filing shall be signed by that fiduciary.

NOTE: To complete this form, you must list officers and directors on back

FILING FEE: $145.00 plus $5.00 for each page listing additional officers and directors

Revised 2/11/99

Neb. Rev. Stat. 21-20,170

FOREIGN CORPORATION OCCUPATION TAX REPORT
STATE OF NEBRASKA, SECRETARY OF STATE

Report shall show exact corporate name, registered agent, location of registered office, officers and directors **with street address of each.**

TAX REPORTING YEARS 2004 - 2005

BUGEATER INVESTMENTS, INC.

RECEIVED
NOV 18 2005
NEBRASKA LIQUOR CONTROL COMMISSION

10016943

DUE MARCH 1, 2004
DELINQUENT APRIL 15, 2004

EVELYN MCFARLAND
1321 O ST
LINCOLN NE 68508

1. EXACT CORPORATE NAME (as stated in articles of incorporation or most recent amendment)
BUGEATER INVESTMENTS, INC.

2. OFFICERS (complete name and address is required for each officer and director)

	Name	Street Address	City	State	Zip
President:	ANITA HOLDEN MCFARLAND	PO 530686	HENDERSON	NV	89053
Secretary:	"	"	"	"	"
Treasurer:	"	"	"	"	"
3. Principal Office of Corporation:	"	"	"	"	"
4. Registered Office:	1321 O ST		LINCOLN	NE	68508

5. Registered Agent: EVELYN MCFARLAND

6. Nature of Business: RESTAURANT / BAR

7. Under the laws of what state or country is the corporation organized?
NV

8. Location of property owned or used in Nebraska
1321 O STREET LINCOLN, NE 68508

9. **If you are not required to file an agricultural report (see instructions) OR there have been no changes to the agricultural activity report currently on file with the Secretary of State – Check Here _____ Otherwise return the agricultural activity report completed.**

YOU MUST COMPLETE THESE TWO ITEMS	ACTUAL VALUE OF REAL ESTATE AND PERSONAL PROPERTY IN NEBRASKA	$ 50,000
	Occupation Fee (Fee Schedule on Page 2 of report)	$ 200.00

MAKE CHECKS PAYABLE TO SECRETARY OF STATE Your Cancelled Check is Your Receipt

SIGN HERE [signature]
Signature of Officer

ANITA HOLDEN MCFARLAND
Printed Name of Officer

DATE 1-24-04