

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

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



MAYOR CHRIS BEUTLER

lincoln.ne.gov

April 9, 2009

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

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of El Salvador Cafe, 221 South 9<sup>th</sup> Street requesting a class CK liquor license.

This location was previously known as Fandango which held a class C liquor license

Yeldy Marroquin, owner has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Yeldy Marroquin was born in El Salvador. She attended Birmingham High School graduating in 1995.

Yeldy Marroquin employment history is as follows:

2006 - Present	Owner, El Salvador Café	Lincoln, NE.
2005	Staff, UNMC	Omaha, NE.
1998 - 2001	Staff, El Salvador Café	Lincoln, NE.
1996 - 1998	Clerk, Bryan / LGH	Lincoln, NE.

Mrs. Marroquin has completed the required training.

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



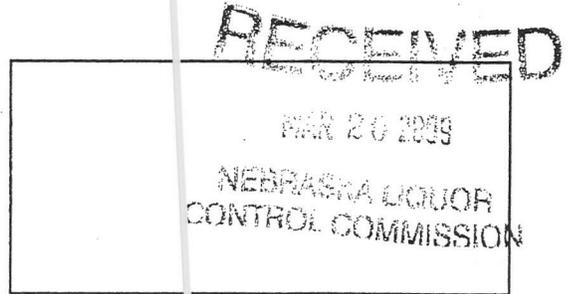
A nationally accredited law enforcement agency



45 days = 5-18-09

**APPLICATION FOR LIQUOR LICENSE  
CATERING 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



**FEE \$100.00**

A catering license allows a retail licensee to deliver, sell or dispense alcoholic liquors, including beer, for consumption at a location designated on a Special Designated License (SDL). The catering license is renewed in the same manner and time as the retail license held by the licensee. A licensee shall not cater an event unless a SDL has been obtained. *An applicant seeking a SDL must be filed with the local governing body where the event is to be held at least 21 days prior to the event.* The application must then be filed with the Commission ten working days prior to the event. The local or county approval and law enforcement notification letter must accompany the SDL when submitted to the Commission. The \$40 per day license fee is waived for the holder of a catering license and the number of events allowed is unlimited.

CLASS OF LICENSE AND NUMBER \_\_\_\_\_

NAME OF LICENSEE Blue Mango Holdings, LLC

TRADE NAME El Salvador Cafe

PREMISE ADDRESS 221 South 9th Street

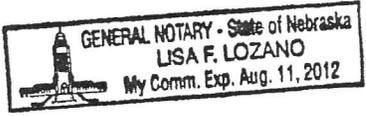
CITY/STATE/ZIP CODE Lincoln, NE 68508

A copy of your application for a catering license will be forwarded to the local governing body for recommendation Neb.rev.state., the Liquor Commission shall set for hearing any application receiving local governing body denial, a citizens protest or having statutory problems discovered by the Commission. If the local governing body does not make a recommendation, the Commission may approve or deny the issuance of a license. Catering licenses shall be delivered to the licensee in the same manner as provided in subsection (4) of Neb. rev. state., for delivery of licenses.

[Signature]  
Signature of Licensee

Subscribed in my presence and sworn to before me this 18 day of March, 2009

[Signature]  
Notary Public Signature & Seal



# APPLICATION FOR LIQUOR LICENSE

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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Mar 20 2009

NEBRASKA LIQUOR  
 CONTROL COMMISSION

## RETAIL LICENSE(S)

	Application Fee
<input type="checkbox"/> A BEER, ON SALE ONLY	\$45.00
<input type="checkbox"/> B BEER, OFF SALE ONLY	\$45.00
<input checked="" type="checkbox"/> C BEER, WINE & DISTILLED SPIRITS, ON & OFF SALE	\$45.00
<input type="checkbox"/> D BEER, WINE & DISTILLED SPIRITS, OFF SALE ONLY	\$45.00
<input type="checkbox"/> I BEER, WINE & DISTILLED SPIRITS, ON SALE ONLY	\$45.00
<input checked="" type="checkbox"/> Class K Catering license (requires catering application form)	\$100.00

## MISCELLANEOUS

	Application Fee	Bond Required
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$295.00	\$1,000 minimum
<input type="checkbox"/> O Boat	\$ 95.00	none
<input type="checkbox"/> V Manufacturer		
<input type="checkbox"/> Alcohol & Spirits	\$1,045.00	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$145.00 1 to 100 barrel*	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$245.00 100 to 150 barrel*	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$395.00 150 to 200 barrel*	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$545.00 200 to 300 barrel*	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$695.00 300 to 400 barrel*	\$1,000 minimum
<input type="checkbox"/> Beer (excluding produced by a craft brewery)	\$745.00 400 to 500 barrel*	\$1,000 minimum
<input type="checkbox"/> W Wholesale Beer	\$545.00	\$5,000 minimum
<input type="checkbox"/> X Wholesale Liquor	\$795.00	\$5,000 minimum
<input type="checkbox"/> Y Farm Winery	\$295.00	\$1,000 minimum
<input type="checkbox"/> Z Micro Distillery	\$295.00	\$1,000 minimum
<input type="checkbox"/> Copy of TTB permit (if applying for L, V, W, X, Y or Z)		

\*daily capacity, average daily barrel production for the previous twelve months of manufacturing operation. If no such basis for comparison exists, the manufacturing licensee shall pay in advance for the first year's operation a fee of five hundred dollars

All Class C licenses expire October 31<sup>st</sup>

All other licenses expire April 30<sup>th</sup>

Catering license (K) expires same as underlying retail license

- Individual License (requires insert form 1)
- Partnership License (requires insert form 2)
- Corporate License (requires insert form 3a & 3c)
- Limited Liability Company (requires form 3b & 3c)

Name Lisa F Lozano Phone number: 402-476-1111  
 Firm Name Lozano Law Office

Trade Name (doing business as) El Salvador Cafe

Street Address #1 221 South 9th Street

Street Address #2 \_\_\_\_\_

City Lincoln

County Lancaster

Zip Code 68508

Premise Telephone number 402-470-3981

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

Mail address (where you want receipt of mail from the commission)

Name El Salvador Cafe

Street Address #1 221 South 9th Street

Street Address #2 \_\_\_\_\_

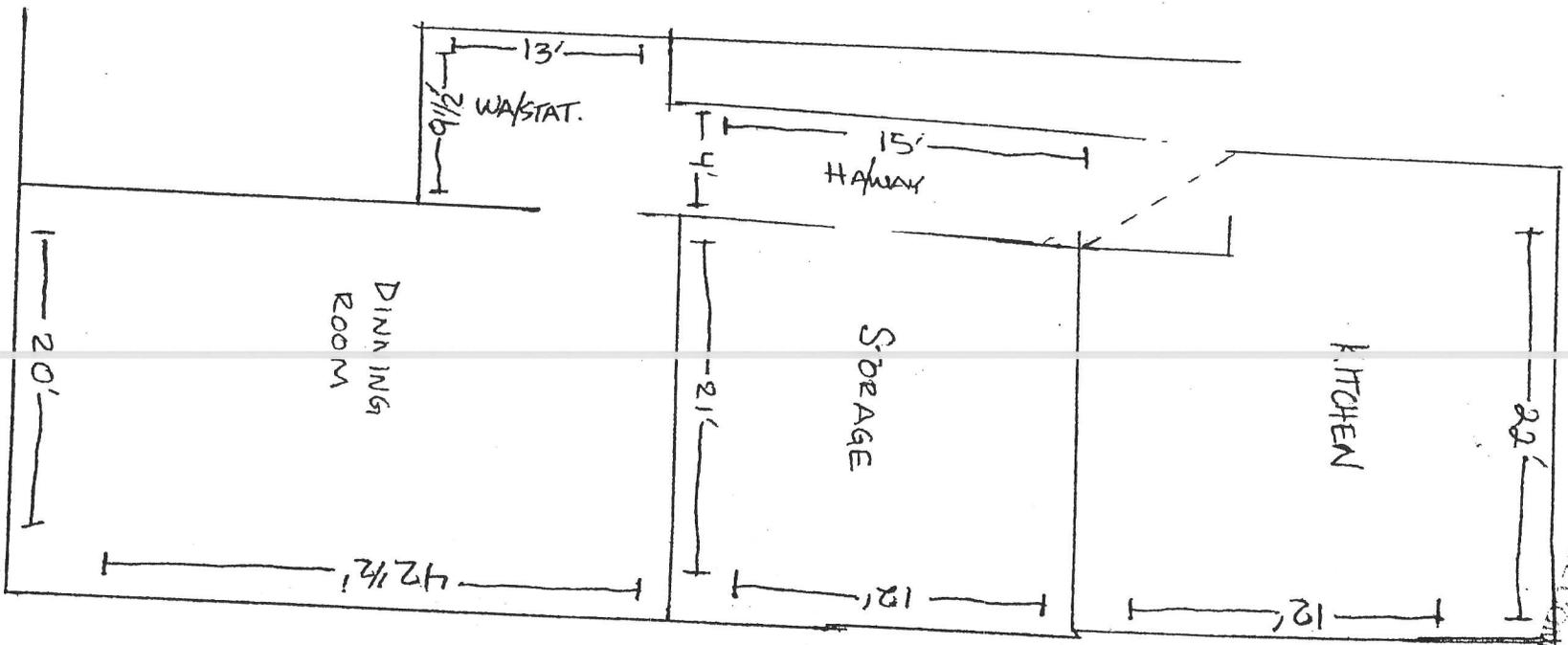
City Lincoln

State NE

Zip Code 68508

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.

\*\*For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms



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 1-14-53  
 NEBRASKA DEPARTMENT OF  
 CONTROL & COMMISSION

**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.

Yeldy Z. Marroquin: Lancaster County - Improper Registration - \$25.00 fine  
Leticia Carcamo: Lancaster County - Disobey Stop Light - \$75.00 fine, Violate Speed 11-15  
municipal - \$75.00 fine, Lancaster County - Negligent Driving - \$60.00 fine

2. Are you buying the business and/or assets of a licensee?

YES  NO

If yes, give name of business and license number \_\_\_\_\_

a) Submit a copy of the sales agreement including a list of the furniture, fixtures and equipment.

b) Include a list of alcohol being purchased, list the name brand, container size and how many?

3. Are you filing a temporary agency agreement whereby current licensee allows you to operate on their license?

YES  NO

If yes, attach temporary agency agreement form and signature card from the bank.

**This agreement is not effective until you receive your three (3) digit ID number from the Commission.**

4. Are you borrowing any money from any source to establish and/or operate the business?

YES  NO

If yes, list the lender \_\_\_\_\_

5. Will any person or entity other than applicant be entitled to a share of the profits of this business?

YES  NO

If yes, explain. All involved persons must be disclosed on application. \_\_\_\_\_

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

YES  NO

If yes, list such items and the owner. See attached list of equipment to be used by business as part of

premises lease agreement. \_\_\_\_\_

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business?

YES  NO

If yes, explain. \_\_\_\_\_

**No silent partners**

8. Are you premises to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 feet of a college or university campus?

YES  NO

If yes, list the name of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)

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CONTROL COMMISSION

9. Is anyone listed on this application a law enforcement officer?

YES  NO

If yes, list the person, the law enforcement agency involved and the person's exact duties

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 withdrawals on accounts at the institution.

U.S. Bank, Lincoln, Nebraska, Yeldy Marroquin and Leticia Carcamo

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 reason for termination of any license(s) previously held.

Leticia Carcamo, Restaurante and Pupuseria El Salvador, #51328, 6/1/2004, 1501 Center Park Road  
License # 51328 6/2001 - 2004 LINCOLN NE

12. List the training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse)
- d) Limited Liability Company, manager only (no spouse)

Name:	Date:	Where:
Yeldy Marroquin	April 10, 2008	Hospitality Council - 575 South 10th Street, Lincoln, NE

13. 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.

- Lease: expiration date 12/31/2009  
 Deed  
 Purchase Agreement

14. When do you intend to open for business? The business opened November 11, 2008

15. What will be the main nature of business? Restaurant

16. What are the anticipated hours of operation? Monday through Saturday, 11a.m.-9 p.m. Sunday 12 noon - 8 p.m.

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

APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Yeldy Marroquin, Lincoln, NE	5/07	present	Nixon Marroquin, Lincoln, NE	5/07	present
Yeldy Marroquin, Omaha, NE	5/02	5/07	Nixon Marroquin, Omaha, NE	5/02	5/07
Yeldy Marroquin, Lincoln, NE	1995	5/02	Nixon Marroquin, Lincoln, NE	1994	5/02
Leticia Carcamo	1995	present			

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background investigation and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse 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 stockholder that are needed in furtherance of the application investigation of 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, member and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock and spouses). Full (birth) names only, no initials.

Yeldy Marroquin  
Signature of Applicant

Nixon Marroquin  
Signature of Spouse

Nixon Marroquin  
Signature of Applicant

Yeldy Marroquin  
Signature of Spouse

Leticia Carcamo  
Signature of Applicant

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Spouse

State of Nebraska

County of Lancaster

County of \_\_\_\_\_

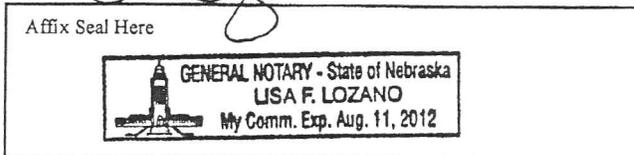
The foregoing instrument was acknowledged before me this March 18, 2009 by

The foregoing instrument was acknowledged before me this \_\_\_\_\_ by

Yeldy Marroquin, Nixon Marroquin  
and Leticia Carcamo

Notary Public signature  
Lisa F. Lozano

Notary Public signature



In compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

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MAR 20 2009  
NEBRASKA LIQUOR  
CONTROL COMMISSION 5

**APPLICATION FOR LIQUOR LICENSE  
LIMITED LIABILITY COMPANY (LLC)  
INSERT - FORM 3b**

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](http://www.lcc.ne.gov)

Office Use  
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MAR 26 2009  
NEBRASKA LIQUOR CONTROL COMMISSION  
*Hot List*

All LCC members, including spouses, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must provide a copy of their certified birth certificate or INS papers
- 3) Must submit their fingerprints (2 cards per person)
- 4) Must sign the signature page of the Application for License form (even if spousal affidavit has been submitted)

*[Handwritten signatures and scribbles]*

~~copy of articles of organization, if applicable, barcode receipt by [redacted] staff~~

Name of Registered Agent: Yeldy Marroquin

~~Name of Limited Liability Company that will hold license, as prescribed in the organization~~

Blue Mango Holdings, LLC

LLC Address: 2901 N.W. 48th Street

City: Lincoln State: NE Zip Code: 68524

LLC Phone Number: 402-880-7725 Fax Number N/A

~~Name of Contact Member (Last, First, MI) as listed on the list~~

Last Name: Marroquin First Name: Yeldy MI: Z

Home Address: 1900 Independence Court City: Lincoln

State: NE Zip Code: 68521 Home Phone Number: 402-261-3912

x Yeldy Marroquin  
Signature of Contact Member

State of Nebraska  
County of Lancaster

The foregoing instrument was acknowledged before me this

3-18-2009  
date

by Yeldy Marroquin  
name of person acknowledged

[Signature]  
Notary Public signature

Affix Seal Here  
GENERAL NOTARY - State of Nebraska  
LISA M. LOZANO  
My Comm. Exp. Aug. 11, 2012

Bus 5698-145-jbm

List names of all members \_\_\_\_\_

Last Name: Marroquin First Name: Yeldy MI: Z

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Full Name (indicate N/A if single): Nixon Franklin Marroquin

Spouse Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

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NEBRASKA LIQUOR  
CONTROL COMMISSION

Last Name: Marroquin First Name: Nixon MI: F

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Full Name (indicate N/A if single): Yeldy Z. Marroquin

Spouse Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Last Name: Carcamo First Name: Leticia MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Full Name (indicate N/A if single): N/A

Spouse Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Full Name (indicate N/A if single): \_\_\_\_\_

Spouse Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Full Name (indicate N/A if single): \_\_\_\_\_

Spouse Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Is the applying limited liability company controlled by another corporation?

YES

NO

If yes, provide the name of corporation/company and supply an organizational chart

Indicate the company's tax year (calendar year, fiscal year, etc.)

Starting Date: January 1

Ending Date: December 31

Is this a Non-Profit Corporation?

YES

NO

If yes, provide the Federal ID #.

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COMMERCIAL BANK

In compliance with the ADA, this limited liability company insert form 3b is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

**MANAGER APPLICATION  
INSERT - FORM 3c**

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](http://www.lcc.ne.gov)

Office Use

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NEBRASKA LIQUOR  
CONTROL COMMISSION

Corporate manager, including spouse, are required to adhere to the following requirements:  
If spouse filed affidavit of non-participation fingerprints and proof of citizenship not required

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006)
- 3) Must provide a copy of birth certificate, naturalization paper or US passport
- 4) Must submit fingerprints (2 cards per person)
- 5) Must be 21 years of age or older
- 6) Applicant may be required to take a training course

**Corporation/Limited Liability Corporation (LLC) information**

Name of Corporation/LLC:

**Premise information**

Premise License Number:   
(if new application leave blank)

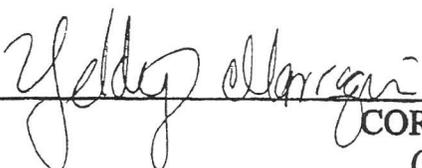
Premise Trade Name/DBA:

Premise Street Address:

City:  Zip Code:

Premise Phone Number:

The individual whose name is listed in the president or captain member category on the application form must sign their name below.

  
CORPORATE OFFICER SIGNATURE  
(Faxed signatures are acceptable)

Manager's information must be completed below. PLEASE PRINT CLEARLY

Gender:  MALE  FEMALE

Last Name: Marroquin First Name: Yeldy MI: Z

Home Address (include PO Box if applicable): 1900 Independance Court

City: Lincoln State: Nebraska Zip Code: 68521

Home Phone Number: 402-261-3912 Business Phone Number: 402-470-3981

Social Security Number: \_\_\_\_\_ Drivers License Number & State: \_\_\_\_\_ Nebraska

Date Of Birth: \_\_\_\_\_ Place Of Birth: Sonsonate, El Salvador

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

YES  NO

Spouse's information

Spouses Last Name: Marroquin First Name: Nixon MI: F

Social Security Number: \_\_\_\_\_ Drivers License Number & State: \_\_\_\_\_ Nebraska

Date Of Birth: \_\_\_\_\_ Place Of Birth: El Salvador

**APPLICANT AND SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST 10 YEARS**

APPLICANT			SPOUSE		
CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, Nebraska	2007	present	Lincoln, Nebraska	2007	present
Omaha, Nebraska	2002	2007	Omaha, Nebraska	2002	2007
Lincoln, Nebraska	995	2002	Lincoln, Nebraska	1994	2002

**MANAGER'S LAST TWO EMPLOYERS**

YEAR FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1997	2004	Restaurante Y Pupuseria El Salvador	Salvador Carcamo	(402)416-1180
2006	2006	University of Nebraska Med Center - WIC program	unknown	(402)595-2284

Manager and spouse must review and answer the questions below.

PLEASE PRINT CLEARLY

1. **READ PARAGRAPH CAREFULLY AND 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 been approved or made application for a liquor license in Nebraska or any other state? **IF YES**, list the name of the premise.

YES

NO

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

YES

NO

4. Have you filed the required fingerprint cards and **PROPER FEES** with this application? (The check or money order must be made out to the Nebraska State Patrol for \$38.00 per person)

YES

NO

5. Do you have any experience in selling alcohol in the State of Nebraska?  
If so list training and/or experience (when and where)

Date:	Where:
2001 - 2004	Restaurante & Pupuseria El Salvador
2001	Responsible Hospitality Council Management Training (under name Yeldy Magana)
4-15-2008	Responsibility Hospitality Council Management Training

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**PERSONAL INFORMATION**

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.

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.

*Yeldy Marroquin*  
Signature of Manager Applicant

*Nija Manquez*  
Signature of Spouse

State of Nebraska

County of Lancaster

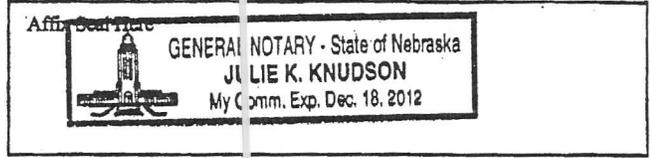
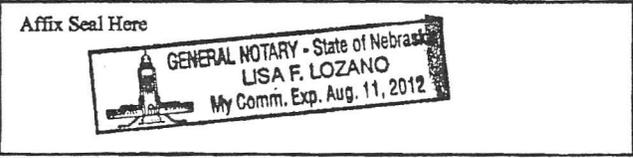
County of Douglas

The foregoing instrument was acknowledged before me this March 20, 2009 by Yeldy Marroquin

The foregoing instrument was acknowledged before me this March 24, 2009 by

*[Signature]*  
Notary Public signature

*Julie K. Knudson*  
Notary Public signature



In compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

No. 23639595

DEPARTMENT OF



NATURALIZATION

Personal description of holder  
as of date of naturalization:

INS Registration No. **A42 245 543**

Date of birth:

I certify that the description given is true, and that the photograph affixed  
hereto is a likeness of me.

Sex: **Female**

*Leticia Carcamo*

(Complete and true signature of holder)

Height: **5** feet **5** inches

Marital status: **Married**

Be it known that, pursuant to an application filed with the Attorney General

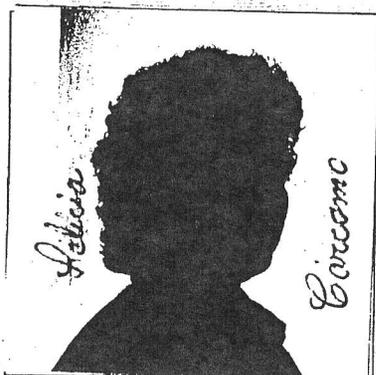
Country of former nationality:

**El Salvador**

at: **Omaha, Nebraska**

The Attorney General having found that:

**LETICIA CARCAMO**



then residing in the United States, intends to reside in the United States when so  
required by the Naturalization Laws of the United States, and had in all other  
respects complied with the applicable provisions of such naturalization laws and was  
entitled to be admitted to citizenship, such person having taken the oath of allegiance  
in a ceremony conducted by the **United States District Court for the**

**District of Nebraska**

at: **Omaha, Nebraska**

on: **November 25, 1997**

that such person is admitted as a citizen of the United States of America.

IT IS PUNISHABLE BY U. S. LAW TO COPY,  
PRINT OR PHOTOGRAPH THIS CERTIFICATE,  
WITHOUT LAWFUL AUTHORITY.

*Haris Weisner*

Commissioner of Immigration and Naturalization

No. 24301051

DEPARTMENT OF



IMMIGRATION AND NATURALIZATION SERVICE

Personal description of holder as of date of naturalization:

INS Registration No. A41 797 639

Date of birth

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.

Sex: Male

*Nixon Marroquin*

(Complete and true signature of holder)

Height: 5 feet 11 inches

Marital status: Single

Be it known that, pursuant to an application filed with the Attorney General

Country of former nationality:

at: Omaha, Nebraska

EL Salvador

The Attorney General having found that:

NIXON FRANKLIN MARROQUIN

then residing in the United States, intends to reside in the United States when so required by the Naturalization Laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and was entitled to be admitted to citizenship, such person having taken the oath of allegiance in a ceremony conducted by the



United States District Court for the District of Nebraska

at: Omaha, Nebraska

on: April 17, 1998

that such person is admitted as a citizen of the United States of America.

*Haris Meisner*

Commissioner of Immigration and Naturalization

IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE, WITHOUT LAWFUL AUTHORITY.

THE UNITED STATES OF AMERICA

No. 23639105

DEPARTMENT OF



NATURALIZATION DIVISION

*I.N.S.* Registration No. A42 473 727

*Personal description of holder as of date of naturalization:*

*Date of birth:*

*Sex:* Female

*Height:* 5 feet 6 inches

*Marital status:* Single

*Country of former nationality:*  
El Salvador

*I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.*

*Yeldy Zuleyma Magana Martinez*  
(Complete and true signature of holder)

*Be it known that, pursuant to an application filed with the Attorney General at:* Omaha, Nebraska

*The Attorney General having found that:*

**YELDY ZULEYMA MAGANA MARTINEZ**

*then residing in the United States, intends to reside in the United States when so required by the Naturalization Laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and was entitled to be admitted to citizenship, such person having taken the oath of allegiance in a ceremony conducted by the*

**United States District Court for the District of Nebraska**

*at:* Lincoln, Nebraska

*on:* July 3, 1997

*that such person is admitted as a citizen of the United States of America.*



IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE, WITHOUT LAWFUL AUTHORITY.

*Carl Meisner*  
Commissioner of Immigration and Naturalization

DEPARTMENT OF JUSTICE

AMENDED ARTICLES OF ORGANIZATION  
LIMITED LIABILITY COMPANY

Submit in Duplicate

John A. Gale, Secretary of State  
Room 1301 State Capitol, P.O. Box 94608  
Lincoln, NE 68509  
(402) 471-4079

<http://www.sos.state.ne.us>

NE Sec of State John A Gale - CORP A  
1000335815 Pgs: 1  
BLUE MANGO HOLDINGS LLC  
Filed: 07/28/2008 08:18 AM

Name of Limited Liability Company Blue Mango Holdings LLC

Please check the item or items that are being amended and provide the appropriate information as changed by the amendment:

Name of Limited Liability Company \_\_\_\_\_

Purpose of Limited Liability Company \_\_\_\_\_

Period of duration is \_\_\_\_\_

Change in stated capital \_\_\_\_\_

Change to any other statement in the articles of organization \_\_\_\_\_

I will be adding a member to our LLC  
Laticia Carcano 1900 Independence Ct  
~~XXXX~~ Lincoln, NE 68521

(attach additional pages if needed)

This change to the articles of organization was made pursuant to an affirmative vote of the majority in interest of the members or in such manner as specifically provided in the articles of organization.

DATED 7/28/08

[Signature]  
Signature of Authorized Representative

Yddy Marroquin  
Printed Name of Authorized Representative

FILING FEE: \$15.00 plus \$5.00 per additional page  
Revised 12/19/2000

Neb. Rev. Stat. 21-2628

STATE OF NEBRASKA ♦ SECRETARY OF STATE'S OFFICE  
1445 "K" STREET • STATE CAPITOL SUITE 1301 • LINCOLN, NE • 68509  
BUSINESS SERVICES DIVISION

CORPORATIONS

P.O. BOX 94608  
(402) 471-4079  
FAX: 471-3666

UNIFORM COMMERCIAL CODE

P.O. BOX 95104  
(402) 471-4080  
FAX: 471-4429

NOTARY

P.O. BOX 95104  
(402) 471-2558  
FAX: 471-4429

JOHN A. GALE  
Secretary of State

[www.sos.state.ne.us](http://www.sos.state.ne.us)

JUDY JOBMAN  
Deputy Secretary of State

BLUE MANGO HOLDINGS LLC  
LINCOLN, NE

AUGUST 25, 2008

RECEIPT

RECEIPT#: C080825-0016

Quantity	Company/Entity Name	Action/Service	Unit Price	Fee Received
5		Copies	1.00	5.00
			Total Paid	\$5.00

Adam Pedersen  
Filing Officer



LLC ARTICLES OF ORGANIZATION (Continued)

Total additional contributions agreed to be made by all members and the times at which, or events upon the happening of which such contributions shall be made:

No agreement respecting additional contributions to capital exist except as hereinafter stated or as provided by the operating agreement.

Members  shall or  shall not have the right to admit additional members (check)

If additional members are allowed the terms and conditions of admission: Additional member in excess of the original (2) two planned members may be admitted to the company from time to time upon the affirmative vote of sixty five (65) percent of the then existing members and upon such terms and conditions of admission as may be determined by the members at the time of admission in accordance with the operating agreement.

The company will be managed by  managers or  members (check one). List the name and address of the managers or, if the management is reserved to the members, the name and address of the members:

Name	Address
<u>Nixon Marroquin</u>	<u>14117 Virginia St, Omaha, NE 68138</u>
<u>Yeldy Marroquin</u>	<u>14117 Virginia St, Omaha, NE 68138</u>

Attach additional pages if needed for additional managers or members. If the LLC has more than one class of membership please attach additional pages with the name or description of each class of membership and the names and addresses of the members in each class.

LLC ARTICLES OF ORGANIZATION (Continued)

Any other provisions, not inconsistent with law, which the members elect to set out in the articles of organization for the limited liability company:

Five horizontal lines for additional provisions.

Only one signature is required, additional persons may sign:

Handwritten signature: Ysely Marroquin
Signature
Printed Name

FILING FEE: \$100.00 plus \$5.00 per page and \$10.00 for certificate of organization

Revised 4/5/2001

Neb. Rev. Stat. 21-2606

# AFFIDAVIT OF PUBLICATION

State of Nebraska }  
LANCASTER COUNTY, } ss.

**ARTICLES OF ORGANIZATION  
LIMITED LIABILITY COMPANY**  
Name of Limited Liability Company:  
Blue Mango Holdings LLC  
Period of Duration: Perpetual  
Purpose for which the limited liability  
company is organized: To own and oper-  
ate Blue Mango Restaurants. To pur-  
chase, take, receive, lease and otherwise  
deal in and with real and personal  
property or an interest in real or per-  
sonal property. To engage in and do any  
lawful act concerning any and all lawful  
business, other than banking or insur-  
ance, for which a limited company may  
be organized under the laws of Nebras-  
ka.  
Principal place of business in Nebras-  
ka: 3830 Adams St., Lincoln, NE 68504  
Registered Agent Name: Yelidy Marro-  
quin  
Address: 3830 Adams St., Lincoln, NE  
68504  
The total amount of cash contributed to  
stated capital of the LLC: \$1,000.00  
Total additional contributions agreed to  
be made by all members and the times  
of which or events upon the happening  
of which such contributions shall be  
made: No agreement respecting addi-  
tional contributions to capital exist except as  
hereinafter stated or as provided by the  
operating agreement.  
Members shall have the right to admit  
additional members.  
If additional members are allowed the  
terms and conditions of admission: Addi-  
tional member in excess of the original  
(2) two planned members may be admit-  
ted to the company from time to time  
upon the affirmative vote of sixty-five  
(65) percent of the then existing mem-  
bers and upon such terms and conditions  
of admission as may be determined by  
the members at the time of admission in  
accordance with the operating agree-  
ment.  
The company will be managed by mem-  
bers:  
Nixon Marroquin, 14117 Virginia St.,  
Omaha, NE 68138  
Yelidy Marroquin, 14117 Virginia St.,  
Omaha, NE 68138  
/s/ Yelidy Marroquin  
#3371637-3x Aug 5, 12, 19

The undersigned, being first duly sworn, depose and says that she/he is a Clerk of the Lincoln Journal Star, legal newspaper printed, published and having a general circulation in the County of Lancaster and State of Nebraska, and that the attached printed notice was published in said newspaper three successive time(s) the first insertion having been on the 5 day of August A.D., 20 05 and thereafter on August 17 + 19, 20 05 and that said newspaper is the legal newspaper under the statutes of the State of Nebraska. The above facts are within my personal knowledge and are further verified by my personal inspection of each notice in each of said issues.

Subscribed in my presence and sworn to before me this \_\_\_\_\_  
day of August 19, 20 05  
Juliana Anne Nordmeyer Notary Public  
Printer's Fee, \$ \_\_\_\_\_

GENERAL NOTARY - State of Nebraska  
JULIANA ANNE NORDMEYER  
My Comm. Exp. Jan. 28, 2008