



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

November 4, 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 Mazatlan II, 2711 King Lane requesting a class I liquor license.

Ruben Palomera has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Ruben Palomera was born in Jalisco, Mexico. He became a United States citizen in 1996.

Ruben Palomera employment history is as follows:

2006 - Present	Manager, Mazatlan	Lincoln, NE.
2005 - 2006	Owner, Las Margaritas	Dubuque, IA
2005- 2003	Cashier, Gas N Shop	Lincoln, NE.
2005	Server, Mazatlan	Lincoln, NE.
1994 - 2005	Server, Azteca	Seattle, WA.

The required training has been completed.

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



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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/

45- 12/14/09

OCT 23 2009

NEBRASKA LIQUOR
CONTROL COMMISSION

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES

CHECK DESIRED CLASS(S)

RETAIL LICENSE(S)

- A BEER, ON SALE ONLY
- B BEER, OFF SALE ONLY
- C BEER, WINE & DISTILLED SPIRITS, ON & OFF SALE
- D BEER, WINE & DISTILLED SPIRITS, OFF SALE ONLY
- I BEER, WINE & DISTILLED SPIRITS, ON SALE ONLY
- Class K Catering license (requires catering application form)

RECEIVED Application Fee

OCT 16 2009

NEBRASKA LIQUOR
CONTROL COMMISSION \$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 31st

All other licenses expire April 30th

Catering license (K) expires 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 & 3c)
- Limited Liability Company (requires form 3b & 3c)

NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(commission will call this person with any questions we may have on this application)

Name Nicholas M. Froeschl Phone number: 402-474-1731

Firm Name Morrow, Poppe, Watermeier & Lonowski, P.C., LLO

PREMISE INFORMATION

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Trade Name (doing business as) Mazatlan II Mexican Restaurant

OCT 16 2009

Street Address #1 2711 King Lane, Suite 201

Street Address #2 _____

NEBRASKA LIQUOR
CONTROL COMMISSION

City Lincoln

County Lancaster

Zip Code 68521

Premise Telephone number 402-438-0665

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Is this location inside the city/village corporate limits:

YES

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

Name Abram Morales

NEBRASKA LIQUOR
CONTROL COMMISSION

Street Address #1 2711 North 70th Street

Street Address #2 _____

City Lincoln

State NE

Zip Code 68505

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

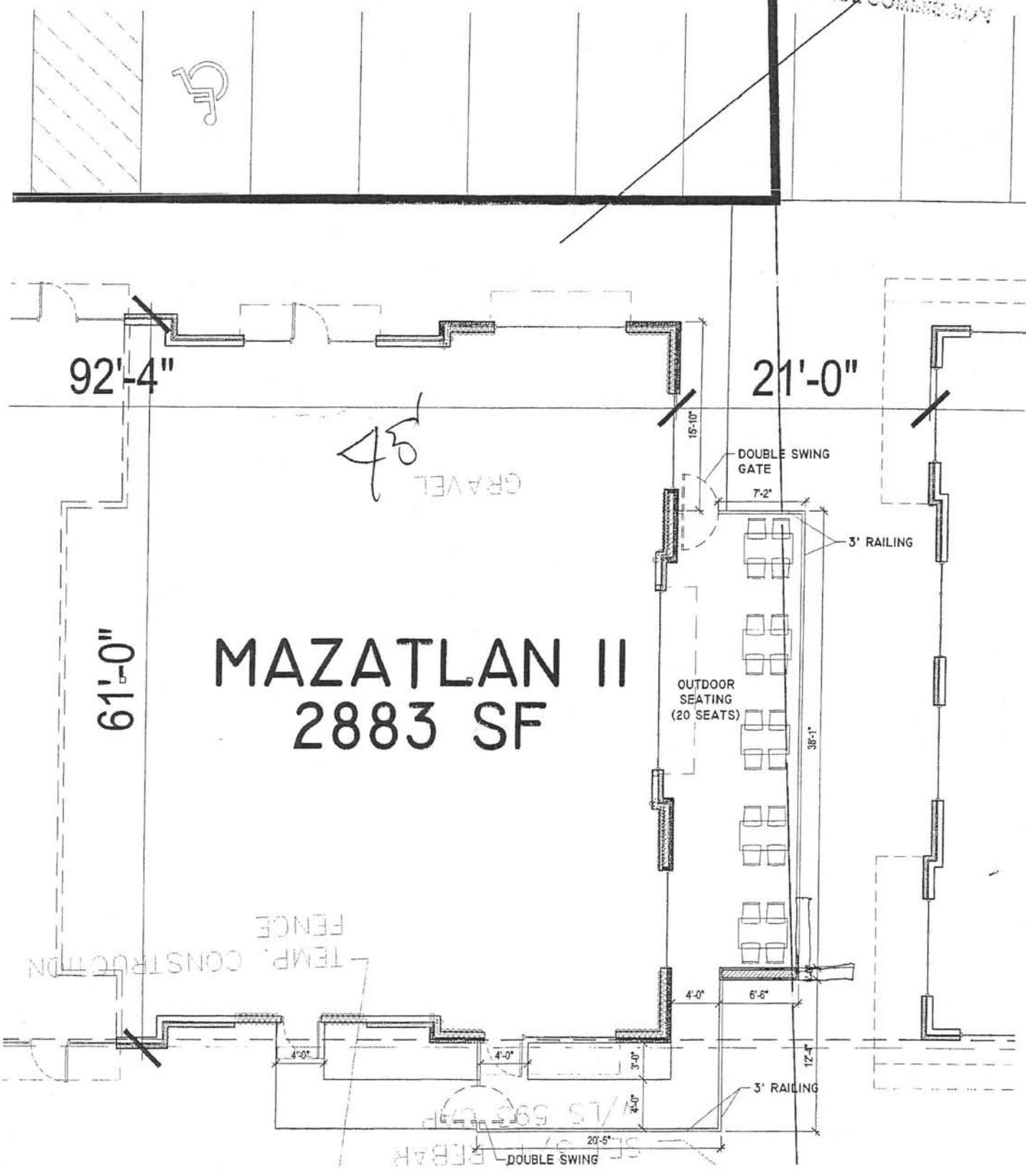
In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length 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.

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

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NEBRASKA LIQUOR
CONTROL COMMISSION



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 NO

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

NEBRASKA LIQUOR CONTROL COMMISSION

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 Monzitto Construction

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. Abram Morales & Axis Equipment Comany

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 (Stat. 53-177)

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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

NEBRASKA LIQUOR CONTROL COMMISSION NEBRASKA LIQUOR CONTROL COMMISSION

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.

Bank of the West

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.

None

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:
Ruben Acre-Palomera	2007	Held liquor license in State of Iowa & Nebraska Liquor Commission Seminar

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 Nov 1 2014
- Deed
- Purchase Agreement

14. When do you intend to open for business? 10/21/2009

15. What will be the main nature of business? Food & Spirit

16. What are the anticipated hours of operation? 11:00 a.m. to 10:00 p.m., Monday through Sunday

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.

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE					
APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Walton, NE	1999	2009	Walton, NE	1999	2009

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(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 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, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock and spouses). Full (birth) names only, no initials.

Abram Morales
Signature of Applicant

Rosaura Morales
Signature of Spouse

Signature of Applicant

Signature of Spouse

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OCT 28 2009
NEBRASKA LIQUOR CONTROL COMMISSION

State of Nebraska

County of Laurel

County of Laurel

The foregoing instrument was acknowledged before me this October 27, 2009 by

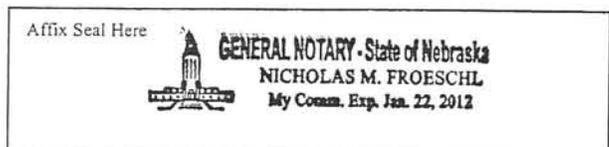
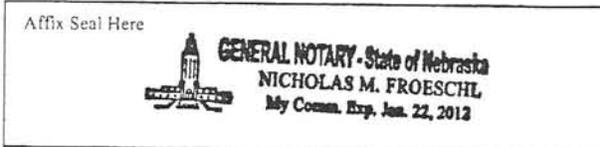
The foregoing instrument was acknowledged before me this October 27, 2009 by

Abram Morales

Rosaura Morales

[Signature]
Notary Public signature

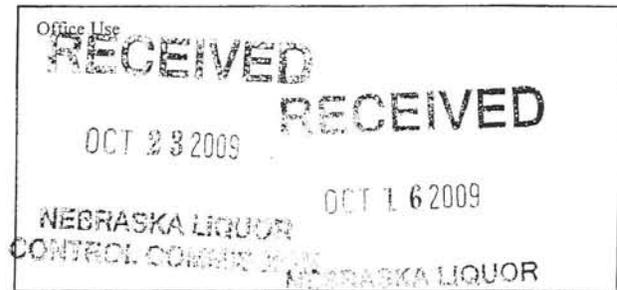
[Signature]
Notary Public signature



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.

APPLICATION FOR LIQUOR LICENSE
CORPORATION
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: www.lcc.ne.gov



Officers, directors and stockholders holding over 25%, including spouses, are required to adhere to the following requirements

- 1) The president and stockholders holding over 25% and their spouse (if applicable) must submit their fingerprints (2 cards per person)
- 2) All officers, directors and stockholders holding over 25 % and their spouse (if applicable) must sign the signature page of the Application for License form (Even if a spousal affidavit has been submitted)

Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: Abram Morales

Name of Corporation that will hold license as listed on the Articles

Las Golondrinas, Inc.

Corporation Address: 2711 King Lane, Suite 201

City: Lincoln

State: NE

Zip Code: 68521

Corporation Phone Number: 402-438-0665

Fax Number _____

Total Number of Corporation Shares Issued: 10,000

Name and notarized signature of president (Information of president must be listed on following page)

Last Name: Morales

First Name: Abram

MI: _____

Home Address: 6601 South 120th Street

City: Walton

State: Nebraska

Zip Code: 68461

Home Phone Number: 402-617-7529

Signature of president

State of Nebraska

County of Lancaster

The foregoing instrument was acknowledged before me this

October 21, 2009

date

by Abram Morales

name of person acknowledged

Notary Public signature

Affix Seal Here



GENERAL NOTARY - State of Nebraska
NICHOLAS M. FROESCHL
My Comm. Exp. Jan. 22, 2012

List names of all officers, directors and stockholders including spouses (Even if a spousal affidavit has been submitted)

Last Name: Morales First Name: Abram MI: _____
Social Security Number _____ Date of Birth: _____
Title: President & Treasurer Number of Shares 5,100
Spouse Full Name (indicate N/A if single): Rosaura Morales
Spouse Social Security Number: _____ Date of Birth: _____

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Last Name: Morales First Name: Rosaura MI: _____
Social Security Number: _____ Date of Birth: _____
Title: Vice-President & Secretary Number of Shares 4,900
Spouse Full Name (indicate N/A if single): Abram Morales
Spouse Social Security Number _____ Date of Birth: _____

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NEBRASKA LIQUOR
CONTROL COMMISSION

Last Name: _____ First Name: _____ MI: _____
Social Security Number: _____ Date of Birth: _____
Title: _____ Number of Shares _____
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: _____
Title: _____ Number of Shares _____
Spouse Full Name (indicate N/A if single): _____
Spouse Social Security Number: _____ Date of Birth: _____

Is the applying Corporation controlled by another Corporation?

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YES

NO

OCT 23 2009

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

NEBRASKA LIQUOR
CONTROL COMMISSION

Indicate the Corporation's tax year with the IRS (Example January through December)

Starting Date: January

Ending Date: December 31

Is this a Non-Profit Corporation?

YES

NO

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If yes, provide the Federal ID #.

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NEBRASKA LIQUOR
CONTROL COMMISSION

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

REVISED 5/2007

**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

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NEBRASKA LIQUOR CONTROL COMMISSION

Corporate manager, including their spouse, are required to adhere to the following requirements **NEBRASKA LIQUOR CONTROL COMMISSION**

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006)
- 3) Must provide a copy of their certified birth certificate or INS papers
- 4) Must submit their 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/LLC information

Name of Corporation/LLC: Las Golondrinas, Inc.

Premise information

Premise License Number: _____

Premise Trade Name/DBA: Mazatlan II Mexican Restaurant

Premise Street Address: 2711 King Lane #201

City: Lincoln State: NE Zip Code: 68521

Premise Phone Number: 402-438-0665

The individual whose name is listed in the president or contact member category on either insert form 3a or 3b must sign their name below.

ASLAN MLO
CORPORATE OFFICER SIGNATURE
(Faxed signatures are acceptable)

Manager's information must be completed below PLEASE PRINT

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OCT 16 2009

Gender: MALE FEMALE

Last Name: Arce-Palomera

First Name: Ruben

NEBRASKA LIQUOR CONTROL COMMISSION NEBRASKA LIQUOR CONTROL COMMISSION

Home Address (include PO Box if applicable): 820 Foxcroft Court #152

City: Lincoln State: NE Zip Code: 68510

Home Phone Number: 402-327-9915 Business Phone Number:

Social Security Number Drivers License Number & State

Date Of Birth: Place Of Birth: Jalisco, Mexico

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: Arce First Name: Maria MI: J

Social Security Number Drivers License Number & State

Date Of Birth: Place Of Birth: Jalisco, Mexico

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

APPLICANT

SPOUSE

CITY & STATE	YEAR		CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Seattle, WA	1996	2004	Seattle, WA	1996	2004
Lee Summit, MO	2004	2004	Lee Summit, MO	2004	2004
Lincoln, NE	2004	2005	Lincoln, NE	2004	2005
Dubuque, IA	2005	2006	Dubuque, IA	2005	2006

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2006	2009	Mazatlan Restaurant	Abram Morales	402-617-7529

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Manager and spouse must review and answer the questions below
PLEASE PRINT CLEARLY

NEBRASKA LIQUOR
CONTROL COMMISSION

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.

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NEBRASKA LIQUOR
CONTROL COMMISSION

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

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PERSONAL OATH AND CONSENT OF INVESTIGATION

OCT 16 2009

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, a spousal 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.

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NEBRASKA LIQUOR CONTROL COMMISSION

Ruben Arce
Signature of Manager Applicant

Maria de Jesus G Arce
Signature of Spouse

State of Nebraska

County of Lancaster

County of Lancaster

The foregoing instrument was acknowledged before me this Oct. 15, 2009 by

The foregoing instrument was acknowledged before me this Oct. 15, 2009 by

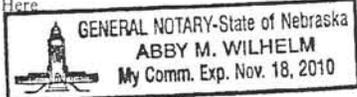
Ruben Arce

Maria Arce

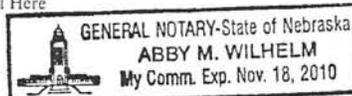
Abby M. Wilhelm
Notary Public signature

Abby M. Wilhelm
Notary Public signature

Affix Seal Here



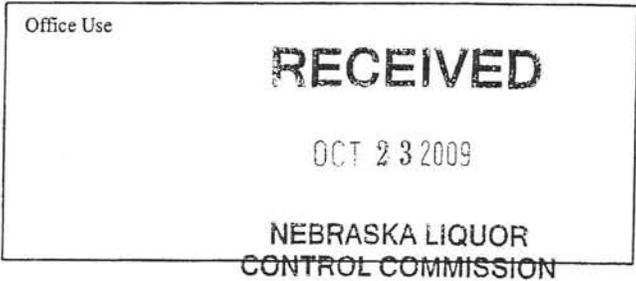
Affix Seal Here



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**SPOUSAL AFFIDAVIT OF
NON PARTICIPATION INSERT**

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



I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

Maria de Jesus G Arce
Signature of spouse asking for waiver
(Spouse of individual listed below)

Maria Arce
Printed name of spouse asking for waiver

State of Nebraska

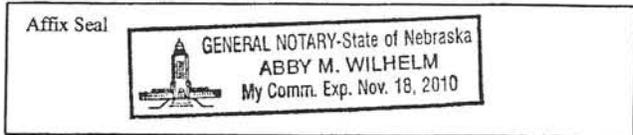
County of Laurens

The foregoing instrument was acknowledged before me this

October 21, 2009
date

by Maria Arce
name of person acknowledged

Abby M. Wilhelm
Notary Public signature



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

Ruben Arce
Signature of individual involved with application
(Spouse of individual listed above)

Ruben Arce
Printed name of applying individual

State of Nebraska

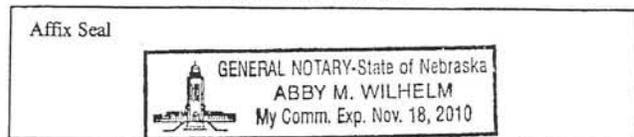
County of Laurens

The foregoing instrument was acknowledged before me this

October 21, 2009
date

by Ruben Arce
name of person acknowledged

Abby M. Wilhelm
Notary Public signature



In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

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NEBRASKA LIQUOR CONTROL COMMISSION

APR 23 2009

DEPARTMENT OF JUSTICE

DEPARTMENT OF JUSTICE

No. 21412844



Personal description of holder
of date of naturalization:

INS Registration No. A90 338 582

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

Date of birth:

Sex: MALE

Ruben Arce Palomera
(Complete and true signature of holder)

Height: 5 feet 9 inches

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

Marital status: MARRIED

at: SEATTLE, WASHINGTON

Country of former nationality:

The Attorney General having found that:

MEXICO

***** RUBEN ARCE-PALOMERA *****



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 IMMIGRATION AND NATURALIZATION SERVICE

at: SEATTLE, WASHINGTON on: 04/17/96

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

Doris Meissner

Commissioner of Immigration and Naturalization

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

DEPARTMENT OF JUSTICE