



Gene Walborn
Director

Montana Department of Revenue



Steve Bullock
Governor

October 19, 2018

License Type: Montana Retail On-Premises Consumption Beer and Wine License
License Number: 13-841-6482-301

Subject: Transfer of Ownership
Applicant: MBSII OPS, LLC
Location Address: d/b/a Montana Lil's of Woodside, 915 US Highway 93 N Ste 2, Victor,
Ravalli County, Montana

EXISTING LICENSED PREMISES

We need your help to determine if the above applicant and location comply with all laws and ordinances administered by your office. We ask that you advise us by **November 19, 2018**, if there is a compliance issue. We will assume the laws and ordinances have been met if we don't hear from you by that date.

Building, health and fire approval will be required before department approval will be considered.
Building, health and fire officials will be contacted by the applicant to schedule final inspections.

It is important for you to understand that local laws are not enforced through the alcoholic beverage licensing process. There are additional factors that can influence the issuance of a license or prevent processing of the application such as:

- Compliance with local laws may influence our final decision; and
- Notification of a local deficiency

Questions? Please contact me at the address, telephone number or e-mail below.

Sincerely,

Jamie Williams
Compliance Specialist
Alcoholic Beverage Control Division
PO Box 1712
Helena MT 59604-1712
Phone: (406) 444-0712
Email: JWilliams@mt.gov

Encl. Floor Plan and Application Pages
Certificate of Service

CERTIFICATE OF SERVICE

I certify that on this 19th day of October, 2018, a true and correct copy of the foregoing has been served by sending via email and addressed as follows:

STATE BUILDING STANDARDS DIVISION
PROGRAM MANAGER
Steve Clark, State Building Inspector
sclark@mt.gov

RAVALLI COUNTY SANITARIAN
215 S 4TH STREET STE D
HAMILTON MT 59840
jfrase@rc.mt.gov
jpalacio@rc.mt.gov

DICK SWINGLEY, STATE FIRE MARSHAL
FIRE PREVENTION AND INVESTIGATION BUREAU
diswingley@mt.gov

Dawn Drollinger, Deputy State Fire Marshal
ddrollinger@mt.gov

RAVALLI COUNTY COMMISSIONERS
COURTHOUSE
205 BEDFORD ST #5001
HAMILTON MT 59840
commissioners@rc.mt.gov

RAVALLI COUNTY ATTORNEY
BILL FULBRIGHT
COURTHOUSE
205 BEDFORD ST. #5008 SUITE C
HAMILTON MT 59840
bfulbright@rc.mt.gov

RAVALLI COUNTY SHERIFF
CHRIS HOFFMAN
205 BEDFORD ST #5022 SUITE G
HAMILTON MT 59840
sholton@rc.mt.gov

Jamie Williams
Compliance Specialist

RECEIVED BY

Clear Form



Montana Department of REVENUE 19 2018

GAMBLING CONTROL DIVISION

Alcoholic Beverages Gambling Operator Short Form



Section I - Purpose and Fees

Personal/Criminal History Statements (Form 10), fingerprint cards and fees (\$27.25 per person) are required for certain transactions. Review the checklists and instructions in Section IV for documents required with this form.

Check one of the boxes below.

No processing fee:

- Change in ownership less than 10% (liquor only)
Death of a licensee
Disclosure of a new owner (more than 0% and less than 10% - liquor only)
Divorce among licensees
Foreclosure (not intending to operate)
Gifting among licensees
Sale among licensees

\$200 Processing Fee (liquor licenses only):

Note: These transactions require the Department of Revenue to publish a notice in the local newspaper.

- Entity type change
Foreclosure (intending to operate)
Increase of current ownership interest (from less than 10% increasing to more than 10%)
License type change
Transfer of location

Is the premises:

- Yes No Ready for use?
Yes No Newly constructed premises? If yes, estimated date of completion
Yes No Remodel of an existing premises? If yes, estimated date of completion
Yes No Operated under a concession agreement? If yes, attach a copy of the agreement.

Note: ARM 42.12.133 requires certain signage for premises operated under a concession agreement.

FOR OFFICE USE ONLY
Check Number
Processing Fee Paid \$
Fingerprint Fee Paid \$

Reason for Application Corporate restructure assigning the operating assets from Townhouse Inns of Conrad, Inc. to a Single Member LLC, which will be a subsidiary to Townhouse Inns of Conrad, Inc.

Section II - General Information

Name of Current Licensed Entity Townhouse Inns of Conrad, Inc.
Current Business Name (DBA) Montana Lil's of Woodside FEIN
Name of New Entity (if applicable) MBDII Ops LLC
New Business Name/DBA (if applicable)
Account ID Current License Number
Current Physical Address 915 US Hwy 93 N, Suite 2, Victor, MT 59875
Proposed Physical Address same as above
Mailing Address P.O. Box 6000
Business Phone (406) 497-6923 Cell Phone NA
Email Address monicab@townpump.com

Attorney Information

Check this box and complete the information below if you wish to have all correspondence sent to the attorney who submits this application on your behalf.

Attorney Name _____ Phone _____

Mailing Address _____
Street, Suite Number City State Zip

Email Address _____

Section III - Declaration and Authorization

I, Thomas P. Kenneally, declare under the penalty of false swearing that I am the applicant or duly authorized representative of the entity making this application and that I have examined the application, including any accompanying information, and that the responses provided herein are true, correct and complete. I understand if this application or attachment(s) contains false information, I am subject to the criminal penalties of Montana Code Annotated 45-7-202, 45-7-203 and 45-7-208, and revocation of any alcoholic beverage or gambling licenses granted pursuant to this application.

I further authorize a full review, disclosure and release to any duly authorized officer, agent or employee of the Montana Department of Justice, Gambling Control Division, of any and all records concerning me that the Montana Department of Justice properly determines relate to my qualifications for gambling or liquor licensure, whether the records are of a public, private or confidential nature.

Signature Thomas P. Kenneally

Print Full Name Thomas P. Kenneally

Title/Position Manager

Date 1/19/18

Note: The Gambling Control or Liquor Control Division may require the applicant to send additional documents or information. This application and the documents and information provided will be reviewed under an amended license process and final approval will correspond with those procedures. If you have any questions, please contact the Gambling Control Division at (406) 444-1971.

Mall this application and required documents and fees to:

Gambling Control Division
PO Box 201424
Helena, MT 59620

State of Montana
DOJ Gambling Control Division/DOR Liquor Control Division
Business Statement

The Business Statement form is used to identify the people involved with the business (i.e. owners, officers, directors, etc.). If an entity (i.e. corporation, partnership, etc.) holds ownership interest in the business, please provide the FEIN of each entity owner, and identify the applicable percentage of ownership interest. If more than one entity has ownership interest, a separate form must be completed for each entity. *Note: Shares must add up to 100%.

Print or Type

Account ID No./Liquor License No: 4 SSN OR FEIN: _____

Entity Name (LLC, LLP, Corp., etc.) MBDII Ops LLC

Establishment Name (DBA) Montana Lil's of Woodside

List the Individual Owners, Stockholders, or Members of the Business (use additional paper if necessary):

Name	SSN/FEIN	Date of Birth	% of Ownership <small>(must equal 100%)</small>	# of Shares
See Attached				

List Officers, Directors or Managers of the Business (use additional paper if necessary):

Name	SSN/FEIN	Date of Birth	Title
See Attached			

Please submit (to the address below) the following items for each individual listed in the tables above unless the individual has been previously disclosed to the division in the past two years:

- Two fingerprint cards,
- Personal/Criminal History Statement (Form 10), and
- \$27.25 background check processing fee.

RECEIVED BY

SEP 19 2018

Gambling Control Division, PO Box 201424, Helena, MT 59620 **GAMBLING CONTROL DIVISION**

I affirm I am authorized to make this application for the applicant and that the answers contained herein are true and complete. If this application or attachments contain false information, I understand I may be subject to the criminal penalties of Montana Code Annotated § 45-7-202, 45-7-203, 45-7-208, 16-4-402 and/or revocation of any gambling and/or liquor licenses granted pursuant to this application.

Thomas P. Kenneally
Signature

10/12/18
Date

Thomas P. Kenneally, Manager
Print Name and Title of Person Signing

MBDII OPS LLC
Organized October 9, 2017

MANAGERS:

<u>NAME</u>	<u>ADDRESS</u>	<u>DOB</u>	<u>SSN/EIN</u>
Thomas P. Kenneally	1201 Antimony, Butte		
Daniel J. Kenneally	4000 Hillside Drive, Butte		
James M. Kenneally	121 Rampart, Butte	-----	-----

Owners:

<u>NAME</u>	<u>ADDRESS</u>	<u>FEIN</u>	<u>%</u>
TOWNHOUSE INNS OF CONRAD, INC.	600 S. Main, Butte, MT		100

TOWNHOUSE INNS OF CONRAD, INC.
DATE OF INCORPORATION: MARCH 19, 1986
PLACE OF INCORPORATION: MONTANA

DIRECTORS/OFFICERS OF TOWNHOUSE INNS OF CONRAD, INC.

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PHONE</u>
Thomas P. Kenneally	President/Dir.	600 S. Main, Butte	497-6700
Daniel J. Kenneally	Vice Pres./Dir.	600 S. Main, Butte	497-6700
James M. Kenneally	Secretary	600 S. Main, Butte	497-6700
Kevin J. Kenneally	Director	600 S. Main, Butte	497-6700

SHAREHOLDERS OF TOWNHOUSE INNS OF CONRAD, INC.

(.1 % Ownership) CLASS A SHARES

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>EIN</u>	<u>%</u>
ENDEAVORING TRUST Trustee-Endeavoring PTC, Inc.	100 W. Liberty, 10 th flr, Reno, NV 89501	(775) 788-2000		.1

DIRECTORS/OFFICERS OF ENDEAVORING PTC, INC.

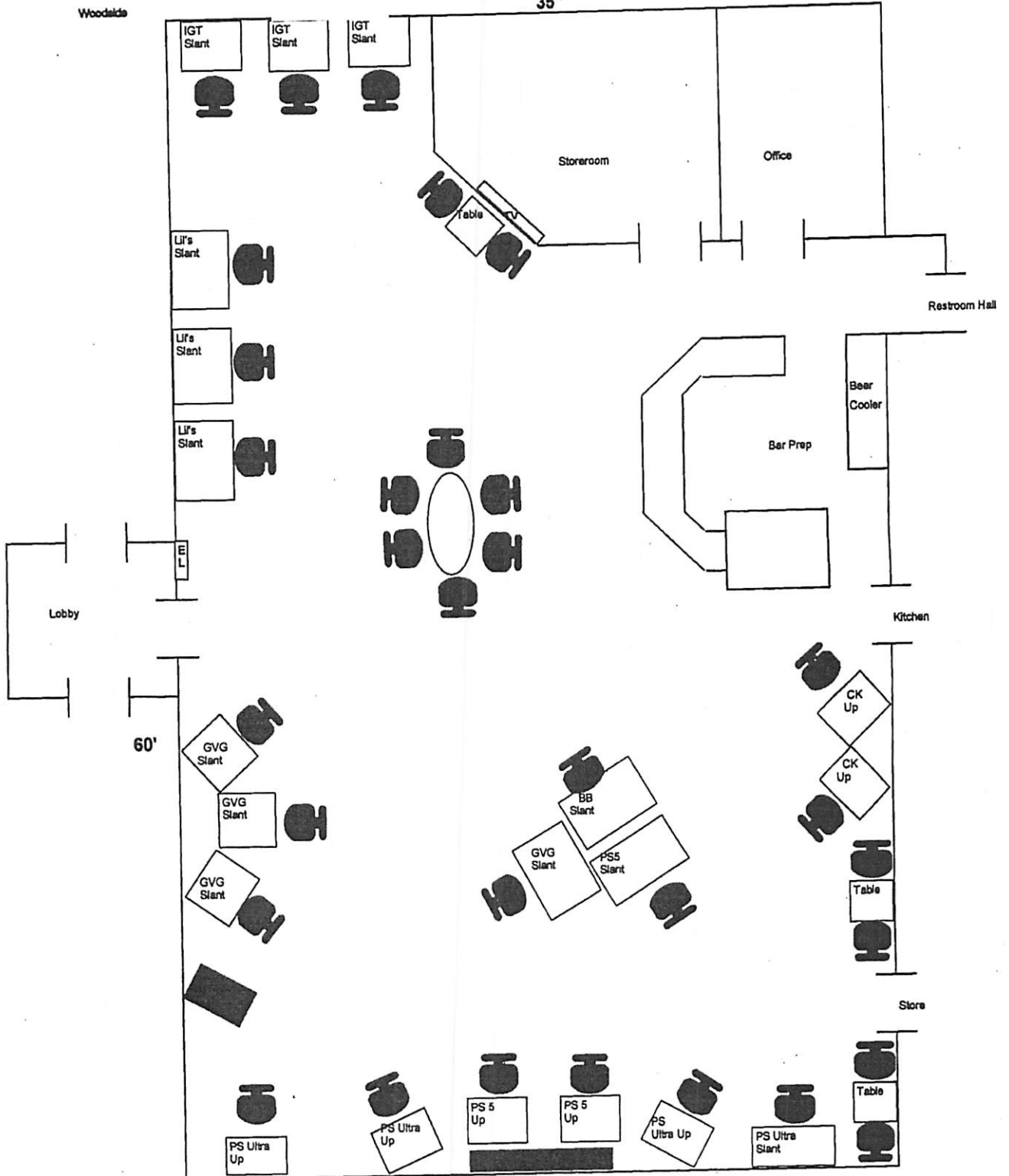
<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>DOB</u>	<u>SSN</u>
Thomas P. Kenneally	VP/Director	1201 Antimony, Butte		
Daniel J. Kenneally	Treasurer/Dir.	4000 Hillside Drive, Butte		
James M. Kenneally	Secretary/Dir.	121 Rampart, Butte		
Kevin J. Kenneally	Director	341 Blacktail Cyn Rd., Butte		
Michael E. Kenneally	Director	3355 Blacktail Loop, Butte		
Raymond L. Sutton, Jr.	Asst. Sec./Dir.	1801 California St., Denver		
*Robert E. Armstrong	President	100 W. Liberty St., Nevada		

(99.9 % Ownership) CLASS C SHARES

<u>NAME</u>	<u>ADDRESS</u>	<u>FEIN</u>	<u>%</u>
PAUL, LLC Wholly owned by Pomeroy Trust Trustee-Endeavoring PTC, Inc.	600 S. MAIN BUTTE, MT 59701		19.98
DANLA, LLC Wholly owned by Danners Trust Trustee-Endeavoring PTC, Inc.	600 S. MAIN BUTTE, MT 59701		19.98
JOHNS, LLC Wholly owned by Johnson Trust Trustee-Endeavoring PTC, Inc.	600 S. MAIN BUTTE, MT 59701		19.98
KOPE, LLC Wholly owned by Kinsey Trust Trustee-Endeavoring PTC, Inc.	600 S. MAIN BUTTE, MT 59701		19.98
LUCAS, LLC Wholly owned by Leonard Trust Trustee-Endeavoring PTC, Inc.	600 S. MAIN BUTTE, MT 59701		19.98

*Pursuant to Article VI of the Bylaws of Endeavoring PTC, Inc. no Director/Officer shall have decision making authority with respect to the business operations of any Regulated Business in which a trust owns an interest unless such officer is approved to do so by the Divisions.

Montana LI's of Woodside
918 112 Hwy 91 N Suite 2, Victor, MT 59875



RECEIVED BY

SEP 19 2018

GAMBLING CONTROL DIVISION