Original Alcohol Bev	verage Retail Lic	ense Application	Applicant's Wi Seller's Permit No.: FEIN 456-1030037326-128 82	Number: -7579	977				
Submit to municipal clerk.	LICENSE REQUESTED								
For the license period beginning ending	Sept. 14 2018	5 20 18 ·	TYPE		EE				
endina	June 30 2019	20 19	☐ Class A beer	\$					
			Class B beer	\$ 83.	40				
	☐ Town of 🥤		Class C wine	\$					
TO THE GOVERNING BODY of the	ne: 🔲 Village of } <u>La C</u>	rosse	☐ Class A liquor	\$					
	✓ City of		Class A liquor (cider only)	\$ N	/A				
County of La Crosse	Aldermania Dist. No.	(if negational by audinomas)	⊠Class B liquor	\$ 416,	70				
County of La Closse	Aldermanic Dist. No.	(a required by ordinance)	Reserve Class B liquor	\$					
1. The named Individual	☐ Partnership \( \)	∠ Limited Liability Company	Class B (wine only) winery						
	Nonprofit Organization	& Littled Elability Company	Publication fee	\$ 20.	20				
hereby makes application for the	•	akad ahaya	TOTAL FEE	\$ 520	2.17				
	•				<u>×10</u>				
<ol> <li>Name (individual/partners give las The Driftless Axe LLC (Fa</li> </ol>		ns/irmited liability companies give re	gistered name):						
		ed and attached to this application	n hu and Individual andiant b						
nartnership, and by each office	ronn Ai-103, must be complet ir. director and agent of a corn	ed and attached to this application, oration or nonprofit organization,	in by each individual applicant, by	y each me Id agent o	mider of a f a limited				
liability company. List the name	title, and place of residence of	each person.	and by each memberananager an	iu agent o	i a militeu				
Title		st, First, M.I.) Ho		office & Zij	Code				
President/Member Owner	Farley,	Toby, J P	O Box 1482, La Crosse	5460	)2				
Vice President/Member									
Secretary/Member									
Treasurer/Member									
Agent ▶ Toby Farley									
Directors/Managers									
3. Trade Name ▶ The Driftless	Axe		Phone Number 608-571-7246	3					
4. Address of Premises ▶ 300	4th St. S. #101 Lal	iesse Wi Sykol Post Offi	ce & Zip Code ▶ 5460	77					
		pany subject to completion of the res							
training course for this license per	riod?	••••••		Yes	₹ No				
		one except the named applicant? .			₹ No				
					☑ No				
8. (a) Corporate/limited liability c									
	(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?								
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or									
agent hold any interest in any other alcohol beverage license or permit in Wisconsin?									
(NOTE: All applicants explain fully	y on reverse side of this form eve	ery YES answer in sections 5, 6, 7 a	nd 8 above.)						
9. Premises description: Describe but	uilding or buildings where alcoho	ol beverages are to be sold and store	ed. The applicant must include						
				beverage	Ş				
may be sold and stored only on the	ne premises described.) <i>flo</i>	consumption, and/or storage of alcol Lin Floor of 300 4th 51.54	101 Codels, backgoon	behind	bar				
To: Eogor ocsonpaon (unaten su out at	acress is given apevo)								
11. (a) Was this premises licensed for		g the past license year?		Yes	√ No				
(b) If yes, under what name was									
12. Does the applicant understand the	ey must register as a Retail Bev	erage Alcohol Dealer with the federa	al government, Alcohol and						
		) before beginning business? (phon	ie 1-877-882-3277]	✓ Yes	☐ No				
13. Does the applicant understand the	•			<u> </u>	<b>-</b>				
				✓ Yes	☐ No				
14. Does the applicant understand the	at triey must purchase alconol be	everages only from Wisconsin whole	esalers, breweries and brewpubs?	Yes Yes	☐ No				
READ CAREFULLY BEFORE SIGNING: knowledge of the signer. Any person who ke this business according to law and that the a partnership applicant must sign; one conduring inspection will be deemed a refusal	nowingly provides materially false ir rights and responsibilities conferred porate officer, one member/manage	nformation on this application may be red d by the license(s), if granted, will not be er of Limited Liability Companies must s	quired to forfeit not more than \$1,000. Se assigned to another. (Individual applicition.) Any lack of access to any portion action of this license.	igner agree ants, or one of a license	s to operate member of ed premises				
TO BE COMPLETED BY CLERK  Date received and filed with municipal clerk   D	Date reported to council / board	Date provisional ticense issued	Signature of Clerk / Deputy Clerk						
Aug 13 7, 2018	are repuriou to countrie r coald	Data provisional acerisa issued	organizate or Greak a Deputy Citik						
Date license granted D	ate license issued	License number issued							
AT-106 (R. 7-18) /59252			Wisconsin	Department	t of Revenue				

Appropriate the second of the

CITY OF LA CROSSE, WI
General Billing - 159282 - 2018
005254-0067 Courtney... 08/13/2018 10:15AM
193919 - THE DRIFTLESS AXE LLC

Payment Amount: 520.10

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## SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

AT-104 (R 4-09)

iauar must	appoint an agent. oration/organization	The following au-	estions must be answered	t by the agent. The appointm	ment must be signed by the officer(s) commendation made by the proper		
ocal officia		Town					
To the gov	erning body of:	Village of	La Crosse	County of	La Crosse		
		✓ City					
The under	signed duly author	rized officer(s)/m	embers/managers of Th	ne Driftless Axe, LLC			
				(registered name of corporation/o	rganization or limited liability company)		
a corporati	on/organization or	limited liability co	mpany making applicatio	n for an alcohol beverage lic	ense for a premises known as		
	less Axe						
			(trade nam	е)			
located at	300 4th St S #101, La Crosse WI 54601						
appoints	Toby Farley		(name of appoint	ad agent)			
	PO Box 1482 La Crosse, WI 54602						
			(hame address of app	ointed agent)			
to alcohol	beverages conduc	cted therein. Is an	plicant agent presently a	authority and control of the p cting in that capacity or requ or liquor license for any othe	oremises and of all business relative lesting approval for any corporation/ r location in Wisconsin?		
Yes	⊠ No If so	, indicate the corp	porate name(s)/limited lia	bility company(ies) and muni	cipality(ies).		
			ible beverses so	nuc training course?	Yes No		
			responsible beverage se	<i>j</i> ,			
How long i	mmediately prior t	o making this app	dication has the applicant	agent resided continuously	in Wisconsin ? 42		
Place of re	esidence last year	Catgut Marin	a, French Island/La	Crosse, WI			
	For:	The Driftless	Axe, LLC	oration/organization/limited liability o	omnany)		
	D.,,		The same of the sa	orallorvorgariizalloriviiiriiled ilaoiilly o	Ompanyy		
	Ву:		10 5 V (eigi	fature of Officer/Member/Manager)			
	And:						
			(sigi	nature of Officer/Member/Manager)			
			ACCEPTANCE	BY AGENT			
, Toby !	Farley		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ept this appointment as agent for the		
i, 100y i	ancy	(print/type age	nt's name)	, nereby acc	ept this appointment as agent for the		
corporatio beverages	n/organization/lim	ited liability come premises for the	pany and assume full re e corporation/organizatio	esponsibility for the conduction/limited liability company.	t of all business relative to alcohol		
				9/12/15	Agent's age 42		
		gature okagenty		8/13/18	Agent's age		
PO Box	1482, La Cros			• •	Date of birth		
1000	1402, 24 0100		ddress of agent)				
		APPF (Cle	ROVAL OF AGENT BY North Cannot sign on beha	MUNICIPAL AUTHORITY If of Municipal Official)			
I hereby c	ertify that I have o cter, record and re	hecked municipa	I and state criminal reco		ledge, with the available information ed.		
Approved	on 08/15/	L <b>S</b> by	2117	Title	(town chair, village president, police chief)		

Wisconsin Department of Revenue