



State of North Carolina
ALCOHOLIC BEVERAGE CONTROL COMMISSION

4307 MAIL SERVICE CENTER
RALEIGH, NC 27699-4307

(919) 779-0700
FAX (919) 662-3583

CORPORATION

LIST OF OFFICERS AND STOCKHOLDERS:

Table with 3 columns: NAME, TITLE, % OF STOCK OWNED. Includes three blank rows for data entry.

SIGNED: _____

LIMITED LIABILITY COMPANY

LIST OF MEMBERS AND PERCENTAGE OF MEMBER'S INTEREST:

Table with 2 columns: NAME, % OF MEMBER'S INTEREST. Includes three blank rows for data entry.

SIGNED: _____

STATE OF NORTH CAROLINA, COUNTY OF _____

I CERTIFY THAT _____ PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE DUE EXECUTION OF THE FOREGOING DOCUMENT. WITNESS MY HAND AND OFFICIAL SEAL, THIS _____ DAY OF _____, 20____.

NOTARY PUBLIC MY COMMISSION EXPIRES: _____