

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

ABC 211 (6/99)

TO: Department of Alcoholic Beverage Control
 100 PASEO DE SAN ANTONIO
 ROOM 119
 SAN JOSE, CA 95113
 (408) 277-1200

File Number: **580461**
 Receipt Number: **2422197**
 Geographical Code: **4303**
 Copies Mailed Date: **April 12, 2017**
 Issued Date:

DISTRICT SERVING LOCATION: **SAN JOSE**First Owner: **BARISTA DAN INC**Name of Business: **BITTER+SWEET**

Location of Business: **20560 TOWN CENTER LN**
CUPERTINO, CA 95014-3200

County: **SANTA CLARA**Is Premise inside city limits? **Yes** Census Tract **5080.01**

Mailing Address:
 (If different from
 premises address)

Type of license(s): **41**Transferor's license/name: **538154 / BITTER+SWEET LLC**Dropping Partner: Yes ☐ No ☒

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
41 - On-Sale Beer And Wine	PERSON-TO-PERSON TRANSFER	NA	Y	0	04/12/17	\$150.00
41 - On-Sale Beer And Wine	ANNUAL FEE	NA	Y	0	04/12/17	\$350.00
NA	STATE FINGERPRINTS	NA	N	1	04/12/17	\$39.00
NA	FEDERAL FINGERPRINTS	NA	N	1	04/12/17	\$24.00
Total						\$563.00

Have you ever been convicted of a felony? **No**

Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the
 Department pertaining to the Act? **No**

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in an on-sale licensed premises will have all the qualifications
 of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the
 Alcoholic Beverage Control Act.

STATE OF CALIFORNIA County of **SANTA CLARA**Date: **April 12, 2017**

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Effective July 1, 2012, Revenue and Taxation Code Section 7057, authorizes the State Board of Equalization and the Franchise Tax Board to share taxpayer information with Department of Alcoholic Beverage Control. The Department may suspend, revoke, and refuse to issue a license if the licensee's name appears in the 500 largest tax delinquencies list. (Business and Professions Code Section 494.5.)

Applicant Name(s)

BARISTA DAN INC

Applicant Signature(s)

X [Signature] President
X [Signature] Secretary

Fictitious Business Name (FBN) Statement (includes registration of 1 business name, 1 or 2 registrants and 1 certified copy)..... \$40.00

Each additional business name and/or registrant (must have the same business address and registrant) on the same statement \$7.00

FICTITIOUS BUSINESS NAME

FILED WITH THE COUNTY CLERK-RECORDER OF SANTA CLARA COUNTY ON THE DATE IDENTIFIED ON THE FILING LABEL

FOR COUNTY CLERK-RECORDER'S USE

Filed in County Clerk's Office

Regina Alcomendras
Santa Clara County - Clerk-Recorder

FBN629270

04/27/2017

FBN

Pages: 1

Fee: \$40.00

Exp: 04/27/2022

By schanthasy, Deputy

The following person (persons) is (are) doing business as: (Use the ADDENDUM page to list additional fictitious business names.)

1. FICTITIOUS BUSINESS NAME
BITTER+SWEET

2. at: (DO NOT USE P.O. BOX, PRIVATE MAIL BOX ADDRESSES)
STREET ADDRESS OF PRINCIPAL PLACE OF BUSINESS CITY STATE ZIP COUNTY
20560 TOWN CENTER LN CUPERTINO CA 95014 SANTA CLARA

If the principal place of business identified in #2 above is not in Santa Clara County, a current fictitious business name statement for the fictitious business name(s) identified in #1 above shall be on file at the above-identified County that is the principal place of business. If applicable, please complete #3 below:

3. ☐ THE PRINCIPAL PLACE OF BUSINESS IS IN _____ COUNTY AND A CURRENT FICTITIOUS BUSINESS NAME STATEMENT IS ON FILE AT THE COUNTY CLERK-RECORDER'S OFFICE OF SAID COUNTY.

This business is owned by: (An asterisk (*) item requires proof of registration with the California Secretary of State's Office)

4. ☐ AN INDIVIDUAL ☐ A GENERAL PARTNERSHIP ☐ A LIMITED PARTNERSHIP ☐ A LIMITED LIABILITY COMPANY
☐ AN UNINCORPORATED ASSOCIATION OTHER THAN A PARTNERSHIP ☒ A CORPORATION ☐ A TRUST ☐ COPARTNERS
☐ MARRIED COUPLE ☐ JOINT VENTURE ☐ STATE OR LOCAL REGISTERED DOMESTIC PARTNERS ☐ LIMITED LIABILITY PARTNERSHIP

The name and residence address of the registrant(s) is (are):

(DO NOT USE P.O. BOX, PRIVATE MAIL BOX ADDRESSES)

NOTE: General Partnerships, Copartnership, Joint Venture, Limited Liability Partnership, Unincorporated Association, and Limited Partnership - Insert name and residence address of each General Partner, Trusts - Insert the full name and resident address of each trustee; Limited Liability Company and Corporation - Insert full name and address of Limited Liability Company or Corporation as registered with the California Secretary of State's Office; State or local registered Domestic Partners - Insert full name and residence address of each Domestic Partner.

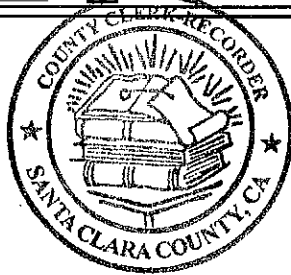
USE THE ADDENDUM PAGE TO LIST ADDITIONAL NAMES AND ADDRESSES

5. NAME ADDRESS CITY STATE ZIP
BARISTA DAN, INC 477 PRADA DRIVE MILPITAS CA 95035

NAME ADDRESS CITY STATE ZIP

Registrant began transacting business under the fictitious business name(s) listed above on:

6. ☐ DATE: _____ ☒ NOT APPLICABLE



CLERK-RECORDER SEAL

This filing is a:

7. ☒ First Filing (Publication Required)
☐ Refile of previous file # _____ (check appropriate box, below)
☐ Refiled prior to expiration or within 40 days past expiration, with NO CHANGES
☐ With changes (Publication Required)
☐ After 40 days of expiration date (Publication Required)
☐ Due to publication requirement not met on previous filing (Publication Required)

I hereby certify that this copy is a correct copy of the original

Fictitious Business Name Statement on file in my office.

Regina Alcomendras, Santa Clara County Clerk-Recorder

By *[Signature]* Deputy

Dated: APR 27 2017 SANDY CHANTHASY

8. I declare that all information in this statement is true and correct. (A registrant who declares as true information which he or she knows to be false is guilty of a crime.)
SIGNED X *[Signature]* PRINTED NAME DANIEL VU
If a CORPORATION, LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP or LIMITED LIABILITY PARTNERSHIP, the following must be completed:
ENTITY NAME BARISTA DAN, INC TITLE / CAPACITY OF SIGNER PRESIDENT
ARTICLE / REG # 4009719 (from CA Sec of State's Office) ABOVE ENTITY WAS FORMED IN THE STATE OF CALIFORNIA

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS BUSINESS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).