

**NOTICE TO LEGISLATIVE
AUTHORITY**

OHIO DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD, P.O. BOX 4005
REYNOLDSBURG, OHIO 43068-9005
(614)644-2360 FAX(614)644-3166

TO

3601152		STCK	HARE RAM HARE KRISHNA LLC	
PERMIT NUMBER		TYPE	DBA ALPINE DRIVE THRU	
ISSUE DATE				
01 07 2024		210 GRANVILLE ST		
FILING DATE				
210 GRANVILLE ST				
GAHANNA OHIO 43230				
PERMIT CLASSES				
C1 C2 D6				
TAX DISTRICT				
25	077	B	F31444	
RECEIPT NO.				

FROM **06/11/2024**

PERMIT NUMBER		TYPE	<p>RECEIVED</p> <p>JUN 17 2024</p> <p>BY: <i>J. Van Meter</i> COUNCIL OFFICE</p>	
ISSUE DATE				
FILING DATE				
PERMIT CLASSES				
TAX DISTRICT		RECEIPT NO.		



MAILED **06/11/2024**

RESPONSES MUST BE POSTMARKED NO LATER THAN. **07/12/2024**

IMPORTANT NOTICE

PLEASE COMPLETE AND RETURN THIS FORM TO THE DIVISION OF LIQUOR CONTROL
WHETHER OR NOT THERE IS A REQUEST FOR A HEARING.

REFER TO THIS NUMBER IN ALL INQUIRIES **B STCK 3601152**

(TRANSACTION & NUMBER)

(MUST MARK ONE OF THE FOLLOWING)

WE REQUEST A HEARING ON THE ADVISABILITY OF ISSUING THE PERMIT AND REQUEST THAT
THE HEARING BE HELD IN OUR COUNTY SEAT. IN COLUMBUS.

WE DO NOT REQUEST A HEARING.

DID YOU MARK A BOX? IF NOT, THIS WILL BE CONSIDERED A LATE RESPONSE.

PLEASE SIGN BELOW AND MARK THE APPROPRIATE BOX INDICATING YOUR TITLE:

(Signature)

(Title)- Clerk of County Commissioner

(Date)

Clerk of City Council

Township Fiscal Officer

CLERK OF GAHANNA CITY COUNCIL
200 S HAMILTON RD
GAHANNA OHIO 43230

Office Hours
8:00 a.m. - 5:00 p.m.
For Questions call
(614) 644-3156

Ohio Department of Commerce - Division of Liquor Control
6606 Tussing Road, Reynoldsburg, Ohio 43068-9005
<http://www.com.ohio.gov/licr>



APPLICATION FOR CHANGE OF LLC MEMBERSHIP INTERESTS
PROCESSING FEE \$100.00
CAUTION: ALLOW 10 TO 12 WEEKS FOR PROCESSING

PERMIT HOLDER REQUESTS APPROVAL OF THE DIVISION OF LIQUOR CONTROL OF THE FOLLOWING:

Permit Holder Name: Hare Ram Hare Krishna LLC		Permit Premises Address: 210 Granville Street Gahanna, Ohio 43230
Liquor Permit Number(s): 3601152	Federal Tax ID Number: [REDACTED]	

Email Address: **NEHAOP7586@AOL.COM**

Attorney's Name, Address and Telephone Number (if represented):
Kurt O. Gearhiser 4484 Trailane Drive Hilliar, Ohio 43026 614-975-4168

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

PLEASE COMPLETE ALL AREAS OF SECTION A & B BELOW

Section A - PREVIOUS List of managing members and all persons with a 5% or greater membership or voting interest in the LLC

NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) Neha Patel	[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest 100 % <input checked="" type="checkbox"/> Membership interest 100 %	[REDACTED]
2)		<input type="checkbox"/>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest ____ % <input type="checkbox"/> Membership interest ____ %	
3)		<input type="checkbox"/>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest ____ % <input type="checkbox"/> Membership interest ____ %	
4)		<input type="checkbox"/>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest ____ % <input type="checkbox"/> Membership interest ____ %	

Section B - REVISED List of managing members and all persons with a 5% or greater membership or voting interest in the LLC

NAME	SOCIAL SECURITY # OR FEDERAL TAX ID #	OFFICE HELD	INTEREST	BIRTHDATE
1) Neha Patel	[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest 49 % <input checked="" type="checkbox"/> Membership interest 49 %	[REDACTED]
2) Dipesh Patel	[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Managing Member <input checked="" type="checkbox"/> Voting interest 51 % <input checked="" type="checkbox"/> Membership interest 51 %	[REDACTED]
3)		<input type="checkbox"/>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest ____ % <input type="checkbox"/> Membership interest ____ %	
4)		<input type="checkbox"/>	<input type="checkbox"/> Managing Member <input type="checkbox"/> Voting interest ____ % <input type="checkbox"/> Membership interest ____ %	

OHIO DIV. LIQUOR CONTROL
UNITS DESK-1





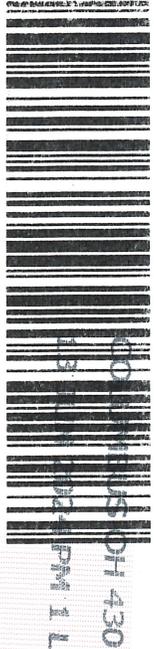
Department of Commerce

Division of Liquor Control

6606 Tussing Road, P.O. Box 4005
Reynoldsburg, Ohio 43068-9005

RECEIVED
JUN 17 2024
By _____

CERTIFIED MAIL™



9214 7969 0099 9790 1836 7748 44

3601152
CLERK OF GAHANNA CITY COUNCIL
200 S HAMILTON RD
GAHANNA, OH 43230

43230-299659



US POSTAGE **PTNEY BOWES**
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0000383399 JUN 13 2024

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