

Rev'd 1/17/17

POLICE NOTIFICATION

OHIO DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD
P.O. BOX 4005
REYNOLDSBURG, OHIO 43068-9005

TO

2812133		TRFO	FORCE INDOOR SPORTS DAYTON LLC DBA FORCE SPORTS DAYTON 4801 SALEM AV TROTWOOD OH 45416
PERMIT NUMBER		TYPE	
11	16	2016	
ISSUE DATE			
01	10	2017	
FILING DATE			
D1			
PERMIT CLASSES			
57	165	A	F17684
TAX DISTRICT		RECEIPT NO.	

FROM **01/12/2017**

1986805			KALM INC DBA DAYTON CENTER COURTS 4801 SALEM AV TROTWOOD OH 45416
PERMIT NUMBER		TYPE	
11	16	2016	
ISSUE DATE			
01	10	2017	
FILING DATE			
D1			
PERMIT CLASSES			
57	165		
TAX DISTRICT		RECEIPT NO.	



This notice is sent to you in compliance with Section 4303.26 of the Ohio Revised Code and will serve as official notification of the filing of a permit application.

Depending on the applicant's business entity, enclosed please find a copy of the pending applicant's ownership disclosure form 4029 (Non Profit Entity Disclosure), Form 4030 (Stockholder Disclosure), Form 4031 (Partnership Disclosure), or Form 4032 (Limited Liability Company Disclosure) which lists those individuals who will have an interest in the above captioned permit.

In some instances, the Division will require a background check to be completed by your agency. If enclosed, please complete the Personal History Police Check(s), and return it/them in the enclosed postage paid envelope. If needed, we will submit the forms once received from the applicant at a later date for completion.

The chief police officer of each political subdivision may appear and testify in person or through a representative at any hearing held on the advisability of the issuance or transfer of a permit. However, Section 4303.26 O.R.C. DOES NOT give the police officer the right to request a hearing. If a hearing is desired, the chief police officer should contact the legislative authority (City or Village Council, or Board of County Commissioners, or Board of Township Trustees) and have that entity request a hearing.

The police department may submit any information to the Division relevant to the issuance or transfer of the permit, even if a formal hearing is not requested and conducted. This should be done by a separate letter with supporting documentation. The Division appreciates your statements and concerns regarding the pending application.

Licensing Section

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

**TROTWOOD POLICE DEPT
3035 N OLIVE ROAD
TROTWOOD OHIO 45426**

FOR OFFICE USE ONLY

☐ NEW ☒ TRANSFER ☐ REN

PERMIT # 2812133

OHIO DEPARTMENT OF COMMERCE - DIVISION OF LIQUOR CONTROL
 6606 Tussing Road, P.O. Box 4005, Reynoldsburg, Ohio 43068-0005
 Telephone: (614) 644-2360 - <http://www.com.ohio.gov/lic>



LIMITED LIABILITY COMPANY DISCLOSURE FORM
 (This form must accompany all applications of a limited liability company for a liquor license)

SECTION A.

Name of Limited Liability Company Force Indoor Sports Dayton, LLC		DBA Name Force Sports Dayton	
Permit Premises Address 4801 Sallem Avenue		City, State Trotwood OH	Zip Code 44146
Township, if in Unincorporated Area		Tax Identification No. (TIN) 81-4117563	
Email Address: Shaw@Force-Sports.com			

Limited Liability Company ("LLC") - Chapter 1705 Ohio Revised Code. Indicate below the managing members, LLC Officers, and all persons with a 5% or greater membership or voting interest, and attach a copy of the Articles of Organization filed with the Ohio Secretary of State.

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.

SECTION B. List the top five (5) officers of the captioned business. If an office is NOT held, please indicate by writing NONE.

EACH OFFICER LISTED BELOW MUST HAVE A BACKGROUND CHECK PERFORMED BY DCIA AND SUBMIT A PERSONAL HISTORY BACKGROUND FORM. PLEASE READ "BACKGROUND CHECK INFORMATION" DLC4191.

NAME OF OFFICER	SOCIAL SECURITY NUMBER	BIRTHDATE
1) CEO Greg Abrams		
2) President Shaw Abrams		
3) Vice-President None		
4) Secretary Brian Greene		
5) Treasurer Greg Abrams		

SECTION C. List the managing members and all persons with a 5% or greater membership or voting interest in the LLC.

THE INDIVIDUALS LISTED BELOW MUST HAVE A BACKGROUND CHECK PERFORMED BY DCIA AND SUBMIT A PERSONAL HISTORY BACKGROUND FORM. PLEASE READ "BACKGROUND CHECK INFORMATION" DLC4191.

			INTEREST
1) Name	Cleveland Indoor Sports, LLC	Social Security No. (if individual)	Check All That Apply
Residence Address	4853 Galaxy Place #1	Tax Identification No. (if applicable) 24-4361662	<input checked="" type="checkbox"/> Managing Member
City and State	Cleveland OH	Telephone No. 216-292-2700	<input checked="" type="checkbox"/> Voting interest 100 %
Zip Code	44128	Birthdate	<input checked="" type="checkbox"/> Membership interest 100 %
2) Name		Social Security No. (if individual)	Check All That Apply
Residence Address		Tax Identification No. (if applicable)	<input type="checkbox"/> Managing Member
City and State		Telephone No.	<input type="checkbox"/> Voting interest _____ %
Zip Code		Birthdate	<input type="checkbox"/> Membership interest _____ %

(PLEASE SEE REVERSE SIDE SHOULD YOU NEED ADDITIONAL SPACE)

STATE OF OHIO, Cuyahoga COUNTY ss,

I, Shaw Abrams being first duly sworn, according to law, deposes and says that he/she is (Title) President

of the Force Indoor Sports Dayton, LLC, a business duly authorized by law to do business in the State of Ohio, and that the statements made in the foregoing affidavit are true.

(Signature) [Signature] (Print Name and Title) Shaw Abrams, -President

Sworn to and subscribed in my presence this 30th day of December, 2016

(Notary Public)

Michelle A. Schaefer

Resident: Macanz County

Notary Public, State of Ohio

My Commission Expires: 02/05/17

FOR OFFICE USE ONLY

☐ NEW ☒ TRANSFER ☐ REN

PERMIT # 2812133

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Residence Address	4853 Galaxy Place #1	Tax Identification No. (if applicable) 24-4361662	<input checked="" type="checkbox"/> Managing Member
City and State	Cleveland OH	Telephone No. 216-292-2700	<input checked="" type="checkbox"/> Voting interest 100 %
Zip Code	44128	Birthdate	<input checked="" type="checkbox"/> Membership interest 100 %
2) Name		Social Security No. (if individual)	Check All That Apply
Residence Address		Tax Identification No. (if applicable)	<input type="checkbox"/> Managing Member
City and State		Telephone No.	<input type="checkbox"/> Voting interest %
Zip Code		Birthdate	<input type="checkbox"/> Membership interest %

(PLEASE SEE REVERSE SIDE SHOULD YOU NEED ADDITIONAL SPACE)

STATE OF OHIO, Cuyahoga COUNTY ss,

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of the Force Indoor Sports Dayton, LLC, a business duly authorized by law to do business in the State of Ohio, and that the statements made in the foregoing affidavit are true.

(Signature) [Signature] (Print Name and Title) Shaw Abrams, -President

Sworn to and subscribed in my presence this 30th day of December, 2016.

[Signature]
 (Notary Public) Michelle A. Sullivan
 Resident Madison County
 My Commission Expires: 02/05/17