



Jim Pillen
Governor

STATE OF NEBRASKA
NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska, 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814 or (402) 471-2374
TSR USER 800-833-7252 (TTY)
Web Address <http://www.lcc.nebraska.gov/>

RECEIPT

From: Hannah Yates

To: Lexington City Clerk

Re: Manriquez, LLC.

DBA: El Rancho Vijeo Mexican Restaurant

License #: I-12617

Please complete this page immediately and fax or email to us acknowledging you have received the application. Signatures are not required.

Pamela Baruth

Clerk's Name (Acknowledgement of receipt of the application)

4/18/2023

Date Received

Kim Lowe
Commissioner

Bruce Bailey
Chairman

Harry Hoch
Commissioner

*** NO EXTENSIONS OF THIS PERMIT WILL BE ALLOWED***

Temporary Operating Permit

Nebraska Liquor Control Commission

23 – 617 Class I

Issued: April 18, 2023 – Expires: July 17, 2023

Manriquez, LLC.

dba: El Rancho Vijeo Mexican Restaurant

2307 Plum Creek Pkwy, Lexington, NE 68850 Dawson County

Description: One story building approx 66 x 30 with sidewalk café to the East
approx 30 x 16



Hobert B Rupe - Executive Director
Nebraska Liquor Control Commission
301 Centennial Mall South, 1st Floor
Lincoln, NE 68509
(402) 471 – 2571

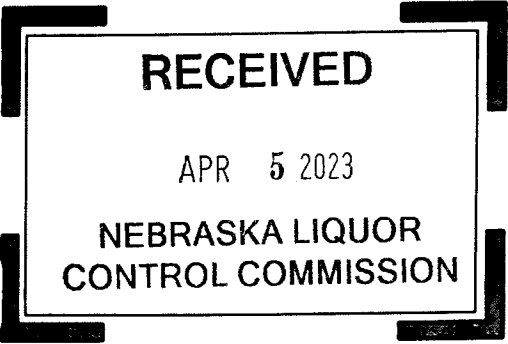


**APPLICATION FOR LIQUOR LICENSE
CHECKLIST RETAIL**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
EMAIL: lcc.frontdesk@nebraska.gov
WEBSITE: www.lcc.nebraska.gov

License Class: I

License Number:
125617



Office Use Only
NEW / REPLACING 085496 TOP Yes / No
Hot List Yes / No No Initial: HY

PLEASE READ CAREFULLY

See directions on the next page. Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the Nebraska Liquor Control Commission.

APPLICANT NAME MANRIQUEZ LLC
TRADE (DBA) NAME EL RANCHO VIJEO MEXICAN RESTAURANT
PREVIOUS TRADE (DBA) NAME _____
CONTACT NAME AND PHONE NUMBER AYLIN MANRIQUEZ (620) 617-9495
CONTACT EMAIL ADDRESS aylinmanriquez97@gmail.com

PayPart
\$400
4.4.23 HY



DIRECTIONS

Each item must be included with your application

1. Application fee of \$400 (nonrefundable), please pay online thru our PAYPORT system or enclose payment made payable to the Nebraska Liquor Control Commission ✓
2. Enclose the appropriate application forms
 - Individual License (Form 104)
 - Partnership License (Form 105)
 - Corporate License (Form 101 & Form 103)
 - Limited Liability Company (LLC) (Form 102 & Form 103) ✓
 - Corporation or Limited Liability Company (LLC) must be active with the Nebraska Secretary of State ✓
3. For citizenship enclose U.S. birth certificate; U.S. passport or naturalization paper
 - a. For residency enclose proof of registered voter in Nebraska
 - b. If permanent resident include Employment Authorization Card or Permanent Resident Card
 - c. See Applicant Guidelines for further assistance
4. Form 147 - Fingerprints are required for each person as defined in new application guide, found on our website under "Licensing Tab" in "Guidelines/Brochures". ✓
5. If purchasing an already licensed business; include Form 125—Temporary Operating Permit (TOP)
 - a. Form 125 must be signed by the seller (current licensee) and the buyer (applicant) ✓
 - b. Provide a copy of the business purchase agreement from the seller (current licensee sells "the business currently licensed" to applicant) ✓
 - c. Provide a copy of alcohol inventory being purchased (must include quantity, brand name and container size) ✓
 - d. Enclose a list of the assets being purchased (furniture, fixtures and equipment) ✓
6. If building is owned or being purchased send a copy of the deed or purchase agreement in the name of the applicant. ✓
7. If building is being leased, send a copy of signed lease in the name of the applicant. Lease term must run through the license year being applied for. ✓
8. Submit a copy of your business plan. ✓

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS**

RETAIL LICENSE(S) Application Fee \$400 (nonrefundable)

CLASS C LICENSE TERM IS FROM NOVEMBER 1 – OCTOBER 31

ALL OTHER CLASSES TERM IS MAY 1 – APRIL 30

- A BEER, ON SALE ONLY
- B BEER, OFF SALE ONLY**
- C BEER, WINE, DISTILLED SPIRITS, ON AND OFF SALE**
Do you intend to sale cocktails to go as allowed under Neb Rev. Statute 53-123.04(4) YES NO
- D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY**
- F BOTTLE CLUB.
- I BEER, WINE, DISTILLED SPIRITS, ON SALE ONLY
Do you intend to sale cocktails to go as allowed under Neb Rev. Statute 53-123.04(5) YES NO
- J LIMITED ALCOHOLIC LIQUOR, OFF SALE – MUST INCLUDE SUPPLEMENTAL FORM 120
- AB BEER, ON AND OFF SALE
- AD BEER ON SALE ONLY, BEER, WINE, DISTILLED SPIRITS OFF SALE
- IB BEER, WINE, DISTILLED SPIRITS ON SALE, BEER OFF SALE ONLY
- Class K Catering endorsement (Submit Form 106) – Catering license (K) expires same as underlying retail license
- Class G Growler endorsement (Submit Form 165) – Class C licenses only

**Class B, Class C, Class D license do you intend to allow drive through services under Neb Rev. Statute 53-178.01(2) YES NO

ADDITIONAL FEES WILL BE ASSESSED AT THE CITY/VILLAGE OR COUNTY LEVEL WHEN THE LICENSE IS ISSUED

CHECK TYPE OF LICENSE FOR WHICH YOU ARE APPLYING

- Individual License (requires insert FORM 104)
- Partnership License (requires insert FORM 105)
- Corporate License (requires FORM 101 & FORM 103)
- Limited Liability Company (LLC) (requires FORM 102 & FORM 103)

NAME OF ATTORNEY OR FIRM ASSISTING WITH APPLICATION (if applicable)

Name _____ Phone Number _____

Firm Name _____

Email address _____

Should we contact you with any questions on the application? YES _____ NO _____

PREMISES INFORMATION

Trade Name (doing business as) EL RANCHO VIEJO MEXICAN RESTAURANT

Street Address 2307 PLUM CREEK PKWY

City LEXINGTON County DAWSON - 18 Zip Code 68850 - 2011

Premises Telephone number (308) 324-7265

Business e-mail address elranchoviejolexington@gmail.com

Is this location inside the city/village corporate limits YES X NO _____

MAILING ADDRESS (where you want to receive mail from the Commission)

Check if same as premises

Name AYLIN MANRIQUEZ

Street Address 1306 N MADISON ST

City LEXINGTON State NE Zip Code 68850

DESCRIPTION AND DIAGRAM OF THE AREA TO BE LICENSED

IN THE SPACE PROVIDED BELOW DRAW OR ATTACH A DIAGRAM OF THE AREA TO BE LICENSED

DO NOT SEND BLUEPRINTS, ARCHITECT OR CONSTRUCTION DRAWINGS

PROVIDE LENGTH X WIDTH IN FEET (NOT SQUARE FOOTAGE)

INDICATE THE DIRECTION OF NORTH

Building length 67 x width 30 in feet

Is there a basement? Yes X No _____ If yes, length _____ x width _____ in feet

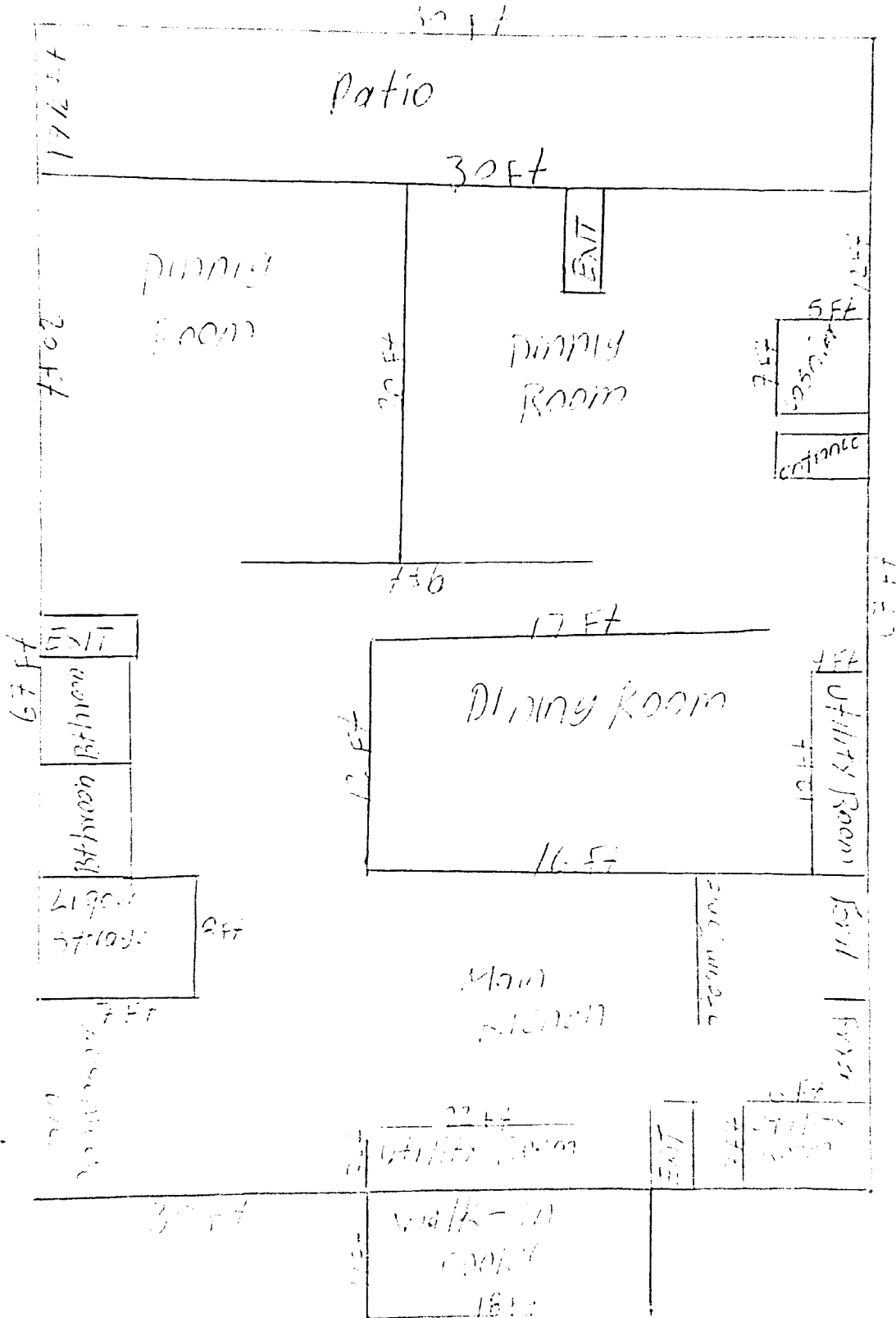
Is there an outdoor area? Yes X No _____ If yes, length 17 1/2 x width 30 in feet-

*If including an outdoor area permanent fencing is required. Please contact the local governing body for other requirements regarding fencing

Number of floors of the building 1

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

12/1/2020 60



APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY §53-125(5)

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Include traffic violations. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

YES NO If yes, please explain below or attach a separate page

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition

2. Was this premise licensed as liquor licensed business within the last two (2) years?

YES NO

If yes, provide business name and license number SAN PEDRO INC- 085496

3. Are you buying the business of a current retail liquor license?

YES NO

If yes, give name of business and liquor license number SAN PEDRO INC- 085496

4. Are you filing a temporary operating permit (TOP) to operate during the application process?

YES NO

If yes

a) Attach temporary operating permit (TOP) (Form 125)

- a) Submit a copy of the business purchase agreement
- b) Include a list of alcohol being purchased, list the name brand, container size and how many
- c) Submit a list of the furniture, fixtures and equipment

5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

____ YES NO

If yes, list the lender(s) _____

6. Will any person or entity, other than applicant, be entitled to a share of the profits of this business?

____ YES NO

If yes, explain. (all involved persons must be disclosed on application)

No silent partners 019.01E Silent Partners; Profit Sharing: No licensee or partner, principal, agent or employee of any Retail Liquor License shall permit any other person not licensed or included as a partner, principal, or stockholder of any Retail Liquor License to participate in the sharing of profits or liabilities arising from any Retail Liquor License. (53-1,100)

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

____ YES NO

If yes, list such item(s) and the owner. _____

8. Is premises to be licensed within 150 feet of a church, school, hospital, home for indigent persons or for veterans, their wives, and children; or within 300 feet of a college or university campus?

____ YES NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Nebraska Revised Statute 53-177(1) **AND PROVIDE FORM 134 – CHURCH OR FORM 135 – CAMPUS AND LETTER OF SUPPORT FROM CHURCH OR CAMPUS**

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties. (Nebraska Revised Statute 53-125(15))

____ YES NO

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business.

a) List the individual(s) who are authorized to write checks and/or withdrawals on accounts at this institution.

a.) PINNACLE BANK b.) AYLIN MANRIQUEZ and JUAN MANRIQUEZ

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s) previously held.

N/A

12. List the alcohol related training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- Individual: Applicant and spouse; spouse is exempt if they filed Form 116 – Affidavit of Non-Participation.
- Partnership: All partners and spouses, spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.
- Limited Liability Company: All member of LLC, Manager and all spouses; spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.
- Corporation: President, Stockholders holding 25% or more of shares, Manager and all spouses; spouses are exempt if they filed Form 116 – Affidavit of Non-Participation.

NLCC certified training program completed

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
AYLIN MANRIQUEZ	APRIL 2023	TIPS

Experience

Applicant Name/Job Title	Date of Employment	Name & Location of Business
SERVER	2021-2022	SAN PEDRO MEXICAN RESTAURANT LEXINGTON NEBRASKA
SERVER	2019-2021	SAN PEDRO MEXICAN RESTAURANT SCOTTSBLUFF NEBRASKA

13. If the property is owned, submit a copy of the deed or proof of ownership. If leased, submit a copy of the lease covering the entire license year.

Documents must be in the name of applicant as owner or lessee

X Lease expiration date SEPTEMBER 30, 2025

 Deed

 Purchase Agreement

14. When do you intend to open for business? AS SOON AS POSSIBLE

15. What will be the main nature of business? RESTAURANT- FOOD AND BEVERAGE

16. What are the anticipated hours of operation? MONDAY-SATURDAY 11 00 AM - 11:00 PM SUNDAY 11 00 AM - 8 30 PM

17. List the principal residence(s) for the past 10 years for **ALL** persons required to sign, including spouses.

RESIDENCES FOR THE PAST 10 YEARS					
APPLICANT CITY & STATE	YEAR		SPOUSE CITY & STATE	YEAR	
	FROM	TO		FROM	TO
LEXINGTON NEBRASKA	2021	PRESENT			
SCOTTSBLUFF NEBRASKA	2017	2021			
GREAT BEND KANSAS	2014	2017			
SCOTTSBLUFF NEBRASKA	2011	2014			

If necessary, attach a separate sheet

**PERSONAL OATH AND CONSENT OF INVESTIGATION
SIGNATURE PAGE – PLEASE READ CAREFULLY**

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

**Must be signed by all applicant(s) and spouse(s) owning more than 25%
(YOU MAY NEED TO PRINT MULTIPLE SIGNATURE PAGES)**



Signature of APPLICANT

Signature of SPOUSE



Printed Name of APPLICANT

Printed Name of SPOUSE

Signature of APPLICANT

Signature of SPOUSE

Printed Name of APPLICANT

Printed Name of SPOUSE

Nebraska Secretary of State

MANRIQUEZ, LLC

Wed Apr 5 13:09:58 2023

SOS Account Number

2110289039

Status

Active

Principal Office Address1306 N. MADISON ST
LEXINGTON, NE 68850**Registered Agent and Office Address**AYLIN MANRIQUEZ
1306 N. MADISON
LEXINGTON, NE 68850**Designated Office Address**1306 N. MADISON
LEXINGTON, NE 68850**Nature of Business**

Not Available

Entity Type

Domestic LLC

Qualifying State: NE

Date Filed

Oct 15 2021

Next Report Due Date

Jan 01 2025

Associated Entities

Account Number	Name	Type	Status
2112322531	EL RANCHO VIEJO	Trade Name	Active

Filed Documents

Filed documents for MANRIQUEZ, LLC may be available for purchase and downloading by selecting the Purchase Now button. Your Nebraska.gov account will be charged the indicated amount for each item you view. If no Purchase Now button appears, please contact Secretary of State's office to request document(s).

Document	Date Filed	Price	
Certificate of Organization	Oct 15 2021	\$0.45 = 1 page(s) @ \$0.45 per page	<input type="button" value="Purchase Now"/>
Proof of Publication	Nov 18 2021	\$0.45 = 1 page(s) @ \$0.45 per page	<input type="button" value="Purchase Now"/>
Biennial Report	Apr 04 2023	\$0.45 = 1 page(s) @ \$0.45 per page	<input type="button" value="Purchase Now"/>

Good Standing Documents

- If you need your Certificate of Good Standing Apostilled or Authenticated for use in another country, you must contact the Nebraska Secretary of State's office directly for information and instructions. Documents obtained from this site cannot be Apostilled or Authenticated.

Online Certificate of Good Standing with Electronic Validation

\$6.50

This certificate is available for immediate viewing/printing from your desktop. A Verification ID is provided on the certificate to validate authenticity online at the Secretary of State's website.

[Purchase Now](#)

Certificate of Good Standing - USPS Mail Delivery

\$10.00

This is a paper certificate mailed to you from the Secretary of State's office within 2-3 business days.

[Continue to Order](#)

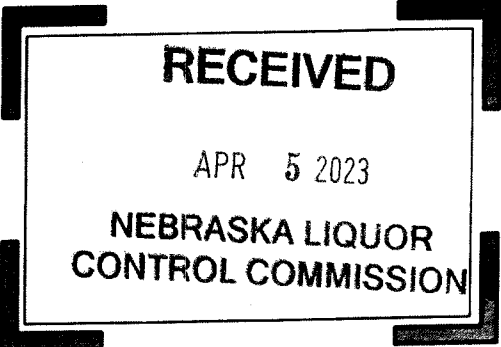
[↑ Back to Top](#)

LIMITED LIABILITY COMPANY (LLC)

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
EMAIL: lcc.frontdesk@nebraska.gov
WEBSITE: www.lcc.nebraska.gov

License
Class: _____

License Number: _____



INSTRUCTIONS

1. All members and spouses must be listed
2. Managing/Contact member and all members holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the application
3. Managing/Contact member and all members holding over 25% interest and their spouses must submit fingerprints. See Form 147 for further information
4. Attach copy of Articles of Organization

Name of Limited Liability Company that will hold license as listed on the Articles of Organization

MANRIQUEZ LLC

Name of Registered Agent: AYLIN MANRIQUEZ

LLC Address: 1306 N. MADISON ST

City: LEXINGTON State: NE Zip Code: 68850 -1222

LLC Phone Number: (620) 617-9495 LLC Fax Number: _____

Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: MANRIQUEZ ALVARADO First Name: AYLIN MI: _____

Home Address: 1306 N MADISON ST City: LEXINGTON

State: NE Zip Code: 68850 -1222 Home Phone Number: (620) 617-9495

Signature of Managing/Contact Member

List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: **MANRIQUEZ ALVARADO** First Name: **AYLIN** MI: _____



Spouse Full Name (indicate N/A if single): **N/A**

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Is the applying Limited Liability Company owned 100% by another corporation/LLC?

YES NO

If yes, Form 185 is required

Indicate the company's tax year with the IRS (Example January through December)

Starting Date: JANUARY Ending Date: DECEMBER

Is this a Non Profit Corporation?

YES NO

If yes, provide the Federal ID #. _____

CERTIFICATE OF ORGANIZATION

MANRIQUEZ, LLC

I, the Undersigned, desiring to form a Limited Liability Company pursuant to the Nebraska Uniform Limited Liability Company Act of the State of Nebraska, do hereby certify:

1. The name of the firm under which the Limited Liability Company is to be conducted is

"MANRIQUEZ, LLC"

2. The address of the Limited Liability Company's designated office is:

1306 N. Madison
Lexington, NE 68850

3. The name and address of the Agent for service of process is:

Aylin Manriquez
1306 N. Madison
Lexington, NE 68850

IN WITNESS WHEREOF, the Undersigned has executed this Certificate

1 day of October, 2021.


AYLIN MANRIQUEZ, Owner

Heldt, McKeone & Copley
PO Box 1050
Lexington, NE 68850
308-324-5151

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }

Secretary of State
State Capitol
Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the
State of Nebraska, do hereby certify that

MANRIQUEZ, LLC

was duly formed under the laws of Nebraska on October 15, 2021;

**all fees, taxes, and penalties due under the Nebraska Uniform Limited
Liability Company Act or other law to the Secretary of State have been paid;**

**the Company's most recent biennial report required by section 21-125 has
been filed by the Secretary of State;**

the Secretary of State has not administratively dissolved the company;

**the Company has not delivered to the Secretary of State for filing a Statement
of Dissolution;**

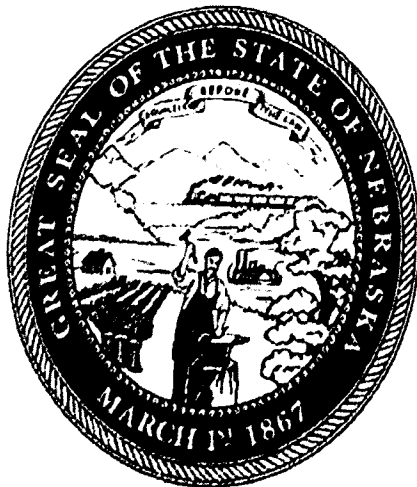
a Statement of Termination has not been filed by the Secretary of State.

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

April 4, 2023



A handwritten signature in black ink, appearing to read "Robert B. Evnen".

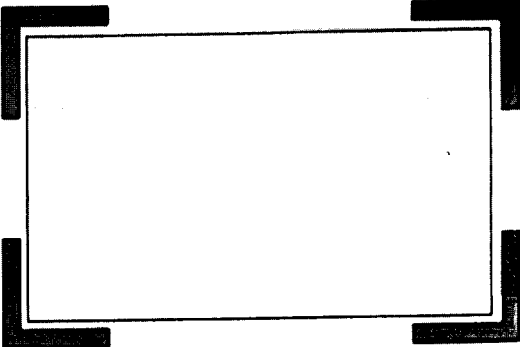
Secretary of State

**MANAGER APPLICATION
FORM 103**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
EMAIL: lcc.frontdesk@nebraska.gov
WEBSITE: www.lcc.nebraska.gov

License
Class: _____

License Number: _____



MANAGER MUST:

- Be at least 21-years of age
 - Complete all sections of the application.
 - Form must be signed by a **member or corporate officer**
 - Include Form 147 –Fingerprints are required
 - Provide a copy of one of the following: US birth certificate, US Passport, naturalization papers OR legal resident documentation
 - Be a resident of the state of Nebraska and if an US citizen be a registered voter in the State of Nebraska
 - Spouse who **will** participate in the business, the **spouse must meet the same requirements as the manager applicant:**
- Spouse who **will not** participate in the business
- Complete the Spousal Affidavit of Non Participation (Form 116). **Be sure to complete both halves of this form.**

CORPORATION/LLC INFORMATION

Name of Corporation/LLC: MANRIQUEZ LLC

PREMISES INFORMATION

Premises Trade Name/DBA: EL RANCHO VIEJO MEXICAN RESTAURANT

Premises Street Address: 2307 PLUM CREEK PKWY

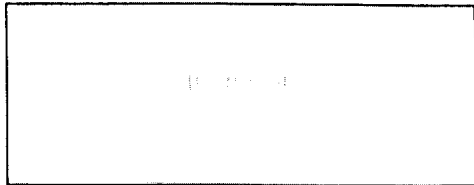
City: LEXINGTON County: NE (DAWSON) Zip Code: 68850

Premises Phone Number: (308) 324-7265

Premises Email address: elranchoviejolexington@gmail.com


SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER

The individual whose name is listed as a corporate officer or managing member as reported or listed with the Commission.



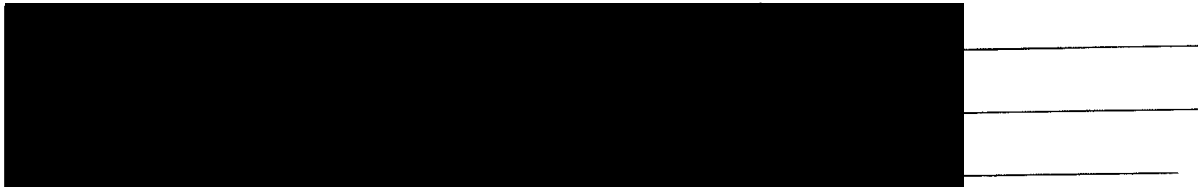
MANAGER INFORMATION

Last Name: MANRIQUEZ ALVARADO First Name: AYLIN MI: _____

Home Address: 1306 N MADISON ST

City: LEXINGTON County: DAWSON Zip Code: 68850-1222

Home Phone Number: (620) 617-9495



Email address: aylinmanriquez97@gmail.com

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

YES NO

Spouse's information

Spouses Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____

Driver's License Number: _____

Date of Birth: _____ Place of Birth: _____

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS
APPLICANT **SPOUSE**

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
LEXINGTON NEBRASKA	2021	PRESENT			
SCOTTSBLUFF NEBRASKA	2017	2021			
GREAT BEND KANSAS	2014	2017			
SCOTTSBLUFF NEBRASKA	2011	2014			

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2021	2022	SAN PEDRO INC	BERENICE BRAVO	(308) 233-2910
2017	2021	SAN PEDRO JC LLC	KARLA MONTELONGO	(308) 225-3734

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea, include traffic violations. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

YES NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

YES NO

IF YES, list the name of the premise(s):

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business?

YES NO

4. List the alcohol related training and/or experience (when and where) of the person making application.

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
AYLIN MANRIQUEZ	04/2023	TIPS

*For list of NLCC Certified Training Programs see [training](#)

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
SERVER	2021-2022	SAN PEDRO MEXICAN RESTAURANT LEXINGTON NEBRASKA
SERVER	2019-2021	SAN PEDRO MEXICAN RESTAURANT SCOTTSBLUFF NEBRASKA

5. Have you enclosed Form 147 regarding fingerprints?

YES NO

**PERSONAL OATH AND CONSENT OF INVESTIGATION
SIGNATURE PAGE – PLEASE READ CAREFULLY**

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

Must be signed by applicant and spouse.



Signature of **APPLICANT**



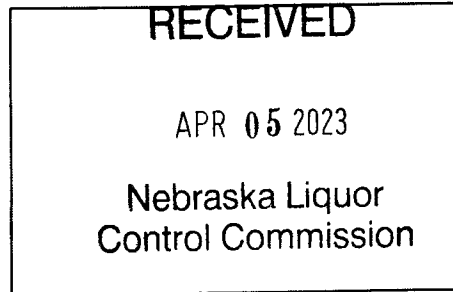
Printed Name of **APPLICANT**

Signature of **SPOUSE**

Printed Name of **SPOUSE**

**PRIVACY ACT STATEMENT/
SUBMISSION OF FINGERPRINTS /
PAYMENT OF FEES TO NSP-CID**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.nebraska.gov



**THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:
DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:**

- **FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE**
- Fee payment of **\$45.25 per person** **MUST** be made **DIRECTLY** to the Nebraska State Patrol;
It is recommended to make payment through the **NSP PayPort** online system at www.ne.gov/go/nsp
Or a check made payable to **NSP** can be mailed directly to the following address:
*****Please indicate on your payment who the payment is for (the name of the person being fingerprinted) and the payment is for a Liquor License*****
The Nebraska State Patrol – CID Division
4600 Innovation Drive
Lincoln, NE 68521
- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP – CID
Applicant(s) will not have cards to include with license application.
- Fingerprints taken at local law enforcement offices may be released to the applicants:
Fingerprint cards should be submitted with the application.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.

******Please Submit this form with your completed application to the Liquor Control Commission******

Trade Name EL RANCHO VIEJO MEXICAN RESTAURANT

Name of Person Being Fingerprinted: AYLIN MANRIQUEZ ALVARADO

Date fingerprints were taken: 02/16/2023

Location where fingerprints were taken: NORTH PLATTE- TROOP D

How was payment made to NSP?

NSP PAYPORT CASH CHECK SENT TO NSP CK # _____

My fingerprints are already on file with the commission – fingerprints completed for a previous application less than 2 years ago? YES


SIGNATURE REQUIRED OF PERSON BEING FINGERPRINTED



A 360TRAINING COMPANY

CERTIFICATE OF COMPLETION

This certifies that

Aylin Manriquez

is awarded this certificate for

TIPS Nebraska On-Premise Alcohol Server Training

Hours
3.00

Completion Date
04/04/2023

Expiration Date
04/03/2026

Certificate #
NE-ON-000028511940

Official Signature

THIS CERTIFICATE IS NON-TRANSFERABLE

5010 Kingsley Drive, Suite 305 | Austin, TX 78744 | 877-851-2235 | www.360training.com



Issued: 04/04/2023

Certificate #: NE-ON-000028511940

Aylin Manriquez

1307 n Madison

Lexington NE 68850

CERTIFIED

Expires: 04/03/2026



Phone: 800-438-8477

www.gettips.com

This card was issued for successful completion of the TIPS program.

Signature _____

LEASE AGREEMENT AMENDMENT

THIS amends original lease dated November 23rd, 2022 to add Manriquez LLC to Tenant party.
THIS LEASE AMENDMENT made and entered into by and between the following parties and upon the following terms and conditions:

(1) Parties

The parties to this agreement, hereinafter referred to as LANDLORD and TENANT, respectively are:

1.1 LANDLORD: Wilkinson Development, Inc.
P.O. Box 768, 214 E. 5th St.
North Platte, NE 69103
308-532-3090

1.2 TENANT: Manriquez LLC
dba El Rancho Viejo
Aylin Manriquez
Fed ID # 87-3394593

Address: 2307 Plum Creek Pkwy

City, ST: Lexington, NE

Phone #: 620-617-9495

(2) Premises

LANDLORD hereby leases to TENANT the following described real property located in Dawson County, Nebraska, to-wit:

That certain commercial building which is located at
2307 Plum Creek Parkway, South Highway 283, Lexington, NE 68850

(3) Term

The term of this lease shall be as follows:

3.1 Date of Beginning of Base Term: December 1, 2022
Date of Termination of Base Term: September 30, 2025

(4) Rental

The rental to be paid by TENANT to LANDLORD, the place of payment of the same and the dates of the payment of the same shall be as above written:

4.1 Amount of Base Rental: Thirty-Six Month Base Term the total sum of \$90,000.00 payable monthly as follows:

December 1, 2022, the sum of \$0 to reimburse tenant for hvac unit & installation.
January 1, 2023 through November 30, 2023, the sum of \$2,500.00 per month.
December 1, 2023 through September 30, 2024, the sum of \$2,500.00 per month.
December 1, 2024 through September 30, 2025, the sum of \$2,500.00 per month.

4.2 Place of payment: Wilkinson Development, Inc., P.O. Box 768, 214 E. 5th St., North Platte, NE 69103, or such other place as LANDLORD may designate upon notice to TENANT.

4.3 No Security Deposit required.

4.4 Dates of Payments: On the first day of each month during the base term, beginning December 1, 2022 by automatic withdrawal from Tenant checking pre-determined checking account. If account information is not given to Landlord at time of lease signing, lease agreement will be null and void.

GUARANTEE

The undersigned, hereby jointly and personally guarantees the performance of all of the terms and conditions, obligations and responsibilities of the TENANT, San Pedro, Inc., in and to the above lease agreement.

Aylin Manriquez
Aylin Manriquez

STATE OF NEBRASKA)
) SS
COUNTY OF LINCOLN)

ON THIS 6th DAY OF April, 2023 before me the undersigned, a Notary Public, duly commissioned, qualified and residing in said County, personally came Mark Wilkinson by me known to be the identical person whose name is affixed to the foregoing instrument and acknowledged the execution thereof to be his voluntary act and deed on behalf of Wilkinson Development, Inc.

WITNESS my hand and notarial seal the day and year last above written.

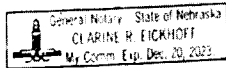


Clarine R. Eickhoff
Notary Public

STATE OF Nebraska)
) SS
COUNTY OF Lincoln)

ON THIS 6th DAY OF April, 2023 before me the undersigned, a Notary Public, duly commissioned, qualified and residing in said County, personally came Aylin Manriquez by me known to be the identical person whose name is affixed to the foregoing instrument and acknowledged the execution thereof to be his voluntary act and deed.

WITNESS my hand and notarial seal the day and year last above written.



Clarine R. Eickhoff
Notary Public

LEASE AGREEMENT

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The parties to this agreement, hereinafter referred to as LANDLORD and TENANT, respectively are:

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P.O. Box 768, 214 E. 5th St.
North Platte, NE 69103
308-532-3090

1.2 TENANT: El Rancho Viejo
Aylin Manriquez
Fed ID # 87-3394593

Address: 2307 Plum Creek Pkwy

City, ST: Lexington, NE

Phone #: 620-617-9495

(2) Premises

LANDLORD hereby leases to TENANT the following described real property located in Dawson County, Nebraska, to-wit:

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4.1 Amount of Base Rental: Thirty-Six Month Base Term the total sum of \$90,000.00 payable monthly as follows:

December 1, 2022, the sum of \$0 to reimburse tenant for hvac unit & installation.

15.1 Upon the occurrence of any event of default LANDLORD may, in addition to any other remedy or right given by law, terminate this lease by service of written notice of such termination upon TENANT and thereupon enter upon said leased premises, or any part thereof upon the date specified in such notice and retake possession of said premises.

15.2 Each of the following shall be deemed an event of default:

15.2.1 Default in the payment of rental provided herein for a period of ten (10) days.

15.2.2 Breach by TENANT of any of the covenants or other obligations of TENANT set forth herein, and failure by TENANT to remedy such breach in full upon 15 days notice in writing thereof given by LANDLORD.

15.2.3 Abandonment of said premises by TENANT.

15.2.4 The making of an assignment by TENANT for the benefit of creditors or the filing by TENANT or against TENANT of a petition in bankruptcy, the filing of any petition against TENANT for the foreclosure of any judgment lien against said leasehold, or the levy of any writ of execution upon said leasehold.

15.2.5 Acceptance by LANDLORD of any rental payment after its due date shall not constitute a waiver as to the time of making of future rental payments.

(16) Payment of Taxes

16.1 LANDLORD shall pay real estate, special assessment taxes levied or assessed against the leased premises.

16.2 The TENANT shall pay all taxes assessed against personal property placed by it in the demised premises.

(17) Redelivery of Possession

17.1 Upon the expiration of the base term herein set forth, or upon termination of this lease in any manner herein provided, TENANT will surrender possession and occupancy of said premises to LANDLORD without any other or further notice than the terms of this lease.

(18) Time of the Essence

18.1 Whenever any periods of time are provided for in the lease, it is agreed that time is an essential element of the same.

(19) General

19.1 The TENANT at TENANT'S option may erect on the premises outside signs of color, type or design selected by TENANT to be located on said premises as specified by the TENANT, provided the TENANT shall first obtain LANDLORD'S approval of such signs, which approval shall not be unreasonably withheld.

This agreement shall extend to and be binding upon the heirs, personal representatives and assigns of LANDLORD and of TENANT.

January 1, 2023 through November 30, 2023, the sum of \$2,500.00 per month.
December 1, 2023 through September 30, 2024, the sum of \$2,500.00 per month.
December 1, 2024 through September 30, 2025, the sum of \$2,500.00 per month.

4.2 Place of payment: Wilkinson Development, Inc., P.O. Box 768, 214 E. 5th St., North Platte, NE 69103, or such other place as LANDLORD may designate upon notice to TENANT.

4.3 No Security Deposit required.

4.4 Dates of Payments: On the first day of each month during the base term, beginning December 1, 2022 by automatic withdrawal from Tenant checking pre-determined checking account. If account information is not given to Landlord at time of lease signing, lease agreement will be null and void.

4.5 Late Fee: There will be a \$50.00 late fee for monthly rental paid after the 10th of the month in which the rent is due. There will be a \$50.00 fee for any non-sufficient fund notices received at time of auto withdrawal by Landlord each time notice is received. \$50.00 to also be pulled each time automatically from Tenant account.

(5) Utilities and Trash Removal

5.1 The TENANT agrees to pay all utilities servicing said premises. TENANT shall also be responsible for trash removal and maintaining the exterior lot litter free.

(6) Maintenance of Premises

6.1 TENANT shall at its own expense maintain the interior of the leased premises, including all plumbing, air-conditioning, heating and other improvements, door and door frames, casings and hardware thereon, during the term of this Lease including filters, light bulbs, windows, air conditioning and heating. TENANT shall also be responsible for any exterior lighting and parking lot maintenance.

6.2 TENANT shall at its own expense meet any and all fire and safety and health code requirements throughout the terms of this lease.

6.3 LANDLORD shall maintain in good repair all exterior parts of the demised premises including the roof, exterior walls, foundations, support of floors, ceilings, drain spouts, sidewalks, driveways, window casings and frames, plate glass therein (unless breakage thereof is due to negligence of TENANT, its employees or customers while conducting business inside the building), underground plumbing, water lines, gas lines and underground electrical lines. The LANDLORD shall be solely responsible for all structural defects and damage. The TENANT shall be solely responsible for the decoration of the interior of said premises in such manner as it may deem suitable for its occupancy.

(7) Tenant Requirements

7.1 All personal property in the leased premises shall be at the risk of the TENANT only and the LANDLORD shall not be or become liable for any damage to personal property, to said premises or to said TENANT or to any other persons or property caused by water leakage, steam, sewage, gas or odors or for any damage whatsoever done or occasioned by or from any broiler, plumbing, gas, water, steam or other pipes or any fixtures, equipment or appurtenances whatsoever, or for any damage occasioned by water, snow, or ice, being upon or coming through the roof, skylight, trapdoor, or otherwise, or for any damage arising from any act or neglect of

other tenants, occupants, or employees of the building in which the leased premises are situated or arising by reason of the use of or any defect in the said building or any of the fixtures, equipment, or appurtenances therein, or by the act or neglect of any other person or caused in any other manner whatsoever.

7.2 In the event the improvements or any part thereof shall be destroyed or damaged by fire, superior force or any other unavoidable casualty, and the operation of the TENANT'S business is materially interfered with, then a just and proportionate part of the rents hereby reserved shall abate during such time as said premises are unfit for occupancy. In the event of damage to said premises from any cause whatever rendering the same totally untenable (defined as such loss as shall result in insurance reimbursement of 50% or more of the insurance coverage maintained upon said premises or the building in which they are situated) this lease shall be considered terminated and at an end. Provided, however, that, LANDLORD may, instead, elect to reconstruct said premises, in which event all provisions of this agreement shall continue in force, provided such option is exercised by notice in writing given to TENANT within 30 days of the date of such loss. In the event LANDLORD exercised said option, repair of said premises shall be proceeded with as promptly after the exercise of said option as possible and shall be continuously and expeditiously pursued. No rental shall be payable from TENANT during such period while said premises remain untenable.

7.3 The TENANT or any of its assignees or subtenants shall have the right at its own expense to make any non-structural alterations, improvements or additions to the interior of the demised premises that it shall deem expedient to the better conduct of its business or business of its assignees or subtenants, provided such alterations, improvements or additions are made in accordance with the requirements of local ordinances and public authority having jurisdiction thereover and provided that the value of the property shall not be diminished thereby. All such work shall be done in a first class and workmanlike manner. In making alterations or improvements the TENANT may remove and/or salvage any material or equipment which shall be removed or replaced at any time during the term hereof or any extension hereof, or at a reasonable time thereafter. Prior to making any exterior alterations or improvements or additions to the demised premises TENANT shall obtain LANDLORD'S written approval on plans and specifications.

7.4 TENANT shall be responsible for snow removal on all sidewalks and driveways, mowing and landscaping of entire lot around the leased premises.

7.5 TENANT agrees to provide a copy of any licenses needed to operate their business.

(8) Inspection

8.1 LANDLORD shall have the right upon 24 hours notice to TENANT, to go upon said premises at reasonable times and hours and inspect the same, for the purpose of ascertaining compliance with the terms of this agreement by TENANT and for undertaking any repair which is the obligation of LANDLORD. If there is an emergency LANDLORD does not need to notify TENANT to gain access.

(9) Claims of Third Parties

9.1 TENANT shall indemnify LANDLORD and hold LANDLORD harmless from any and all successful claims of third parties arising from the sole conduct of TENANT upon said premises or the management of the business conducted by TENANT upon said premises, or otherwise arising by reason or any proven negligence of TENANT, TENANT'S agent or employees. Any damage to said premises or the building in which the same are situated resulting from the negligence of TENANT, or TENANT'S agents or employees shall be the liability of TENANT to LANDLORD, or shall be repaired by TENANT.

(10) Use of Premises

10.1 TENANT shall utilize said premises for the operation of a Mexican restaurant and related activities associated therewith, and for no other purpose without the written consent of LANDLORD; and TENANT shall neither engage in nor permit any activity thereon in violation of the ordinances of the City of Lexington, or the laws of the State of Nebraska, Federal or Municipal Statute, regulation, or ordinance governing the same and shall otherwise in its occupancy of said building, comply in all respects with the governing statutes and ordinances including the prompt removal of all obstructions or hazards of any nature from the sidewalk and all parking areas on the premises; neither will TENANT utilize said premises for any purpose which would result in the increase of the rate of insurance thereon or for any purpose tending to injure the reputation of the premises or the LANDLORD or to disturb tenants of adjoining premises or to otherwise create a nuisance in the neighborhood.

(11) Assignment

11.1 This lease and the agreements herein contained may be assigned by LANDLORD or utilized as security by LANDLORD without the consent of TENANT. TENANT may not assign, sublet or permit occupancy of said premises by third persons without the prior written consent of LANDLORD.

(12) Liability of LANDLORD

12.1 LANDLORD shall not be liable to TENANT for any damage occasioned to the property of TENANT from the water, electricity or gas supplied to said premises or otherwise, in any manner, from the plumbing thereof, or from fire, structural failure or loss from natural causes sustained upon said premises, unless the same shall be directly attributable to the negligence of LANDLORD or LANDLORD'S agents.

(13) Insurance

13.1 TENANT shall carry such insurance upon the interior of said premises and for any damage inflicted to said building by an instrumentality or equipment utilized in said building and under the control of TENANT; and LANDLORD shall maintain such insurance upon said building, insuring the same against the common risks.

13.2 TENANT shall carry general liability insurance and liquor liability shall be included with limits of at least \$500,000.00 per occurrence and \$1,000,000.00 general aggregate, and that said insurance shall contain the name of LANDLORD as an additional insured, as the same relates to the leased premises or the use and utilization of the subject premises by TENANT and its agents, servants, employees, customers, and clients. TENANT shall provide proof of insurance to LANDLORD on an annual basis or when there is a change in insurance carriers.

(14) Covenants of LANDLORD

14.1 LANDLORD covenants that LANDLORD is the owner in fee of the premises forming the subject matter of this lease and that TENANT shall have peaceful and quiet enjoyment of said premises throughout the term of this lease.

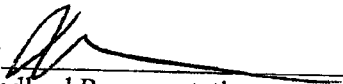
14.2 Nothing herein contained shall create a partnership or joint venture between the LANDLORD and TENANT or render either party in any way responsible for debts, losses or obligations of the other as the relationship herein created is solely that of LANDLORD and TENANT.

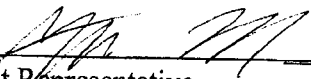
(15) Default

Dated this 23rd day of November, 2022.

Wilkinson Development, Inc.

El Rancho Viejo

by: 
Landlord Representative

by: 
Tenant Representative

GUARANTEE

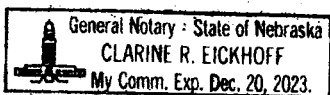
The undersigned, hereby jointly and personally guarantees the performance of all of the terms and conditions, obligations and responsibilities of the TENANT, San Pedro, Inc., in and to the above lease agreement.

Aylin Manriquez
Aylin Manriquez

STATE OF NEBRASKA)
) SS
COUNTY OF LINCOLN)

ON THIS 23rd DAY OF November, 2022 before me the undersigned, a Notary Public, commissioned, qualified and residing in said County, personally came Mark Wilkinson by me known to be the identical person whose name is affixed to the foregoing instrument and acknowledged the execution thereof to be his voluntary act and deed on behalf of Wilkinson Development, Inc.

WITNESS my hand and notarial seal the day and year last above written.

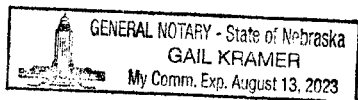


Clarine R Eickhoff
Notary Public

STATE OF Nebraska)
) SS
COUNTY OF Dawson)

ON THIS 30th DAY OF November, 2022 before me the undersigned, a Notary Public, commissioned, qualified and residing in said County, personally came Aylin Manriquez by me known to be the identical person whose name is affixed to the foregoing instrument and acknowledged the execution thereof to be his voluntary act and deed.

WITNESS my hand and notarial seal the day and year last above written.



Gail Kramer
Notary Public

Manriquez LLC

DBA El Rancho Viejo

Business Plan

Manriquez LLC DBA El Rancho Viejo was formed in 2022 as a part of a family vision. A vision to serve as part of the community and to create a place where people of all walks of life are welcomed with open arms. Aylin Manriquez, owner and manager of Manriquez LLC has been in the food and beverage industry for years; working in various of her family's restaurant both in Nebraska and Kansas. In order to make sure the restaurant is always compliant and to avoid any selling of alcohol to minors; all servers will be TIPS certified, management will self conduct tests on the servers to ensure the illegal consumption of alcohol does not occur on premises.