



15 DEC 4 Liq. Dept AM1031
 State of Arizona
 Department of Liquor Licenses and Control
 800 W. Washington 5th Floor
 Phoenix, AZ 85007
 (602) 542-5141

15 NOV 9 Liq. Dept AM1255

DLCC USE ONLY	
Date Processed:	12-1-15
CSR:	SG
60th Day:	2/5/15

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

NOTE 1: The fee for an agent change **MUST** be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H) **NOTE 2:** The \$100.00 fee for restructure/acquisition of control **MUST** be submitted with this application. (A.R.S. 4-209.A)

SECTION 1

Check the appropriate boxes

<input checked="" type="checkbox"/> Agent Change Complete Sections 1,2,3,4,5 & 7	<input checked="" type="checkbox"/> Acquisition of Control Complete Sections 1,2, 3 & 7	<input type="checkbox"/> Restructure Complete Sections 1,2,3,6 & 7
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SECTION 2 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name: Barnes, Robert, Royce P1075204 06020012
(EXISTING AGENT OR NEW AGENT) Last First Middle Liquor License #

2. Owner Name: Turquoise Valley Inc. 81020175 Corp File #: 0523040-5
(Exactly as it appears on Liquor License) City State Zip (if applicable)

3. Business Name: Turquoise Valley Gof Course 8100191 Email: rbuspc@gmail.com
(Exactly as it appears on Liquor License) City State Zip

4. Business Location Address: 1794 Newell Rd., Naco, Cochise, 85620
(Do not use P.O. Box Number) City COUNTY Zip

5. Is the Business located within the incorporated limits of the above City or Town? Yes No

6. Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation? Yes No If Yes, what City, Town or Tribal Reservation is this Business located in: _____

7. Mailing Address: PO Box 727, Naco, AZ 85620
City State Zip

8. Business Phone: 520-432-7233 Daytime Contact Phone 520-366-6237

9. Does this transaction involve the sale of any portion of the percentage of ownership or corporate stock? Yes No
 If yes, submit a certified copy of minutes.

10. Has there been any change of Controlling Persons? Yes No If yes, submit a copy of the minutes, amended articles of organization and/or amended operating agreement showing change.

SECTION 3 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each new person listed in section III must submit a questionnaire (form LIC0101) and a Department approved fingerprint card which may be obtained at the Department of Liquor. A Controlling Person already disclosed to the Department is not required to submit a questionnaire.

1. List all Controlling Persons to be disclosed, current and new.

New	Last	First	Middle	Title	Address	City	State	Zip
<input checked="" type="checkbox"/>	BARNES	ROBERT	ROYCE	Pres/Dir	4032 N. Coronado Ave.,	Douglas,	AZ	85607
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

2. List stockholders, percentage owners and/or Controlling Members owning 10% or more

New	Last	First	Middle	% Owned	Address	City	State	Zip
<input checked="" type="checkbox"/>	TV LLC			100	4032 N. Coronado Ave,	Douglas		85607
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

If the ownership is owned by another entity, ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND 10% OR MORE OWNERS FOR THE ENTITIES. Attach additional sheets as necessary in order to disclose all persons.

SECTION 4

(COMPLETE THIS SECTION FOR AGENT CHANGE)

1. As an Agent, will you be physically present and operating the licensed premise? Yes No

If you answered YES, you must provide a copy of your Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider BEFORE YOUR APPLICATION FOR AGENT ACQUISITION OF CONTROL OR RESTRUCTURE CAN BE SUBMITTED. If you answered NO, go to question 2.

2. Is there a current Manager at this license premises disclosed to the Department with the current Basic and Management Training Certificate? Yes No

If yes, Name of current Manager: _____ Last First Middle

Basic Training Yes No

Management Training Yes No

If "NO" for 1 and 2, a Manager with a current Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider must be submitted before your application for Agent Change, Acquisition of Control or Restructure can be submitted.

SECTION 5

(COMPLETE THIS SECTION FOR AGENT CHANGE)

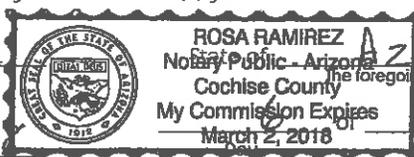
To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License # 06020012

2. Current Agent Name: Campbell, Peter, Joseph-Andre
(Exactly as it appears on license) Last First Middle

I, (Print full name) Robert Royce Barnes, hereby consent to the appointment of Agent for this license. I agree to immediately assign a new Agent in the event that I am unable to discharge the duties of Agent for this license. I have not been convicted of a felony in the last five (5) years.

X Robert Royce Barnes
(Controlling Person/Existing Agent)



County of Cochise
the foregoing instrument was acknowledged before me this
My Commission Expires November, 2015
Month Year

My commission expires on: March 2, 2018

Rosa Ramirez
Signature of NOTARY PUBLIC

SECTION 6

(COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved? YES NO

If YES, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

Type of new ownership:

- J.T.W.R.O.S.
- INDIVIDUAL
- PARTNERSHIP
- CORPORATION
- LIMITED LIABILITY CO.
- MANAGEMENT CO.
- TRIBE
- TRUST
- OTHER (Explain) _____

- J.T.W.R.O.S.
- INDIVIDUAL
- PARTNERSHIP
- CORPORATION
- LIMITED LIABILITY CO.
- MANAGEMENT CO.
- TRIBE
- TRUST
- OTHER (Explain) _____

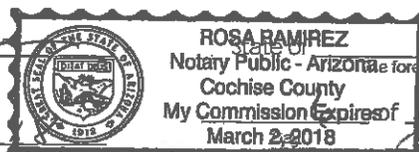
SECTION 7

(COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by Controlling Person or existing Agent (if no agent changes) OR NEW Agent if applying for Agent change as listed in Section 2 Question 1.

I, (Print full name) Robert Royce Barnes, hereby declare that I am the APPLICANT filing this application. I have read the application and the contents and all statements are true, correct and complete.

X Robert Royce Barnes
(Controlling Person/Existing Agent)

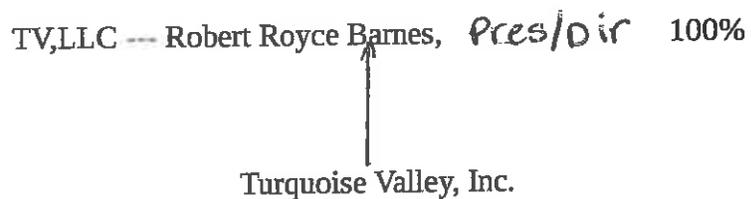


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My Commission Expires of November, 2015
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Rd Ramirez
Signature of NOTARY PUBLIC

Corporate Ownership Flow Chart



Robert Royce Barnes, Managing Member

11/5/15



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

NOTIFICATION TO LOCAL GOVERNING BODY

AGENT CHANGE

ACQUISITION OF CONTROL AND AGENT CHANGE

ACQUISITION OF CONTROL

LIQUOR LICENSE NO: 06020012
 DATE PROCESSED: 12-7-15

APPLICATION ACCEPTED BY: SG
 60TH DAY: 2/5/16

A.R.S. § 4-203.F

If a person other than those persons originally licensed acquires control over a license or licensee, the person shall file notice of the acquisition with the Director within fifteen business days after such acquisition of control and a list of officers, directors or other controlling persons on a form prescribed by the Director. All officers, directors or other controlling persons shall meet the qualifications for licensure as prescribed by this title. On request, the director shall conduct a pre-investigation prior to the assignment, sale or transfer of control of a license or licensee, the reasonable costs of which, not to exceed one thousand dollars, shall be borne by the applicant. The pre-investigation shall determine whether the qualifications for licensure as prescribed by this title are met. On receipt of notice of an acquisition of control or request of a pre-investigation, the Director shall forward the notice within fifteen days to the local governing body of the city or town, if the licensed premises is in an incorporated area, or the county, if the licensed premises is in an unincorporated area. **The Local Governing Body of the city, town or county may protest the acquisition of control within sixty days based on the capability, reliability and qualification of the person acquiring control. If the Director does not receive any protests, the Director may protest the acquisition of control or approve the acquisition of control based on the capability, reliability and qualification of the person acquiring control.** Any protest shall be set for a hearing before the Board. Any transfer shall be approved or disapproved within one hundred five days of the filing of the notice of acquisition and control. The person who has acquired control of a license or licensee has the burden of an original application at the hearing, and the board shall make its determination pursuant to section 4-202 and this section with respect to capability, reliability and qualification.

Cochise County



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2. Owner Name: Turquoise Valley Inc.
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4. Business Location Address: 1794 Newell Rd., Naco, Cochise, 85620
5. Is the Business located within the incorporated limits of the above City or Town?
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1. List all Controlling Persons to be disclosed, current and new.

Table with columns: New, Last, First, Middle, Title, Address, City, State, Zip. Row 1: BARNES, ROBERT, ROYCE, Pres/Dir, 4032 N. Coronado Ave., Douglas, AZ 85607

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

2. List stockholders, percentage owners and/or Controlling Members owning 10% or more

Table with columns: New, Last, First, Middle, % Owned, Address, City, State, Zip. Row 1: TV LLC, 100, 4032 N. Coronado Ave, Douglas 85607

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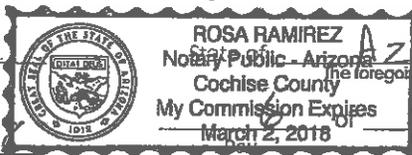
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X Robert Royce Barnes (Controlling Person/Existing Agent)



County of Cochise The foregoing instrument was acknowledged before me this November 2015 Month Year

Rosa Ramirez Signature of NOTARY PUBLIC

My commission expires on: March 2, 2018

SECTION 6

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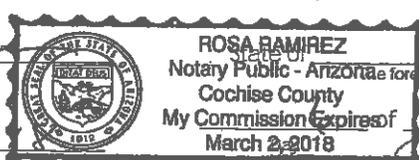
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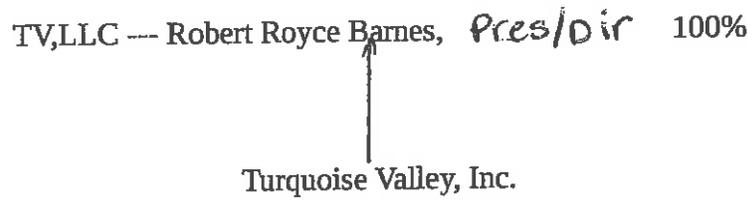


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Robert Royce Barnes, Managing Member

Robert Royce Barnes
11/5/15



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Cochise County