	OFFICE	USE ONLY	-
Original	Amended	Date	

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Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

1. Date Notice was Sent: 04/	/11/2019	1a Dalimond Im				
		1a. Delivered by:	Overnight Mail with Tracking Number			
	on that will be filed with the Authorit					
New Application	Renewal C Alteration C Corp	orate Change 🔘 Remo	val Class Change Method of Operation Change			
For Renewal applicants, For Alteration applicant For Corporate Change a For Removal applicants, For Class Change applica	ts, attach a complete written descrip applicants, attach a list of the current s, attach a statement of your current ants, attach a statement detailing yo	otion and diagrams depic t and proposed corporat and proposed addresses our current license type a	ting the proposed alteration(s) e principals with the reason(s) for the relocation			
This 30-Day Advance Notice	ce is Being Provided to the Clerk	of the Following Loca	l Municipality or Community Board:			
3. Name of Municipality or Cor	mmunity Board: Manhattan Cor	mmunity Board No. 3				
Applicant/Licensee Information	ation:					
4. Licensee Serial Number (if a	pplicable): 1301890	Ехр	ration Date (if applicable): 10/31/2019			
5. Applicant or Licensee Name	MJK Foods LLC.					
6. Trade Name (if any): Juk	ku and Straylight					
7. Street Address of Establishm	nent: 32 Mulberry Street					
8. City, Town or Village: Ne	w York	, N	Y Zip Code: 10013			
9. Business Telephone Number	r of Applicant/Licensee: (646) 590)-2111				
10. Business E-mail of Applican	nt/Licensee: kcohen@panthed	onproperties.com				
11. Type(s) of alcohol sold or to	o be sold: O Beer & Cider	O Wine, Beer & Cider	Liquor, Wine, Beer & Cider			
12. Extent of Food Service:						
Full food menu; full kite	chen run by a chef or cook 🏻 🔘 Me	nu meets legal minimun	food availability requirements; food prep area at minimum			
13. Type of Establishment: St	ushi Restaurant and Bar					
(check all that apply)	Seasonal Establishment					
15. Licensed Outdoor Area: (check all that apply)	None Patio or Deck Sidewalk Cafe Other (speci		/Grounds Freestanding Covered Structure			

				nded [Date				((
ne floor(s) of the	building that the	e establishme	nt is located	on: Cellar	, First i	loor and	Mezzanine		
List the room number	(s) the establishr	nent is locate	d in within t	the building, if	appropi	riate: N/	A		
Is the premises located	d within 500 feet	t of three or r	nore on-pre	mises liquor e	stablishr	ments?	Yes ON	lo	
Will the license holder	r or a manager b	e physically p	resent withi	in the establish	nment de	uring all ho	urs of operation?	Yes	No No
If this is a transfer app	dication (an exist	ing licensed h	ousiness is h	eing nurchase	d) provid	le the nam	e and serial numb	er of the licens	ee:
N/A				13 F	N/A				
		Name			-		Serial	Number	
Does the applicant or l	licensee own the	building in w	hich the es	tablishment is	located?	' ⊜Ye:	s (if YES, SKIP 23-2	6) N o	
					censed	Establish	ment is Located		
Building Owner's Full N	vame: Fook I	Luk Realty	c/o Juan F	ernandez					
Building Owner's Stree	et Address:	00 Mott Str	eet - 2nd F	loor					
City, Town or Village:	New York				State:	New Yo	rk	Zip Code:	10013
Business Telephone Nu	umber of Buildin	g Owner: 7	212) 966-3	190					
	ey's Full Name:	Benjamir	Savitsky						
	ey's Street Addro			, P.C. I 1177	Avenu	e of the A	Americas - 5th F	Floor	
Representative/Attorn	ey's Street Addre			, P.C. I 1177	Avenu State:	e of the A		Floor Zip Code:	10038
Representative/Attorn	New York	ess: Berns	stein Redo	, P.C. I 1177 212) 651-310	State:				10038
Representative/Attorn City, Town or Village: Business Telephone Nu	New York	ess: Berns	rney: (2		State:				10038
Representa the Autho upon, ar	New York umber of Representations of Representations in this foority when grand that false resignature, I aff	entative/Atto entative/Attorney censee hold orm are in conting the lice presentation irm - under	rney: (2 ben@t er or a prin onformity v ense. I und ns may res	orpclaw.com ncipal of the with represer erstand that uit in disappi	State: O legal entations represerval of	tity that he made in entations the applications the applications are sental.		Zip Code: ng for the lice ments relied u m will also be tion of the lice	nse. pon by relied ense.

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