

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

1. Date Notice was Sent: 1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

- New Application
 Renewal
 Alteration
 Corporate Change
 Removal
 Class Change
 Method of Operation Change

For **New** applicants, answer each question below using all information known to date

For **Renewal** applicants, answer all questions

For **Alteration** applicants, attach a complete written description and diagrams depicting the proposed alteration(s)

For **Corporate Change** applicants, attach a list of the current and proposed corporate principals

For **Removal** applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation

For **Class Change** applicants, attach a statement detailing your current license type and your proposed license type

For **Method of Operation Change** applicants, although not required, if you choose to submit, attach an explanation detailing those changes

Please include all documents as noted above. Failure to do so may result in disapproval of the application.

This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:

3. Name of Municipality or Community Board:

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village: , NY Zip Code:

9. Business Telephone Number of Applicant/Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold: Beer & Cider Wine, Beer & Cider Liquor, Wine, Beer & Cider

12. Extent of Food Service:

- Full food menu; full kitchen run by a chef or cook
 Menu meets legal minimum food availability requirements; food prep area at minimum

13. Type of Establishment:

14. Method of Operation: (check all that apply)

Seasonal Establishment
 Juke Box
 Disc Jockey
 Recorded Music
 Karaoke

Live Music (give details i.e., rock bands, acoustic, jazz, etc.):

Patron Dancing
 Employee Dancing
 Exotic Dancing
 Topless Entertainment

Video/Arcade Games
 Third Party Promoters
 Security Personnel

Other (specify):

15. Licensed Outdoor Area: (check all that apply)

None
 Patio or Deck
 Rooftop
 Garden/Grounds
 Freestanding Covered Structure

Sidewalk Cafe
 Other (specify):

16. List the floor(s) of the building that the establishment is located on: **1st Floor and Cellar**

17. List the room number(s) the establishment is located in within the building, if appropriate: _____

18. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation? Yes No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:
Name: _____ Serial Number: _____

21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name: **Organization for the Defense of Four Freedoms of Ukraine**

23. Building Owner's Street Address: **136 2nd Avenue**

24. City, Town or Village: **New York** State: **NY** Zip Code: **10003**

25. Business Telephone Number of Building Owner: **(212) 505-0767**

Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice

26. Representative/Attorney's Full Name: _____

27. Representative/Attorney's Street Address: _____

28. City, Town or Village: _____ State: _____ Zip Code: _____

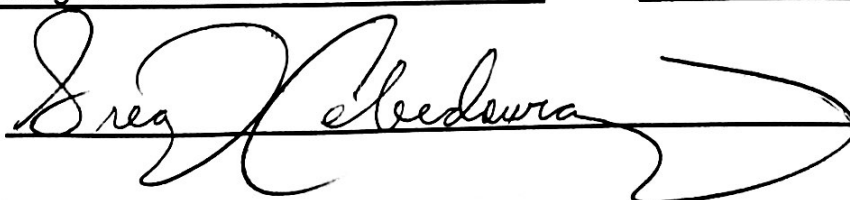
29. Business Telephone Number of Representative/Attorney: _____

30. Business E-mail Address of Representative/Attorney: _____

I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

31. Printed Principal Name: **Greg Lebedowicz** Title: **Managing Member**

Principal Signature: 

UKI FREEDOM LLC
DBA BRASSERIE SAINT MARC
136 2ND AVE MANHATTAN NY 10003
718 612 5804

To Whom it May Concern, CB3, et al,


In regards to the issue of corporate change, there is a major issue with the (in hindsight poor) choice of name for the LLC. As an homage to my Ukrainian heritage and the incessant Russian aggression towards our country and my family members in Ukraine, which continues today, the LLC name was to be, "Uki Freedom LLC." Regardless, I erred in expecting the US Post Office and other couriers being able to distinguish, care, or have the time/energy to differentiate between my LLC and the 50 something other ones associated with 136 2nd Ave. Needless to say I share a lobby with 24 mailboxes. Those 23 other mailboxes have similar names, all of them being Ukrainian organizations and most patriotic as well. Some of the other names include Ukrainian Freedom Foundation, Four Freedoms for the Defense of Ukraine. I almost had a heart attack recently when certified mail was given to me months late which ended up in another mailbox. I only have a key and access to my single box so I don't know what gets lost or goes where until much too much later if at all in certain instances. This is not only a burden and headache but rather a danger in trying to comply and run a business in a legal and timely fashion. As such I would like to and intend to change the LLC to the new name of, "Restaurant Bar 136 LLC," or a very similar name, with the intent of making it as clear as possible for couriers to correctly deliver my mail. Additionally, my father, Jerry Lebedowicz, who is an officer and fellow operator, has decided he cannot be active in operations to the extent necessary due to Covid-19 circumstances. He is elderly, over the age of 65, and doesn't believe it wise or possible to be present at the restaurant in the foreseeable future and thus would like to be removed from the new license and new entity being formed to replace the current one. He will still be actively involved but not to the extent expected or required to the extent expected by a license holder. Upon this Covid-19 pandemic being stabilized or whatever will come, he is willing to resume his role, but due to health complications including multiple stints in his heart, high blood pressure, hypertension, and others he prefers not to publicize, he cannot manage in person without being in willful disagreement and violation of all of his doctors' recommendations. Additionally, I would like to add the mother of my children, Karin Agstam, onto the liquor license. In the event I am incapacitated due to Covid-19 or some other serious ailment, she is ready, willing, and able to step in and manage on my behalf as needed. Additionally she shares in the passion and willingness to carry on duties and as the mother of my children, we are all very confident in her fiduciary intent and interest.

Thank You,

Greg Lebedowicz

718 612 5804

Managing Member and Licensee



Jan 6, 2021

JAN 6, 2021

