

22041



CITY OF AURORA, ILLINOIS LIQUOR LICENSE APPLICATION



ALL INFORMATION ON THIS FORM MUST BE COMPLETED IN BLACK INK, PRINTED OR TYPED AND SUBMITTED TO THE CITY CLERK'S OFFICE, 44 E. DOWNER PLACE, AURORA, IL

LICENSE YEAR: 05 / 1 / 15 TO
4 / 30 / 16

I. APPLICANT INFORMATION

APPLICANT / CORPORATE NAME THE PRIDE STORES, INC
 D/B/A NAME THE PRIDE OF AURORA
 BUSINESS LOCATION ADDRESS 1395 BUTTERFIELD RD AURORA IL 60502
 BUSINESS PHONE (630) 851-5585 FAX NUMBER (630) 851-2399
 APPLICANT'S REPRESENTATIVE PETER MANCINI
 REPRESENTATIVE'S PHONE (630) 584-2509 CELL (630) 373-1244
 E-MAIL ADDRESS FOR CONTACTING BUSINESS PMANCINI@PARENTPETROLEUM.COM

OFFICIAL USE ONLY

REQUIREMENTS - NEW APPLICATIONS:

- APPLICATION FEE
- BIS (BUSINESS INFORMATION SHEET)
- EDF (FINANCIAL DISCLOSURE FORM)
- CERTIFICATE OF REGISTRATION (FOOD & BEVERAGE TAX)
- CERTIFICATE OF OCCUPANCY
- CERTIFICATE OF INCORPORATION
- PIF (PERSONAL INFORMATION FORMS) (BACKGROUND CHECKS)
- SEATING CHART (DRAWN TO SCALE) (MUST INCLUDE OUTDOOR SEATING, IF PLANNED)
- PROBATIONARY AGREEMENT / MANAGEMENT PLAN
- OTHER _____

REQUIREMENTS - NEW & RENEWAL APPLICATIONS:

- COPY OF LEASE / PROOF OF OWNERSHIP
- COPY OF DRAM SHOP INSURANCE (LIQUOR LIABILITY INSURANCE)
- COUNTY HEALTH DEPT. CERTIFICATE
- COPY OF MENU, IF APPLICABLE
- COPY OF STATE LIQUOR LICENSE
- COPY OF STATE-CERTIFIED BEVERAGE ALCOHOL SELLERS/SERVERS TRAINING CERTIFICATES
- OTHER _____

NOTES: _____

APPROVED
 DENIED
 DATE OF APPROVAL / DENIAL _____

DATE RECEIVED _____
 DATE ISSUED _____

MAYOR / LIQUOR CONTROL COMMISSIONER

II. BUSINESS INFORMATION

Business Name THE PRIDE OF AURORA
 Business Address 1395 BUTTERFIELD RD AURORA IL 60502
 Employer Identification Number (EIN) 36-2877800
 Website WWW.THEPRIDESTORES.COM

DESCRIPTION OF BUSINESS FACILITY

Total Area (square feet)	Entertainment Area (square feet)	Kitchen Area (square feet)	Number of Seats at Tables	Number of Parking Spaces
3500	N/A	N/A	N/A	18

III. LIQUOR LICENSE CLASSIFICATION

Select the classification of liquor license you are applying / re-applying for from the listing of classifications below. See Sec. 6-8 of the City of Aurora Liquor Ordinance for a description of each license classification and its particular requirements.

- CLASS A - Tavern. \$2,070.00
- CLASS B - Fraternal Society or Club. \$2,070.00
- CLASS C - Package Liquor \$1,815.00
- CLASS D-1 - Metropolitan Exposition and Auditorium \$1,815.00
- CLASS D-2 - Theatrical-Arts Facility \$1,815.00
- CLASS E - Restaurant \$2,070.00
- CLASS F - Beer and Wine Restaurant \$1,815.00
- CLASS F-1 - Beer and Wine Restaurant with Package Sales \$2,000.00
- CLASS G - Package Beer and Wine \$1,650.00
- CLASS H - Golf Course / Club House \$2,070.00
- CLASS I - Specialty Basket \$550.00
- CLASS J - Hotel (Full Service) \$2,070.00
- CLASS K - Catering \$825.00
- CLASS L - Riverboat Facility \$2,070.00
- Members-only Lounge*
- \$4,140.00
- CLASS M - Hotel (Limited Service) \$2,070.00
- CLASS N - Specialty Package \$1,815.00

IV. PREVIOUS LIQUOR LICENSES

1. Starting with the most recent, list any business that was owned or operated by the applicant within the past ten (10) years that possessed a liquor license. If more space is needed, please attach a separate sheet.

Business Name: THE PRIDE OF CICERO
Address: 3100 S. CICERO AVE CICERO IL 60804
Phone: 708-652-9025 Date Owned (mm/yy - mm/yy) 7-13-15-CURRENT
Liquor License Number: 1A-1126905
Business Name: THE PRIDE OF ELGIN
Address: 1700 N STATE ELGIN IL 60123
Phone: 847-741-5784 Date Owned (mm/yy - mm/yy) 8-1-2015-7-30-2016
Liquor License Number: 1A-1123176

2. Have any liquor licenses issued to the applicant been revoked or suspended? Yes No
If Yes, proceed to Question 2A. If more space is needed, please attach a separate sheet.

2A. Name: _____ Name of Business: _____
Address: _____
Date License Held (mm/yy - mm/yy): _____ Date of Revocation: _____
Reason(s) for Revocation of License: _____

3. Has any director, officer, shareholder, or any of your managers ever held a liquor license (wholesale or retail) that was revoked by the federal, state, or local government? Yes No
If Yes, proceed to Question 3A. If more space is needed, please attach a separate sheet.

3A. Name: _____ Name of Business: _____
Position with Business: _____
Date License Held (mm/yy - mm/yy): _____ Date of Revocation: _____
Reason(s) for Revocation of License: _____

4. Has any director, officer, shareholder, or any of your managers ever been denied a liquor license from any jurisdiction? Yes No **If Yes, proceed to Question 4A. If more space is needed, please attach a separate sheet.**

4A. Name: _____ Name of Business: _____
Position with Business: _____
Date of Denial: _____
Reason(s) for Denial of License: _____

IV. PREVIOUS LIQUOR LICENSES

1. Starting with the most recent, list any business that was owned or operated by the applicant within the past ten (10) years that possessed a liquor license. If more space is needed, please attach a separate sheet.

Business Name: PRIDE OF LAKE COUNTY
Address: 20915 QUINTEM RD KYLDEER IL 60047
Phone: 847-550-8392 Date Owned (mm/yy - mm/yy) 4-1-2015-CURRENT
Liquor License Number: 1A-0110029

Business Name: PRIDE OF GENEVA
Address: 1166 E STATE ST GENEVA IL 60134
Phone: 630-845-9300 Date Owned (mm/yy - mm/yy) 5-1-2014 CURRENT
Liquor License Number: 1A-1120289

IV. PREVIOUS LIQUOR LICENSES

1. Starting with the most recent, list any business that was owned or operated by the applicant within the past ten (10) years that possessed a liquor license. If more space is needed, please attach a separate sheet.

Business Name: PRIDE OF WHEATON
Address: 25W420 GENEVA RD WHEATON IL 60189
Phone: 630-462-1300 Date Owned (mm/yy - mm/yy) 12-1-2012-CURRENT
Liquor License Number: 1A-0075014

Business Name: PRIDE OF HINSDALE
Address: 149 E OGDEN AVE HINSDALE IL 60521
Phone: 630-455-5841 Date Owned (mm/yy - mm/yy) 5-1-2011-CURRENT
Liquor License Number: 1A-0099745

IV. PREVIOUS LIQUOR LICENSES

1. Starting with the most recent, list any business that was owned or operated by the applicant within the past ten (10) years that possessed a liquor license. If more space is needed, please attach a separate sheet.

Business Name: THE PRIDE STORES INC BP CERMAK
Address: 11201 CERMAK RD WESTCHESTER IL 60154
Phone: 708-562-4685 Date Owned (mm/yy - mm/yy) 5-1-2011-CURRENT
Liquor License Number: 1A-0094737

Business Name: THE PRIDE STORES INC BP MANNHEIM
Address: 825 MANNHEIM RD WESTCHESTER IL 60154
Phone: 708-343-0235 Date Owned (mm/yy - mm/yy) 5-1-2011-CURRENT
Liquor License Number: 1A-0094741

V. BUSINESS ORGANIZATION INFORMATION

TYPE OF BUSINESS: Sole Proprietor Partnership LLC Corporation Non-Profit

For LLC, Corporation or Non-Profit organizations, proceed to Question C.

A. Name of Sole Proprietor: _____

D/B/A (Doing Business As) Name: _____

B. Name of ALL Partners (If more space is needed, please attach separate sheet): _____

C. Corporation Name: THE PRIDE STORES INC.

Corporate Registered Agent / Contact: PETER MANCINI

Corporate Headquarters Address: 3340 W MAIN ST. CHARLES FL 60175

Corporate Phone: 630-584-2509 Corporate Contact Cell Phone: 630-373-1244

State of Incorporation: ILLINOIS Date of Incorporation: 7/30/1976

VI. OWNER / MANAGER INFORMATION

Please provide the below-requested information as follows:

Sole Proprietor or Partnerships - ALL owner(s) and partner(s)

Corporations - ALL director(s) and officer(s)

If more space is needed, please attach a separate sheet.

Name: PETER MANCINI

Position with Business: PRESIDENT % of Ownership: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ Place of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: 630-373-1244

E-mail Address: PMANCINI@parentpetroleum.com

Name: WILLIAM BOYLAN

Position with Business: SECRETARY / AGENT % of Ownership: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: 1 Place of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: 630-204-0115

E-mail Address: WBOYLAN@parentpetroleum.com

Name: GAIETANO MORGANO

Position with Business: VICE-PRESIDENT % of Ownership: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ Place of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: 630-363-2808

E-mail Address: GMORGANO@thepridestores.com

2. OWNERS / PARTNERS / DIRECTORS / OFFICERS (Continued):

Name: _____
Position with Business: _____ % of Ownership: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ Place of Birth: _____
Home Address: _____
Home Phone: _____ Cell Phone: _____
E-mail Address: _____

Name: _____
Position with Business: _____ % of Ownership: _____
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ Place of Birth: _____
Home Address: _____
Home Phone: _____ Cell Phone: _____
E-mail Address: _____

VII. MANAGER, ASSISTANT / SECONDARY MANAGER / COOK INFORMATION

ALL Managers and an Assistant or Secondary Manager MUST Submit to a background check.

For Class E-Restaurant, Class F and Class F-1-Beer and Wine Restaurant applications, provide the name and address of the cook or chef responsible for duties as outlined in the City Liquor Ordinance.

Manager's Name: JOSEPH M^CGLYNN
Position with Business: STORE MANAGER % of Ownership: 0
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ Place of Birth: _____
Home Address: _____
Home Phone: N/A Cell Phone: 630-207-7692
E-mail Address: PA@thepridestores.com

Manager's Name: EDITH WINSTON
Position with Business: ASSISTANT MANAGER % of Ownership: 0
Social Security Number: _____ Date of Birth: _____
Driver's License Number: _____ Place of Birth: _____
Home Address: _____
Home Phone: N/A Cell Phone: 630-248-4312
E-mail Address: PA@thepridestores.com

Cook / Chef's Name: _____
Home Address: _____

VIII. CORPORATION / PREMISES QUESTIONS

1. Have you attached a copy of your corporation's Certificate of Incorporation? Yes No

If your corporation is incorporated in another state other than the State of Illinois, please attach a copy of the document pursuant to which the corporation is qualified to transact business in Illinois under the Illinois Business Corporation Act.

2. Has the corporation ever been dissolved either voluntary or involuntary?
 Yes No If Yes, state of date of reinstatement.

3. Is the corporation a subsidiary of a parent corporation?
 Yes No If Yes, state the parent corporation's name.

PARENT PETROLEUM

4. Is the corporation obligated to pay a percentage of profits to a parent corporation or any person or entity not listed as a shareholder above?
 Yes No If Yes, explain.

5. How long has the corporation been in the business of the retail sale of alcohol (years/months)?

9 YRS 3 mo.

6. Does the corporation own or lease the building or the space in which the business is located?
 Own Lease If you lease the premises, a copy of the lease must be attached to this application.

7. If the building is not owned, what is the expiration date of the lease?

12-31-2023

8. Do you have or intend to have a management contract with another entity or person, who is not a bona fide employee, to manage the licensed business for you?
 Yes No If Yes, state the name and address of the manager or management company. A management company affidavit must accompany this application.

9. If this is a new license application, what kind of business was previously conducted in the space in which you intend to operate your business?

CONVENIENT STORE

10. State the estimated value of goods, wares and merchandise to be used in the course of business.

\$20,000 LIQUOR INVENTORY

11. Has any director, officer, shareholder, or any of your managers ever been found guilty of a felony or misdemeanor, including but not limited to any gambling offense and any alcohol related traffic offense?
 Yes No If Yes, explain the charge, date, city, and state where the charge was brought, and the disposition. This must include all findings of guilty, whether subsequently vacated or not, whether expunged or not, and shall specifically include any orders of court supervision, whether satisfactorily completed or not.

12. Does the director, officer, shareholder, or any of your managers hold any law enforcement office?
 Yes No If Yes, state the person's name, title and agency.

13. Other than when making an initial application for a license, has your corporation or any predecessor to or subsidiary or parent of your corporation ever been subject to charges, hearing, or investigation by any jurisdiction with respect to a liquor license? Yes No

If Yes, list each and every charge, the date of the charge, the eventual disposition of the charge, and the municipality or other jurisdiction bringing the charge. If no charges were filed, state the reason(s) for the investigation or hearing.

14. Is the premises within 100 feet of a church, grade school, middle school, alternative school or high school, hospital, or home for the indigent? Yes No

15. If applicant is applying for a **Class B - Fraternal Society or Club Liquor License**:

A. How many dues-paying members do you have? _____ (Attach a listing of members' names and addresses.)

B. Does your club have the qualifications described in the Illinois Act and the City of Aurora Liquor Ordinance?

Yes No

16. Does your establishment have entertainment?

Yes No If Yes, list each form of entertainment you will be holding (i.e. bands / solo acts, DJ's, etc.)

17. Do you employ security?

Yes No Only when entertainment is held

If Yes, do you:

Hire Private Security Company

Use On-staff Employees

Hire Off-duty Police Officers

Combination of the Above

If you hire a Private Security Company, please provide the company name and contact person.

18. For Class E-Restaurant, Class F, and Class F-1-Beer and Wine Restaurant applications, provide a copy of menu with application.

19. For Class E-Restaurant, Class F, and Class F-1-Beer and Wine Restaurant applications, provide a drawing, drawn to scale, of the layout of tables and chairs as they will be positioned in your restaurant. The drawing should include all bars, stages, dance floors, amusement devices, and kitchen area(s).

20. Is the applicant required by the City of Aurora Liquor Ordinance to prepare and serve food for consumption on the licensed premises?

Yes No (If YES, please attach a copy of your current County Health Department Certificate.)

21. Proof of Dram Shop (Liquor Liability) Insurance is mandatory and required to be on file with the Liquor License Application. (Please attach a copy of the insurance policy to this application.)

22. Proof of satisfactory completion of a state-certified beverage alcohol sellers and service education and training program for all persons who serve or sell alcoholic beverages pursuant to your license is mandatory and required to be on file with the Liquor License Application. (Please attach a copy of all employees' certificates, if you have not already submitted same to the City Clerk's Office.)

24. Has the applicant completed and filed a Certificate of Registration Application and produced appropriate bond pursuant to Sec. 124 of Chapter 44 of the Aurora Code of Ordinances (Food & Beverage Tax)? Yes No

26. All NEW applications received after June 8, 2010 are subject to the Liquor License Probationary Agreement / Management Plan. If this a NEW application, has the applicant read, signed, and kept a copy of said Probationary Agreement / Management Plan? Yes No (This requirement does not apply to renewal applications.)

IX. AFFIDAVIT

I, first being duly sworn, under oath, deposes and say that I am an applicant for the license requested in the foregoing Application; that I am of good repute, character, and standing, and that answers to the questions asked in the foregoing Application are true and correct in every detail. I further state that I have read and understand the Code provisions in the City of Aurora's Liquor Ordinance. I further agree not to violate any of the laws of the United States, the State of Illinois or any of the ordinances of the City of Aurora. In the conduct of my place of business.

I ALSO UNDERSTAND THAT AN UNTRUE, INCORRECT, OR MISLEADING ANSWER GIVEN IN THIS APPLICATION IS SUFFICIENT CAUSE FOR THE REFUSAL TO GRANT, NON-RENEWAL, OR THE REVOCATION OF ANY LICENSE GRANTED PURSUANT TO THIS APPLICATION.

I further give my permission to the City of Aurora or any agency thereof to check with any agency or individual named or referred to in this Application to verify or clarify any answer that I have given.

CORPORATE / LLC SIGNATURES

INDIVIDUAL / PARTNERSHIP SIGNATURES

Pete Uranci

President

W. Murphy

Secretary

9/24/2015

Date

Signature

Signature

Date

Signed and sworn to before me this 24 day of September, 2015.

Brian G. Boylan

Notary Public



PART 3 FINANCING

IDENTIFY THE SOURCE(S) OF THE FUNDS USED TO PAY FOR THE EXPENSES LISTED IN PART 2

a BUSINESS SAVINGS & CHECKING

Identify any funds from business accounts used to fund Expenses, Part 2

Account Number	Financial Institution	Date Opened	Signatories on Account	Current Balance	Drawn for Business
				\$	\$
				\$	\$
				\$	\$
				\$	\$

Total dollar amount drawn from business accounts: **a** \$

Description of Source (identify the sources) of money in the accounts listed above	Contribution Frequency	Contribution Amount
		\$
		\$
		\$
		\$

b PERSONAL SAVINGS & CHECKING

Identify any funds from personal accounts used to fund Expenses, Part 2

Account Number	Financial Institution	Date Opened	Signatories on Account	Current Balance	Drawn for Business
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$

Total dollar amount drawn from personal accounts: **b** \$ 0

Description of Source (identify the sources) of money in the accounts listed above	Contribution Frequency	Contribution Amount
		\$
		\$
		\$
		\$

c LOANS FROM FINANCIAL INSTITUTIONS

Identify any loans from financial institutions used to fund Expenses, Part 2

Account Number	Financial Institution	Loan Date	Loan Term	Co-signers of Loan	Loan Amount
					\$
					\$
					\$
					\$

Total dollar amount loaned by financial institutions: **c** \$ 0

d LOANS FROM INDIVIDUALS

Identify any loans from individuals used to fund Expenses, Part 2

Name of Individual	Loan Date	Source of Funds for Loan	% Investment	Loan Amount
				\$
				\$
				\$
				\$

Total dollar amount loaned by individuals: **d** \$ 0

e SECURITIES		Identify any securities (stocks, bonds, CODs, etc.) sold to fund Expenses, Part 2				
Name of Security	Buy Date	Sell Date	# of Shares	Price	Ticker	Amount Invested
						\$
						\$
						\$
						\$

Total dollar amount drawn from the sale of securities: e \$ 0

f GIFTS FROM INDIVIDUALS		Identify any gifts from individuals used to fund Expenses, Part 2		
Name of Giver	Date of Gift	Source of Funds or Gift	# Investment	Amount
				\$
				\$
				\$
				\$

Total financing from gifts: f \$ 0

g GIFTS/GRANTS FROM INSTITUTIONS		Identify any gifts and/or grants from institutions used to fund Expenses, Part 2		
Institution	Address (Street, City State)	Contact Name & Phone	Grant Date	Amount Gifted
				\$
				\$
				\$
				\$

Total money received from institutional gifts and/or grants: g \$ 0

h OTHER FINANCING		Identify any other financing (credit cards, etc.) used to fund Expenses, Part 2
Description of Financing	Amount Financed	
	\$	0
	\$	
	\$	

Total money drawn from other financing: h \$ 0

= FINANCING TOTALS		Sub-total all funds (sections a-h) used to fund Part 2					
Business Accounts	a		Gifts from Individuals	f	\$	0	
Personal Accounts	b	\$	0	Gifts/Grants from Institutions	g	\$	0
Loans from Financial Institutions	c	\$	0	Other Financing	h	\$	0
Loans from Individuals	d	\$	0	TOTAL BUSINESS FINANCING (a-h)*	=		
Securities	e	\$	0	*Should be equal to or greater than total amount of expenses listed in Part 2			

PART 4 ACKNOWLEDGEMENT REVIEW THE FOLLOWING STATEMENT AND SIGN YOUR ACKNOWLEDGEMENT BELOW

I hereby certify, under penalty of perjury, that I am authorized to execute this form and that all information I have provided on this form is complete, true, and correct. I certify that I understand that all information provided on this Financial Disclosure Form will be corroborated. The City of Aurora reserves the right to request any and all documentation it determines necessary to perform this verification. I and/or my representative will have three business days to meet such requests, and failure to do so may result in a disapproved or suspended license application. I understand and accept that any falsification or purposely holding back of this information is grounds for recalling the license(s) issued.

Signature of Applicant: Peter Mance Date: 9-24-15

Subscribed to and sworn to before me this 24 day of September, 2015.
 Notary Public in and for said County and State: Brian G. Boylan



PA

CITY OF AURORA, ILLINOIS PROBATIONARY AGREEMENT / MANAGEMENT PLAN



FORM REQUIRED: CITY OF AURORA LIQUOR ORDINANCE SEC. 6-5. APPLICATION FOR LICENSE.

(i) UPON APPROVAL OF THE APPLICATION AND ISSUANCE OF ANY NEW LIQUOR LICENSE, THE LICENSEE WILL BE PLACED ON A ONE-YEAR PROBATION PERIOD. DURING SAID PROBATIONARY PERIOD, IF THE LICENSEE VIOLATES ANY SECTION OF THE LIQUOR ORDINANCE, AS SPECIFIED IN A PROBATIONARY AGREEMENT THAT INCLUDES A MANAGEMENT PLAN PUT FORTH TO THE LICENSEE PRIOR TO THE ISSUANCE OF A LICENSE, A LIQUOR HEARING WILL BE CALLED AND THE LICENSE MAY BE REVOKED IMMEDIATELY, WITH NO PROGRESSIVE DISPLICINE REQUIRED.

PROBATIONARY AGREEMENT / MANAGEMENT PLAN

APPLICANT / CORPORATE NAME

THE PRIDE STORES INC

D/B/A NAME

THE PRIDE OF AURORA

LOCATION ADDRESS

1395 BUTTERFIELD RD AURORA IL 60502

PLANNED DAYS / HOURS OF OPERATION

<input checked="" type="checkbox"/>	SUNDAY	FROM	9	A.M. / P.M.	TO	12	A.M. / P.M.
<input checked="" type="checkbox"/>	MONDAY	FROM	6	A.M. / P.M.	TO	11	A.M. / P.M.
<input checked="" type="checkbox"/>	TUESDAY	FROM	6	A.M. / P.M.	TO	11	A.M. / P.M.
<input checked="" type="checkbox"/>	WEDNESDAY	FROM	6	A.M. / P.M.	TO	11	A.M. / P.M.
<input checked="" type="checkbox"/>	THURSDAY	FROM	6	A.M. / P.M.	TO	11	A.M. / P.M.
<input checked="" type="checkbox"/>	FRIDAY	FROM	6	A.M. / P.M.	TO	1	A.M. / P.M.
<input checked="" type="checkbox"/>	SATURDAY	FROM	6	A.M. / P.M.	TO	1	A.M. / P.M.

ENTERTAINMENT

ENTERTAINMENT WILL BE HELD ON THE PREMISES. YES NO

IF YES, WHAT TYPE(S) OF ENTERTAINMENT WILL BE HELD (LIVE MUSIC, D.J., DANCING, COMEDY CLUB, ETC.):

PLEASE SPECIFY DAYS AND TIMES THAT ENTERTAINMENT IS PLANNED.

<input type="checkbox"/>	SUNDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	MONDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	TUESDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	WEDNESDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	THURSDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	FRIDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.
<input type="checkbox"/>	SATURDAY	FROM		A.M. / P.M.	TO		A.M. / P.M.

SECURITY

WILL PRIVATE SECURITY BE HIRED FOR YOUR BUSINESS? YES NO

IF YES, WILL PRIVATE SECURITY BE HIRED ONLY WHEN ENTERTAINMENT IS HELD? YES NO

NAME OF PRIVATE SECURITY COMPANY TO BE HIRED

ADDRESS OF PRIVATE SECURITY COMPANY

CONTACT PERSON FOR PRIVATE SECURITY COMPANY

CONTACT PERSON PHONE NUMBER FOR PRIVATE SECURITY COMPANY



AFFIDAVIT

BY SIGNING THIS PROBATIONARY AGREEMENT, THE UNDERSIGNED AFFIRMS THAT HE/SHE UNDERSTANDS IF THE BUSINESS IS FOUND TO BE IN VIOLATION OF ANY SECTION OF THE LIQUOR ORDINANCE WITHIN THE FIRST YEAR OF OPERATION, A LIQUOR HEARING MAY BE HELD AND THE LIQUOR LICENSE ISSUED MAY BE REVOKED WITHOUT PROGRESSIVE DISCIPLINE BEING INSTITUTED.

x Pete Mancini
PRESIDENT / OWNER

9/24/2015
DATE

x Wu By
SECRETARY / OWNER

9/24/2015
DATE

RECEIPT

I HAVE RECEIVED A COPY OF THE PROBATIONARY AGREEMENT / MANAGEMENT PLAN THAT HAS BEEN SIGNED BY THE PRESIDENT AND SECRETARY / OWNER(S) OF THE BUSINESS. ONE COPY OF AGREEMENT WILL BE PLACED IN THE LICENSEE'S FILE IN THE CITY CLERK'S OFFICE.

Pete Mancini
PRESIDENT / OWNER

9/24/2015
DATE

Wu By
SECRETARY / OWNER

9/24/2015
DATE

CITY CLERK'S OFFICE

DATE

BIS

CITY OF AURORA, ILLINOIS BUSINESS INFORMATION SHEET



Type of PRE-Application Liquor License Hotel / Motel License

Business Entity Information

Type of Business Sole Proprietor Partnership LLC Corporation Non-Profit

Legal Name of Business

The exact "legal name" as it appears in the official business formation documentation.

THE PRIDE STORES, INC

For Sole Proprietors, this is the full name of the business owner as it appears on the Sole Proprietor's government-issued photo ID.

"Doing Business As" Name

The exact "Doing Business As" (DBA) Name as it appears in the official business formation documentation.

THE PRIDE OF AURORA

Sole Proprietors or Partnerships conducting business in Illinois under an assumed name (a name other than your own) are required to file for an Assumed Name Certificate with the Kane County Clerk's Office at 217 S. Batavia Avenue, Geneva, IL

A State of Illinois File Number is **REQUIRED** for all (Illinois and Non-Illinois based) LPs, LLPs, LLCs, Corporations, and Non-Profit Corporations.

State of Illinois File # 50953467

Assigned by the Illinois Secretary of State at 69 W. Washington St., Suite 1240, 312.793-3380 or www.cyberdriveillinois.com/departments/business_services/

A Federal Employer Identification Number (EIN) is **REQUIRED** for all business entity types except for Sole Proprietorships.

Employer Identification # 36-2877800

An Account ID is **REQUIRED** for ALL business entity types that conduct business in the State of Illinois or with Illinois customers.

(formerly IBT #) IDOR Account # 0331-8214

Business Activity and Location

Business Activity

List your business activities, including all products and /or services to be offered.

GAS, SNACKS, GROCERY, HBA, NON-FOOD, SOFT BEVERAGES, BEER, WINE, AUTO PRODUCTS, FROZEN FOOD, LOTTERY, FRESH FOOD, URBAN COUNTER

Business Site Address

Provide the full business location address where the business transactions and /or activities occur. If applicable, provide the extended address (e.g. 100-102 N. Main Street)

1395 BUTTERFIELD RD.
Street Number(s) N/S/E/W Street Name Ave./St. Ste./Apt. #
AURORA IL 60502
City State ZIP Code

Square footage used by the business: 3,500 SQ. FT. Number of employees at this site: 8

Primary Contact Person

PETER

First Name

Middle Name

MANCINI

Last Name

Jr./Sr.

Contact Phone

630-584-2509 Fax # 630-584-0804

Contact E-mail Address

PMANCINI@PARENTYPEYROLLM.CC

Kane County Health Department

Food Establishment Permit - 0014

2015

This permit is to be conspicuously displayed at the place of business.
The responsibility for maintaining the certificate rests with the operator.

**THE PRIDE OF AURORA
THE PRIDE STORES INC
1395 BUTTERFIELD RD
AURORA IL 60502**

The Kane County Health Department inspects the Establishment at the address above and finds it to be in substantial compliance with the provision of Chapter 11.5, Article III, Food Sanitation, Sections 11.5.26 - 11.5.50 of the Kane County Code. This permit is valid from January 1 through December 31 for the year noted above. This permit must be posted.



Barbara J. Jeffers, MPH
Executive Director
Kane County Health Department



**Kane County
Health Department**

This Permit Is Not Transferable

Establishment # 04-1456
Category III

Illinois Business Authorization

THE PRIDE STORES, INC
DBA: THE PRIDE OF AURORA
1395 BUTTERFIELD RD
AURORA IL 60502-8715

Expiration Date:
10/31/2020

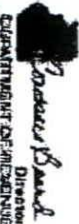
Sales and use taxes and fees

Certificate of Registration

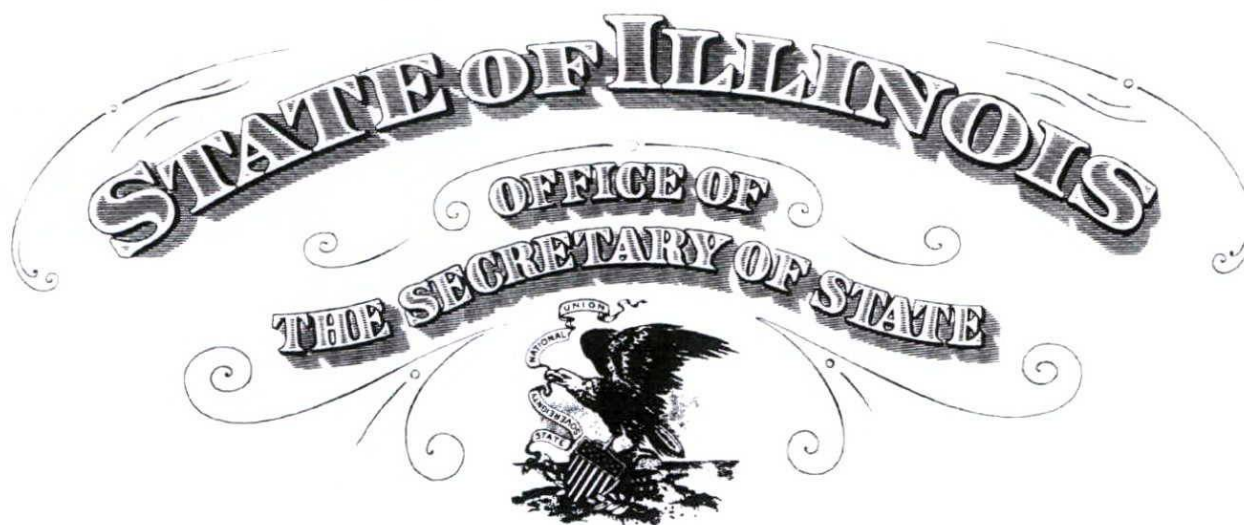
(0331-8214)

Loc. Code: 045-0002-4-001
Aurora (Kane)
Kane County

Issued Date: 10/31/2015



Director
DEPARTMENT OF REVENUE



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

THE PRIDE STORES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 30, 1976, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 1428002438

Authenticate at: <http://www.cyberdriveillinois.com>

In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 7TH
day of OCTOBER A.D. 2014 .

Jesse White

SECRETARY OF STATE

1376734

FILED FOR RECORD
KANE COUNTY, ILL.

1976 SEP - 2 AM 10:15



To all to whom these Presents Shall Come, Greeting,

Whereas, Articles of Incorporation duly signed and verified of
VALLEY PETROLEUM, INC.

have been filed in the Office of the Secretary of State, on the 30th
day of July A. D. 1976, as provided by "THE BUSINESS
CORPORATION ACT" of Illinois, in force July 13, A. D. 1933.

Now Therefore, I, MICHAEL J. HOWLETT, Secretary of State of the State of Illinois,
by virtue of the powers vested in me by law, do hereby issue this certificate of
incorporation, and attach thereto a copy of the Articles of Incorporation
of the aforesaid corporation.

In Testimony Whereof, Thereto set my hand, and cause to
be affixed the Great Seal of the State of Illinois

Done at the City of Springfield, this 30th
day of July AD. 1976, and
of the Independence of the United States
the two hundred, and 1st



Michael J. Howlett

SECRETARY OF STATE

TRABLO

FORM B C A-47

BEFORE ATTEMPTING TO EXECUTE THESE BLANKS BE SURE TO READ CAREFULLY THE INSTRUCTIONS ON THE BACK THEREOF.

(THESE ARTICLES MUST BE FILED IN DUPLICATE)

STATE OF ILLINOIS, }
KANE COUNTY } ss.

TO MICHAEL J. HOWLETT, Secretary of State

(Do not write in this space)	
Date Paid	7-30-76
Initial License Fee \$	10.00
Franchise Tax \$	25.00
Filing Fee \$	75.00
Clerk \$	110.00

The undersigned,

Name	Number	Street	Address City	State
KENNETH W. WHITEHOUSE	37W370	State Rt. 38,	St. Charles,	Illinois

being one or more natural persons of the age of twenty-one years or more or a corporation, and having subscribed to shares of the corporation to be organized pursuant hereto, for the purpose of forming a corporation under "The Business Corporation Act" of the State of Illinois, do hereby adopt the following Articles of Incorporation:

ARTICLE ONE

The name of the corporation hereby incorporated is: VALLEY PETROLEUM, INC.

ARTICLE TWO

The address of its initial registered office in the State of Illinois is: 37 W370 State Rt. 38,
Street, in the City of St. Charles 70174 (Zip Code) County of Kane and
the name of its initial Registered Agent at said address is: Kenneth W. Whitehouse

ARTICLE THREE

The duration of the corporation is: Perpetual

ARTICLE FOUR

The purpose or purposes for which the corporation is organized are:

To own, conduct, operate, maintain, carry on and engage in the business of buying and selling at whole sale or retail petroleum and allied products; which business shall include dealing in gasoline and all other petroleum products; all kinds of oil and products used for motor fuel or lubrication; all kinds of fuel oils.

Further, to own, buy, sell, rent, lease, mortgage and convey both real and personal property; to purchase, lease, sell and/or otherwise invest in other related businesses or companies as permitted by law and to do and perform and engage in any and all lawful activities, operations and things as are usual and necessary for the execution and conduct of the foregoing purposes and objectives.

ARTICLE FIVE

PARAGRAPH 1: The aggregate number of shares which the corporation is authorized to issue is 1,000, divided into one classes. The designation of each class, the number of shares of each class, and the par value, if any, of the shares of each class, or a statement that the shares of any class are without par value, are as follows:

Class	Series (If any)	Number of Shares	Par value per share or statement that shares are without par value
Common	None	1,000	No Par Value

PARAGRAPH 2: The preferences, qualifications, limitations, restrictions and the special or relative rights in respect of the shares of each class are:

Not Applicable

ARTICLE SIX

The class and number of shares which the corporation proposes to issue without further report to the Secretary of State, and the consideration (expressed in dollars) to be received by the corporation therefor, are:

Class of shares	Number of shares	Total consideration to be received therefor:
Common	1,000	\$ 20,000 \$

ARTICLE SEVEN

The corporation will not commence business until at least one thousand dollars has been received as consideration for the issuance of shares.

ARTICLE EIGHT

The number of directors to be elected at the first meeting of the shareholders is: Three (3)

ARTICLE NINE

PARAGRAPH 1: It is estimated that the value of all property to be owned by the corporation for the following year wherever located will be \$_____

PARAGRAPH 2: It is estimated that the value of the property to be located within the State of Illinois during the following year will be \$_____

PARAGRAPH 3: It is estimated that the gross amount of business which will be transacted by the corporation during the following year will be \$_____

PARAGRAPH 4: It is estimated that the gross amount of business which will be transacted at or from places of business in the State of Illinois during the following year will be \$_____

NOTE: If all the property of the corporation is to be located in this State and all of its business is to be transacted at or from places of business in this State, or if the incorporators elect to pay the initial franchise tax on the basis of its entire stated capital and paid-in surplus, then the information called for in Article Nine need not be stated.

Kenneth W. Whitehouse

Incorporators

NOTE: There may be one or more incorporators. Each incorporator shall be either a corporation, domestic or foreign, or a natural person of the age of twenty-one years or more. If a corporation acts as incorporator, the name of the corporation and state of incorporation shall be shown and the execution must be by its President or Vice-President and verified by him, and the corporate seal shall be affixed and attested by its Secretary or an Assistant Secretary.

OATH AND ACKNOWLEDGMENT

STATE OF ILLINOIS }
Du Page County } ss.

I, the Undersigned, A Notary Public, do hereby certify that on the 28th day of July 1976
Kenneth W. Whitehouse

personally appeared before me and being first duly sworn by me acknowledged the signing of the foregoing document in the respective capacities therein set forth and declared that the statements therein contained are true.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year above written.



Norma Jean Erickson
Notary Public

FORM B C A-47

ARTICLES OF INCORPORATION

The following fees are required to be paid at the time of issuing Certificate of Incorporation: Filing fee \$75.00; Initial license fee of 50¢ per \$1,000.00 or 1/20th of 1% of the amount of stated capital and paid-in surplus the corporation proposes to issue without further report (Article Six); Initial franchise tax of 1/10th of 1% of the issued, as above noted. However, the minimum initial franchise tax is \$25.00 and varies monthly on \$25,000, or less, as follows: January, \$37.50; February, \$35.42; March, \$33.33; April, \$31.25; May, \$29.17; June, \$27.08; July, \$25.00; August, \$22.92; September, \$20.83; October, \$18.75; November, \$16.67; December, \$14.58; (See Sec.133 BCA).

In excess of \$25,000, the franchise tax per \$1,000.00 is as follows: Jan., \$1.50; Feb., 1.4167; March, 1.3334; April, 1.25; May, 1.1667; June, 1.0834; July, 1.00; Aug., .9167; Sept., .8334; Oct., .75; Nov., .6667; Dec., .5834.

All shares issued in excess of the amount mentioned in article Six of this application must be reported within 60 days from date of issuance thereof, and franchise tax and license fee paid thereon; otherwise, the corporation is subject to a penalty of 1% for each month on the amount until reported and subject to a fine of not to exceed \$500.00.

The same fees are required for a subsequent issue of shares except the filing fee is \$1.00 instead of \$75.00.

FILED

JUL 30 1976

Michael J. Howlett

Secretary of State



— Return to WEIS —
The **PRIDE Stores, Inc.**

30W180 Butterfield Road
Warrenville, IL 60555
(630) 791-8280

September 4, 2015

Internal Revenue Service
STOP 343G
Cincinnati Ohio 45999

Re: 36-2877800
Valley Petroleum Inc.

Please be advised that I am the acting Secretary (corporate officer) of The PRIDE Stores, Inc. an Illinois Corporation.

The PRIDE Stores, Inc. is a corporation which was originally chartered in Illinois under the name, Valley Petroleum Inc. The FEIN assigned by the IRS at the time Valley Petroleum Inc. was chartered, was the number referenced above: **36-2877800**.

Valley Petroleum Inc. changed its name (to Parent Petroleum Retail Inc.) via an amendment to its Articles of Incorporation on February 27, 2008 and the name change was effected by the State of Illinois Secretary of State's office. The name was further changed from Parent Petroleum Retail Inc. to The Pride Stores, Inc and that change occurred on February 24, 2014.

In all events, the tax returns filed with Illinois and any tax returns filed with the Internal Revenue Service on behalf of The PRIDE Stores, Inc. has employed the same FEIN number. The corporation continues to engage in the same type of business in which it was engaged since the date of the original issuance of the Charter. The corporation is wholly owned by Parent Petroleum Inc. and Parent Petroleum Inc consolidates its subsidiary's income when returns are filed with the IRS.

In order to provide the State of Illinois with proof that the IRS has acknowledged the name change, we ask that you take such steps as necessary to effect a change of name in the IRS records and ultimately, issue a letter to us which recognizes the use of the FEIN (36-2877800) by The PRIDE Stores Inc.

Not Your Typical Convenience Store



The **PRIDE** Stores, Inc.

30W180 Butterfield Road
Warrenville, IL 60555
(630) 791-8280

I have enclosed several documents herein which substantiate the change of name with the Illinois Secretary of State. Please review the enclosed and if you have any questions regarding the same, please call me at 630-204-0115.

Thank you.

Yours very truly,

William E. Boylan
Corporate Secretary

Not Your Typical Convenience Store

FORM **BCA 10.30** (rev. Dec. 2003)
ARTICLES OF AMENDMENT
Business Corporation Act

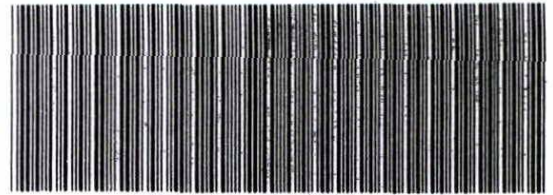
Secretary of State
Department of Business Services
Springfield, IL 62756
217-782-1832
www.cyberdriveillinois.com

FILED

FEB 27 2008

JESSE WHITE
SECRETARY OF STATE

Remit payment in the form of a check or money order payable to Secretary of State.



FRED BUCHOLZ
DUPAGE COUNTY RECORDER
APR. 09, 2008 11:15 AM
OTHER
003 PAGES R2008 - 057627

File # 5095 3467 Filing Fee: \$50 Approved: [Signature]

----- Submit in duplicate ----- Type or Print clearly in black ink ----- Do not write above this line -----

1. Corporate Name (See Note 1 on page 4.): Valley Petroleum, Inc.

2. Manner of Adoption of Amendment:

The following amendment to the Articles of Incorporation was adopted on December 31, 2007 in the manner indicated below: Month & Day Year

Mark an "X" in one box only.

- By a majority of the incorporators, provided no directors were named in the Articles of Incorporation and no directors have been elected. (See Note 2 on page 4.)
- By a majority of the board of directors, in accordance with Section 10.10, the Corporation having issued no shares as of the time of adoption of this amendment. (See Note 2 on page 4.)
- By a majority of the board of directors, in accordance with Section 10.15, shares having been issued but shareholder action not being required for the adoption of the amendment. (See Note 3 on page 4.)
- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. At a meeting of shareholders, not less than the minimum number of votes required by statute and by the Articles of Incorporation were voted in favor of the amendment. (See Note 4 on page 4.)
- By the shareholders, in accordance with Sections 10.20 and 7.10, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by shareholders having not less than the minimum number of votes required by statute and by the Articles of Incorporation. Shareholders who have not consented in writing have been given notice in accordance with Section 7.10. (See Notes 4 and 5 on page 4.)
- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by all the shareholders entitled to vote on this amendment. (See Note 5 on page 4.)

3. Text of Amendment:

a. When amendment effects a name change, insert the New Corporate Name below. Use page 2 for all other amendments.

Article I: Name of the Corporation: Parent Petroleum Retail, Inc. New Name

(All changes other than name include on page 2.)

William Boylan
4101 S. Carlton
Ste 204
Channahon IL 60187

Text of Amendment

- b. If amendment affects the corporate purpose, the amended purpose is required to be set forth in its entirety.
For more space, attach additional sheets of this size.

NONE- NAME CHANGE ONLY

4. The manner, if not set forth in Article 3b, in which any exchange, reclassification or cancellation of issued shares, or a reduction of the number of authorized shares of any class below the number of issued shares of that class, provided for or effected by this amendment, is as follows (if not applicable, insert "No change"):

NO CHANGE

5. a. The manner, if not set forth in Article 3b, in which said amendment effects a change in the amount of paid-in capital is as follows (if not applicable, insert "No change"):
(Paid-in capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts.)

NO CHANGE

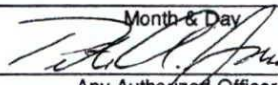
b. The amount of paid-in capital as changed by this amendment is as follows (if not applicable, insert "No change"):
(Paid-in Capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts.)
(See Note 6 on page 4.)

	Before Amendment	After Amendment
Paid-in Capital:	\$ <u>20,000.00</u>	\$ <u>20,000.00</u>

Complete either Item 6 or Item 7 below. All signatures must be in BLACK INK.

6. The undersigned Corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated December 31, 2007 Valley Petroleum, Inc.
Month & Day Year Exact Name of Corporation


 Any Authorized Officer's Signature

Peter A. Spina
 Name and Title (type or print)

7. If amendment is authorized pursuant to Section 10.10 by the incorporators, the incorporators must sign below, and type or print name and title.

OR

If amendment is authorized by the directors pursuant to Section 10.10 and there are no officers, a majority of the directors, or such directors as may be designated by the board, must sign below, and type or print name and title.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated _____, _____
Month & Day Year

_____	_____
_____	_____
_____	_____
_____	_____

Secretary of State
Department of Business Services
Springfield, IL 62756
217-782-1832
www.cyberdriveillinois.com

FILED
FEB 24 2014
JESSE WHITE
SECRETARY OF STATE

Remit payment in the form of a check or money order payable to Secretary of State.

File #

20953467

Filing Fee: \$50

Approved: 

----- Submit in duplicate ----- Type or Print clearly in black ink ----- Do not write above this line -----

1. Corporate Name (See Note 1 on page 4.): Parent Petroleum Retail, Inc.

2. Manner of Adoption of Amendment:


The following amendment to the Articles of Incorporation was adopted on February 15, 2014
in the manner indicated below: Month & Day Year

Mark an "X" in one box only.

- By a majority of the incorporators, provided no directors were named in the Articles of Incorporation and no directors have been elected. (See Note 2 on page 4.)
- By a majority of the board of directors, in accordance with Section 10.10, the Corporation having issued no shares as of the time of adoption of this amendment. (See Note 2 on page 4.)
- By a majority of the board of directors, in accordance with Section 10.15, shares having been issued but shareholder action not being required for the adoption of the amendment. (See Note 3 on page 4.)
- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. At a meeting of shareholders, not less than the minimum number of votes required by statute and by the Articles of Incorporation were voted in favor of the amendment. (See Note 4 on page 4.)
- By the shareholders, in accordance with Sections 10.20 and 7.10, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by shareholders having not less than the minimum number of votes required by statute and by the Articles of Incorporation. Shareholders who have not consented in writing have been given notice in accordance with Section 7.10. (See Notes 4 and 5 on page 4.)
- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by all the shareholders entitled to vote on this amendment. (See Note 5 on page 4.)

3. Text of Amendment:

a. When amendment effects a name change, insert the New Corporate Name below. Use page 2 for all other amendments.

Article I: Name of the Corporation: The PRIDE Stores, Inc.  New Name

(All changes other than name include on page 2.)

Text of Amendment

- b. If amendment affects the corporate purpose, the amended purpose is required to be set forth in its entirety.
For more space, attach additional sheets of this size.

Not Applicable

4. The manner, if not set forth in Article 3b, in which any exchange, reclassification or cancellation of issued shares, or a reduction of the number of authorized shares of any class below the number of issued shares of that class, provided for or effected by this amendment, is as follows (If not applicable, insert "No change"):

No Change

5. a. The manner, if not set forth in Article 3b, in which said amendment effects a change in the amount of paid-in capital is as follows (if not applicable, insert "No change"):
(Paid-in capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts.)

No Change

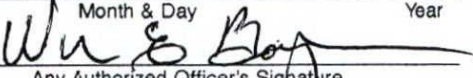
b. The amount of paid-in capital as changed by this amendment is as follows (if not applicable, insert "No change"):
(Paid-in Capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts.)
(See Note 6 on page 4.)

	Before Amendment	After Amendment
Paid-in Capital:	\$ <u>No Change</u>	\$ <u>No Change</u>

Complete either Item 6 or Item 7 below. All signatures must be in BLACK INK.

6. The undersigned Corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated February 15, 2014 Parent Petroleum Retail, Inc.
Month & Day Year Exact Name of Corporation


Any Authorized Officer's Signature
William E. Boylan, Secretary of Corporation
Name and Title (type or print)

7. If amendment is authorized pursuant to Section 10.10 by the incorporators, the incorporators must sign below, and type or print name and title.

OR

If amendment is authorized by the directors pursuant to Section 10.10 and there are no officers, a majority of the directors, or such directors as may be designated by the board, must sign below, and type or print name and title.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated _____, _____
Month & Day Year

NOTES AND INSTRUCTIONS

1. State the true exact corporate name as it appears on the records of the Office of the Secretary of State **BEFORE** any amendments herein reported.
2. Incorporators are permitted to adopt amendments **ONLY** before any shares have been issued and before any directors have been named or elected. (**§ 10.10**)
3. Directors may adopt amendments without shareholder approval in only seven instances, as follows:
 - a. To remove the names and addresses of directors named in the Articles of Incorporation.
 - b. To remove the name and address of the initial registered agent and registered office, provided a statement pursuant to §5.10 is also filed.
 - c. To increase, decrease, create or eliminate the par value of the shares of any class, so long as no class or series of shares is adversely affected.
 - d. To split the issued whole shares and unissued authorized shares by multiplying them by a whole number, so long as no class or series is adversely affected thereby.
 - e. To change the corporate name by substituting the word "corporation," "incorporated," "company," "limited" or the abbreviation "corp.," "inc.," "co.," or "ltd." for a similar word or abbreviation in the name, or by adding a geographical attribution to the name.
 - f. To reduce the authorized shares of any class pursuant to a cancellation statement filed in accordance with §9.05.
 - g. To restate the Articles of Incorporation as currently amended. (**§10.15**)
4. All amendments not adopted under §10.10 or §10.15 require (1) that the board of directors adopt a resolution setting forth the proposed amendment and (2) that the shareholders approve the amendment.

Shareholder approval may be (1) by vote at a shareholders' meeting (either annual or special) or (2) by consent, in writing, without a meeting.

To be adopted, the amendment must receive the affirmative vote or consent of the holders of at least two-thirds of the outstanding shares entitled to vote on the amendment (but if class voting applies, then also at least a two-thirds vote within each class is required).

The Articles of Incorporation may supersede the two-thirds vote requirement by specifying any smaller or larger vote requirement not less than a majority of the outstanding shares entitled to vote and not less than a majority within each class when class voting applies. (**§10.20**)

5. When shareholder approval is by consent, all shareholders must be given notice of the proposed amendment at least five days before the consent is signed. If the amendment is adopted, shareholders who have not signed the consent must be promptly notified of the passage of the amendment. (**§§7.10 & 10.20**)
6. In the event of an increase in paid-in capital, the corporation must pay all applicable franchise taxes, penalties and interest before this document can be accepted for filing.

Angel Associates, LP
LEASE

This Lease Agreement made and entered into between Angel Associates, LP (hereinafter referred to as "LESSOR") and The PRIDE Stores, Inc. D/B/A The PRIDE of Aurora (hereinafter referred to as "TENANT").

WITNESSETH

LESSOR hereby leases to TENANT, and TENANT hereby takes from LESSOR, the premises described below:

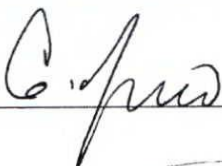
1395 Butterfield Road
Aurora, IL 60505

1. TENANT agrees to pay the following:
 - TENANT will pay a rental of \$0.04 for every Gallon Sold per month and \$1.50 for every Carwash Sold per month.
Rent will be paid by the fifth day of each month;
 - TENANT will pay all Real Estate Taxes;
 - TENANT will pay all Common Area Maintenance;
 - TENANT will pay all Utilities;


2. The term of this Lease shall commence on March 1, 2014, and expire on February 28, 2034.

3. USE OF PREMISES: The demised premises shall be used and occupied only for the purpose of a gasoline station.

Executed March 1, 2014

By:  _____
TENANT

Witness

By:  _____
LESSOR

Witness

Please endorse and forward your payment to:

Angel Associates, LP
381 E. St. Charles Rd.
Carol Stream, IL 60188

PARENT PETROLEUM RETAIL INC

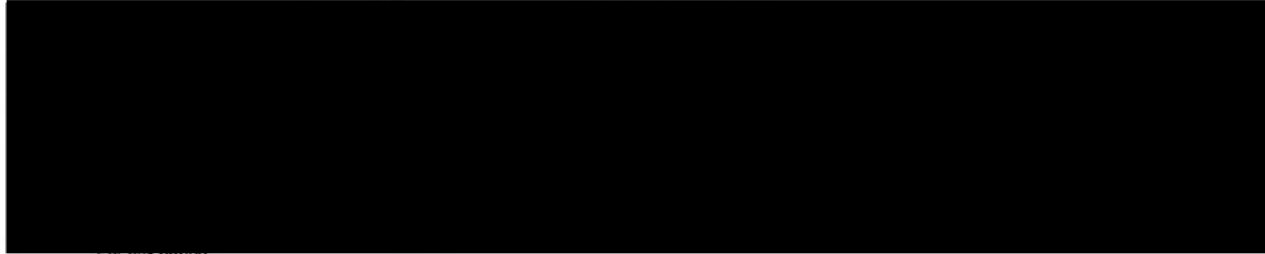
391 E St Charles Road
Carol Stream, IL 60108

Work Summary Payroll

As of Wednesday, September 30, 2015

Group: 713 McGlynn, Joe Aurora
09/16/2015 - 09/29/2015

Name (S) denotes a Salaried Employee	Employee Number	Base Pay Rate	Regular	OT1	OT2	Meal Penalty	Break Penalty	Total Hours	Total Earnings
--------------------------------------	-----------------	---------------	---------	-----	-----	--------------	---------------	-------------	----------------



**Non-standard base pay rate used due to shift differential and/ or override rates

Certificate of Completion



KESHA WILLIAMS

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/5/2015

from the American Safety Council.

A handwritten signature in cursive script, appearing to read "Jeff Pairan".

Jeff Pairan

Certificate of Completion



JOSEPH MCGLYNN

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 9/30/2015
from the American Safety Council.

A handwritten signature in black ink, appearing to read "Jeff Palran".

Jeff Palran

Certificate of Completion



JOHN SEIFRID

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/3/2015
from the American Safety Council.

A handwritten signature in black ink, appearing to read "Jeff Pairan". The signature is written in a cursive style with a large, prominent initial "J".

Jeff Pairan

Certificate of Completion

**American
Safety Council**

HARRIL WINSTON

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/3/2015
from the American Safety Council.



Jeff Pairan

Certificate of Completion

**American
Safety Council**

EDITH WINSTON

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/4/2015

from the American Safety Council.


Jeff Pairan

Certificate of Completion

**American
Safety Council**

ANTHONY STOUT

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/4/2015

from the American Safety Council.



Jeff Palran

Certificate of Completion



DOMINIC WILLIAMS

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/5/2015
from the American Safety Council.

Jeff Pairan

A handwritten signature in dark ink, appearing to read "Jeff Pairan", is written over a horizontal line. Below the signature, the name "Jeff Pairan" is printed in a simple, sans-serif font.

Certificate of Completion



CONCEPCION RODRIGUEZ

Has diligently and with merit completed the
Off-Premise BASSET Alcohol Certification on 10/5/2015

from the American Safety Council.

Jeff Palran