Applicant Infor	mation						
Applicant/Corporate	e Name:	JNIZ & RESTAURANT LLC					
d/b/a Name:	QUERIA MUNIZ & RESTAURANT						
Business Address:							
	Street	City/St	tate	Zip			
Business Telephon	e#:	Fax #:					
Owner or Manager	Contact:CRISTINA PADIL	LLA		<del></del>			
Telephone #:630-425	9-1241	Email Addres	crisgenio46@gmail.com				
Additional Business							
Telephone #:630-518-54	102	Email Addres	SS:MEJIACPATAX@GMAIL.COM				
<b>Business Location</b>	on Information						
Business Name (dba		RANT					
11	518 S LAKE ST ALIBORA II 6	60506					
Business Address:	Street	City/State	Zip	County			
Telephone #:630-896-8727							
Are the premises ov	wned or leased? Pro	oof of ownership or le	ease must be provid	led.			
☐ I hereby certify that	t the property is owned	d by the applicant.					
✓ hereby certify that	t the property is lease	d from the landlord.					
☐ I hereby certify that the property is managed via an operating or management agreement.							
Landlord name:	TAPATIO PROPERTIES LLC						
Address:	KE ST. AURORA, IL 60506						
Street		City	State	Zip			
Telephone #:630-42	29-1241	Email Address:	crisgenio46@gmail.com				
Total Building Square	Entertainment Area	Control Contro	Total Number of Seats (Booths & Tables)	Number of Parking Spaces			
Footage	(Square Footage)	(104		•			
Footage 4,777	(Square Footage)	2,484	125	30			



## **Business Entity Information**

Type of Business    Sole Pro	oprietor Part	nership 🗹	LLC Corporation Non-I	Profit		
Legal Name of Busines						
The exact "legal name" as it appears in the offic	ial					
business formation documentation	n. For sole Prophetors, tr	ils is the full hame of the	business owner as it appears on the Sole proprietor's gu	Wernment-issued priord its.		
"Doing Business As" Nam						
The exact "Doing Business As" (DBA) Nam						
as it appears in the official busines formation documentatio	your own) are required to file for an Assumed Name Certificate with the Kane County Clerk's Office at 217 S					
<ul> <li>A State of Illinois File Number is REQUI Corporations.</li> </ul>	RED for all (Illinois	and Non-Illinois	based) LPs, LLPs, LLCs, Corporation	s, and Non-Profit		
State of Illinois File	#	1	Assigned by the Illinois Secretary of State at 69 W. Washington St., Suite 1240, 312.793-3380 or www.cyberdriveillinois.com/departments/business_services/			
O A Federal Employer Identification Numb	er (EIN) is REQUIF	RED for all busin	ess entity types except for Sole Propri	ietorships.		
Employer Identification	#					
O An Account ID is REQUIRED for ALL b		s that conduct b	usiness in the State of Illinois or with II	linois Customers.		
(formerly IBT #) IDOR Account						
Business Activit	MEXICAL	MEXICAN RESTAURANT				
List your business activities, including all product and/or services to be offered						
Business Activit	ty					
List your business activities, including all produc and/or services to be offere						
Square footage used by the business:	1,777	SQ. FT.	Number of employees at this site:	5		
Primary Contact Person						
First Name CRISTINA	Middle Name		Last Name PADILLA	Jr./Sr.		
Contact Phone #	Fax#		E-Mail Address			
630-429-1241			crisgenio48@gmail.com			