

**AGENDA  
BOARD OF LICENSE COMMISSIONERS  
MARCH 19, 2025**

The public is invited to view this meeting live online at - <https://worcestercountymd.swagit.com/live>  
This portion of the meeting is an Open Meeting, it will be recorded and available online.

- 1:00 - Administrative Matters and Approval of Minutes
  
- 1:10 - Meeting/Toast  
Class "B" B/W/L 7 Day License  
Request for off-sale of beer and wine in factory sealed containers  
221 Wicomico Street/Ocean City
  
- 1:25 - Application for Transfer of a Class "B" B/W/L 7 Day License  
From T&T Russo Realty Corporation to OC Flamingo, LLC  
Flamingo Coast/3 Atlantic Avenue, Ocean City
  
- 1:35 - Application for 99% Stock Transfer of a Class "B" B/W/L 7 Day License  
From Robert Ciprietti to Linda Ruggiero  
Touch of Italy/6600 N. Coastal Highway, Ocean City
  
- 1:45 - Application for Transfer of a Class "B" B/W/L 7 Day License  
Request to designate as Multiple License #1  
From Ocean Pines International Yacht Club, Inc to Farindola OP, LLC  
Ocean Pines Yacht Club/1 Mumfords Landing Road, Ocean Pines
  
- 1:50 - Application for Transfer of a Class "B" B/W/L 7 Day License  
Request to designate as Multiple License #2  
From Ocean Pines Golf & Country Club, Inc. to Farindola OP, LLC  
Ocean Pines Golf & Country Club/100 Clubhouse Drive, Ocean Pines
  
- 1:55 - Application for Transfer of a Class "C" B/W/L 7 Day License  
Request to designate as Multiple License #3  
From Ocean Pines Beach Club, Inc to Farindola OP, LLC  
Ocean Pines Beach Club/4905 Atlantic Avenue, Ocean City
  
- 2:00 - Meeting/Oaked at The Globe  
Class "B" B/W/L 7 Day License  
Request for Girls Night Out Event – March 30, 2025 and March 31, 2025  
12 Broad Street/Berlin

**This portion of the meeting is an Open Meeting but will not be recorded and available online.**

- 2:00 - Hearing/Burn Wood Fired Pizza  
Class "B" B/W/L 7 Day License  
Violation of Alcoholic Beverages Article, Section 6-304 (Sale to a Minor)  
10019 Old Ocean City Boulevard/Berlin

**Worcester County Board of License Commissioners**  
**Open Meetings Act Minutes**  
**FEBRUARY 19, 2025**

**Time:** 1:00 p.m.

**Location:** Worcester County Governmental Center, Board Room, Room 1102

**Attendance:**

**License Commissioners**

R. Charles Nichols

Reese Cropper

**Staff:**

Thomas K. Coates, Esquire

W. Hank Fisher, Esquire

April R. Payne, Liquor License Administrator

Harold (Skip) Cook, Inspector

Kelly L. Henry, Technical Services Manager

Donna J. Hughes, Liquor License Specialist

**I. Call to Order**

**II. Administrative Matters**

Review and Approval of Minutes, December 18, 2024 the Board of License Commissioners reviewed the minutes and a motion was made by Commissioner Nichols , seconded by Commissioner Cropper and carried unanimously to approve the minutes as submitted.

**III. Closed Session - Administrative Matters**

- April Payne presented to the Board a report of compliance checks for numerous establishments that “Did Not Sell”.

**IV. Open Session**

**V. Adjournment**

WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
MINUTES FOR MIDTOWN ROADHOUSE - NEW  
FEBRUARY 19, 2026

<b>Members Present:</b>		William E. Esham, Jr., Chairman		<input type="checkbox"/>	R. Charles Nichols	X	Marty W. Pusey	<input type="checkbox"/>
		<b>Alternate Board Member:</b> Reese Cropper, III		X				
<b>Staff Present:</b>		April Payne, Administrator		X	Harold (Skip) Cook, Inspector		X	
		Thomas K. Coates, Esq., Board Attorney		X	<b>Alternate Board Attorney:</b> Name:		<input type="checkbox"/>	
		Donna Hughes, Liquor License Specialist		X	Kelly Henry, Technical Services Manager		X	
					Valarie Dawson, Court Reporter		X	
<b>License #:</b>	NEW	<b>Hearing Date:</b>	February 19, 2025		<b>Time Hearing Started:</b>	1:10 p.m.		
<b>Class:</b>	"B"	<b>Type:</b>	B/W/L		<b>Day:</b>	7 Day		
<b>For:</b> SAMAJ Hospitality Group South, Inc.			<b>T/A:</b> Midtown Roadhouse		<b>Address:</b> 7805 Coastal Highway, Unit 2 Ocean City, Maryland 21842			
<b>New Application:</b>	X Yes	<b>Transfer:</b>	<input type="checkbox"/> Yes		<b>Meeting:</b>	<input type="checkbox"/> Yes	<b>Violation:</b>	<input type="checkbox"/> Yes
<b>Items to be discussed:</b> Application for Class "B" B/W/L 7 Day License								
<b>Applicants:</b>	X	<b>Licensees:</b>	<input type="checkbox"/>		<b>Representative:</b>			
1. Torrie Marcel James					Kristina L. Watkowski, Esquire			
2. Jessica Nicole Maxwell								
3. Ryan Wayne James								
<b>Witnesses:</b>					<b>Protestants:</b>			
1.					1.			
<b>Exhibits:</b>					<b>Exhibits:</b>			
1. Applicant's Exhibit 1 – Business Summary					1.			
2. Applicant's Exhibit #2 - Menu					2.			
3. Applicant's Exhibit #3 – Floor Plan					3.			
<p><b>Hearing Minutes:</b> The applicants and their attorney Kristina L. Watkowski, Esquire, appeared before the Board with a Class "B" B/W/L 7 Day License application. The applicants were sworn in. Ms. Watkowski introduced herself and stated she is representing the applicants Torrie M. James, Jessica N. Maxwell, and Ryan W. James today. Mr. Coates stated to Watkowski that the commercial lease agreement does not reflect the name of the new corporation, Watkowski stated the corporation had not been registered when the application was submitted. Watkowski asked R. James what his experience is with the food and beverage business. R. James stated he has been involved in the restaurant business for eighteen years and once held the license for "Mother's Cantina" with no violations, he also is currently involved in business with his and wife and sister whom both are license holders in Ocean City. Watkowski submitted (Applicant's Exhibit #1), business summary and (Applicant's Exhibit #2) menu. R. James presented to the Board the business summary concept that the establishment will be incorporated. Watkowski submitted (Applicant's Exhibit #3) floor plan. Watkowski noting the floor plan there will be an upstairs and downstairs dining area in this establishment. R. James replied, "Correct." Watkowski stated there will be only one entrance and exit for patrons, and that controlled area will have a hostess and manager at all times that will be TIPS/TAM certified. R. James replied, "Correct." Watkowski asked R. James, will all your employees that will be serving alcoholic beverages be TIPS/TAM certified. R. James replied "Yes." Watkowski asked this establishment will be closed January and February with the hours of Noon – Midnight. R. James stated "Correct." Watkowski clarified with April Payne, the license would be issued to allow to serve until 2 a.m. Payne stated "Correct." Watkowski asked R. James, the establishment's staff will be fully trained in checking IDs and there be scanning systems, along with other visual tools to aid in preventing sales to minors. Commissioner Nichols asked R. James how many employees. R. James stated 10 during the slow season and 30 during the summer season. Commissioner Cropper asked you will have a manager working during all business hours to oversee the staff. R. James replied "Yes." Commissioner Nichols asked the applicants how much time they will be spending onsite. R. James stated that during the busy season he would be there 40 hours, T. James stated that between himself and Maxwell they would be onsite for forty hours. Watkowski asked T. James what his experience is with the food and beverage business is. T. James stated he has been a</p>								

WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
MINUTES FOR MIDTOWN ROADHOUSE - NEW  
FEBRUARY 19, 2026

police officer for twenty-five years, and has an alcoholic beverage license in Dover, Delaware since 2023 along with Maxwell. Commissioner Nichols stated for clarification the applicants understand the restrictions outlined. Watkowski stated "Yes." Commissioner Cropper asked, with the rooms being so same is amplified music necessary. Maxwell stated in her experience a singer requires some type of amplification to project their voice so the audience can hear without exhausting themselves. Watkowski asked Maxwell to tell the Board what her experience is with the food and beverage business. Maxwell stated she was involved in education for sixteen years and then she became a license holder in 2023 along with T. James, I will mainly be spending numerous hours with R. James focusing on the daily operations of the establishment. Commissioner Cropper noted the country theme business concept there will be no mechanic bull riding. Watkowski replied "Absolutely Not." Mr. Coates asked Watkowski along with the applicants to sign the commercial lease on record to reflect the name of the corporation.

The Board tentatively approved the application for a Class "B" B/W/L 7 Day License pending all required documentation.

<b>Motion:</b>	1st	Mr. Cropper	2nd	Mr. Nichols	<b>Approved:</b>	<input checked="checked" type="checkbox"/>	Yes	<input type="checkbox"/>	No
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**Restrictions:** LIVE ENTERTAINMENT ALLOWED INSIDE AMPLIFIED WITH A MAXIMUM OF FOUR PIECES FOUR NIGHTS PER WEEK FROM 6 P.M. UNTIL 11 P.M., LIVE ENTERTAINMENT ALLOWED OUTSIDE NON AMPLIFIED WITH A MAXIMUM OF ONE PIECE (GUITARIST) FOUR NIGHTS PER WEEK FROM NOON UNTIL 9 P.M. ON EITHER THE FIRST OR SECOND FLOOR DECK, OUTSIDE BAR ALLOWED ON THE FIRST FLOOR DECK, TWO CEILING MOUNTED SPEAKERS ALLOWED ON THE FIRST AND SECOND FLOOR DECKS WITH BACKGROUND MUSIC ONLY, NO GAMES ALLOWED, NO DISC JOCKEY ALLOWED, NO OFF SALE, NO POOL TABLES ALLOWED

**Time Hearing Ended:** 1:38 p.m.

WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
MINUTES FOR PLAZA TAPATIA – LICENSE #546  
FEBRUARY 19, 2025

<b>Members Present:</b>		William E. Esham, Jr., Chairman		<input type="checkbox"/>	R. Charles Nichols	<input type="checkbox"/>	Marty W. Pusey	<input type="checkbox"/>
		<b>Alternate Board Member:</b> Reese Cropper, III		X				
<b>Staff Present:</b>		April Payne, Administrator		X	Harold (Skip) Cook, Inspector		X	
		Thomas K. Coates, Esq., Board Attorney		X	<b>Alternate Board Attorney:</b> Name: W. Hank Fisher, Esq.,		X	
		Donna Hughes, Liquor License Specialist		X	Kelly Henry, Technical Services Manager		X	
					Valarie Dawson, Court Reporter		X	
<b>License #:</b>	546	<b>Hearing Date:</b>	February 19, 2025		<b>Time Hearing Started:</b>	1:39 p.m.		
<b>Class:</b>	"B"	<b>Type:</b>	B/W/L		<b>Day:</b>	7 Day		
<b>For:</b> Plaza Tapatia, Inc		<b>T/A:</b> Plaza Tapatia		<b>Address:</b> 11007 Manklin Creek Road Berlin, Maryland 21811				
<b>New Application:</b>	<input type="checkbox"/> Yes	<b>Transfer:</b>	<input type="checkbox"/> Yes		<b>Meeting:</b>	<input type="checkbox"/> Yes	<b>Violation:</b>	X Yes
<b>Items to be discussed:</b> Class "B" B/W/L 7 Day License Violation of Alcoholic Beverages Article, Section 6-304 (Sale to a Minor)								
<b>Applicants:</b>		<input type="checkbox"/>	<b>Licensees:</b>	X	<b>Representative:</b>			
1. Armando Saldana (Not Present)		Brian P. Cosby, Esquire						
<b>Witnesses:</b>				<b>Protestants:</b>				
1. Jacqueline Saldana (Manager)				1. Cpl. Paul Bissman				
2. Karla Flores Cruz (Server)				2. DFC Mark Shayne				
3.				3. Deputy Jasmine Mentzer				
4.				4. Cadet Braden Sisson				
<b>Exhibits:</b>				<b>Exhibits:</b>				
1. Licensee's Exhibit #1 – Receipt for Employees Alcohol Awareness Training				Board's Exhibit #1 – Board's Investigation Report Dated January 28, 2025, Compliance Check History, Alcohol Awareness Certified Employee List, and Worcester County Sheriff's Office (WCSO) Incident Case Report #25-0000080				

**Hearing Minutes:** Brian P. Cosby, Esquire along with, Jacqueline Saldana, and Karla F. Cruz appeared before the Board with a Class "B" B/W/L 7 Day License for a Violation of Alcoholic Beverages Article, Section 6-304 (Sale to a Minor). The witnesses were sworn in. Mr. Fisher submitted (Board's Exhibit #1) Board's Investigation Report Dated: January 28, 2025, Compliance Check History, Alcohol Awareness Certified Employee List, and Worcester County Sheriff's Office Case Report #25-0000080, into evidence regarding a violation that occurred on January 20, 2025. Mr. Fisher asked Cosby did they receive this information and were there any corrections or changes. Cosby stated there are no corrections or changes we are here today for mitigation. Mr. Coates asked Cosby why the licensee Armando Saldana was not present today for the hearing. Cosby stated that Mr. Saldana is in the hospital at this time with serious medical issues. Mr. Coates stated the Board was not made aware that the licensee was unable to attend today, so the Board will need to decide if the hearing can be heard today. The Board stated that the hearing could proceed today without Armando Saldana. Cosby asked J. Saldana what her experience is in the alcohol beverage and food service business. Saldana stated to the Board she has stepped into running this business because of numerous management issues, and because of the illness of her father. Saldana stated when she stepped in, she had lost her management staff and that she had limited experience with the food and alcoholic beverage business and was not TIPS/TAM certified. Cosby submitted (Licensee's Exhibit #1) receipt for employee's alcohol awareness training. Cosby stated that all staff that will be serving alcoholic beverages are now TIPS/TAM certified. Saldana replied "Correct." Cosby asked Saldana, did you provide your servers in-house training and is it the practice of your servers to ask for ID before serving alcoholic beverages. Saldana stated that some of the servers had been at the establishment for numerous years, I regret that I didn't take the time to meet with the employees to conduct a refresher course or inquire what staff was not TIPS/TAM certified. Although the staff was not currently TIPS/TAMS certified, I knew the staff was checking ID's. Cosby asked Cruz to explain to the Board what occurred the day of the

WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
MINUTES FOR PLAZA TAPATIA – LICENSE #546  
FEBRUARY 19, 2025

incident. Cruz stated that the bartender that is usually behind the bar had left for the afternoon leaving her to work the bar area along with her tables. Cruz stated that she does not usually work behind the bar, and she was nervous, and there were other customers sitting at the bar that were verbally distracting her. Cruz stated she made the mistake of not asking for ID before she served the customer. Saldana stated that she takes full responsibility for this violation, this incident was a breakdown in management and moving forward we will be taking every step to ensure this does not happen again to protect this family business. Commissioner Cropper asked if the bartender that left was certified. Saldana replied, “No.” Commissioner Nichols noted no employees were on the property that day were TIPS/TAMs certified. Saldana stated “Correct.” Commissioner Cropper stated to Saldana even before you stepped into this position in September there were no employees that were TIPS/TAMS certified for this property. Saldana replied “Correct.” Commissioner Nichols reviewed the Alcohol Awareness Certified Representative list with Saldana. Commissioner Nichols noted all the employees on the establishment’s list were no longer employed with this establishment. DFC Shayne gave testimony that the staff was polite and cooperative.

Commissioner Nichols announced the Board will go into closed session, and everyone involved in this case and the public must leave the meeting.

The Board reconvened the hearing; the following motion was made; the Board found that a violation did occur and implemented a 30-Day suspension to begin at 5 p.m. February 19, 2025, property may reopen for business at 9 a.m. on March 21, 2025, and imposed a fine in the amount of \$4,000. Fine to be paid by 12 Noon on Friday, February 21, 2025.

<b>Motion:</b>	1st	Mr. Cropper	2nd	Mr. Nichols	<b>Approved:</b>	<input checked="checked" type="checkbox"/>	Yes	<input type="checkbox"/>	No
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<b>Restrictions:</b> SAME RESTRICTIONS
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<b>Time Hearing Ended:</b> 2:05 p.m.
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WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
MINUTES FOR CANTINA LOS AGAVES MEXICAN GRILL – LICENSE #862  
FEBRUARY 19, 2025

<b>Members Present:</b>		William E. Esham, Jr., Chairman		<input type="checkbox"/>	R. Charles Nichols	X	Marty W. Pusey	<input type="checkbox"/>
		Alternate Board Member: Reese Cropper, III		X				
<b>Staff Present:</b>		April Payne, Administrator		X	Harold (Skip) Cook, Inspector		X	
		Thomas K. Coates, Esq., Board Attorney		X	Alternate Board Attorney: Name: W. Hank Fisher, Esq.,		X	
		Donna Hughes, Liquor License Specialist		X	Kelly Henry, Technical Services Manager		X	
					Valarie Dawson, Court Reporter		X	
<b>License #:</b>	862	<b>Hearing Date:</b>	February 19, 2025		<b>Time Hearing Started:</b>	2:07 p.m.		
<b>Class:</b>	"B"	<b>Type:</b>	B/W/L		<b>Day:</b>	7 Day		
<b>For:</b> Cantina Los Agaves, LLC		<b>T/A:</b> Cantina Los Agaves Mexican Grill		<b>Address:</b> 12720 Ocean Gateway, Unit #7 Ocean City, Maryland 21842				
<b>New Application:</b>	<input type="checkbox"/> Yes	<b>Transfer:</b>	<input type="checkbox"/> Yes		<b>Meeting:</b>	<input type="checkbox"/> Yes	<b>Violation:</b>	X Yes
<b>Items to be discussed:</b> Class "B" B/W/L 7 Day License Violation of Alcoholic Beverages Article, Section 6-304 (Sale to a Minor)								
<b>Applicants:</b>	<input type="checkbox"/>	<b>Licensees:</b>	X		<b>Representative:</b>			
1. Mary A. Foust				Joseph E. Moore, Esquire				
<b>Witnesses:</b>				<b>Protestants:</b>				
1. Juan Garcia Juarez (Server)				1. CPL. Paul Bissman				
2.				2. DFC. Mark Shayne				
3.				3. Deputy Jasmine Mentzer				
4.				4. Cadet Braden Sisson				
<b>Exhibits:</b>				<b>Exhibits:</b>				
1. Licensee's Exhibit #1 – Verification of Compliance Check from WCHD				1. Board's Exhibit #1 – Board's Investigation Report Dated January 28, 2025, Compliance Check History, Alcohol Awareness Certified Employee List, and Worcester County Sheriff's Office (WCSO) Incident Case Report #25-0000081				
2. Licensee's Exhibit #2 – Copy of Juan Juarez TIPS Card				2.				
<p><b>Hearing Minutes:</b> Joseph E. Moore, Esquire along with, Mary A. Foust, the licensee and Juan Juarez appeared before the Board with a Class "B" B/W/L 7 Day License for a Violation of Alcoholic Beverages Article, Section 6-304 (Sale to a Minor). The licensee and witness were sworn in. Mr. Fisher submitted (Board's Exhibit #1) Board's Investigation Report Dated: January 28, 2025, Compliance Check History, Alcohol Awareness Certified Employee List, and Worcester County Sheriff's Office Incident Case Report #25-0000081, into evidence regarding a violation that occurred on January 20, 2025. Mr. Fisher asked Moore did they receive this information and were there any corrections or changes. Moore stated there are no corrections or changes we are here today for mitigation. Moore asked Foust what her experience with the sale of food and alcoholic beverage business is. Foust stated she has been the licensee at this location since 2023 and she also is a license holder in Johnstown, PA since 2019, and has not had any violations at either location. Moore submitted (Licensee's Exhibit #1) verification of compliance check. Moore stated Juarez was TIPS/TAMS certified the day the incident occurred but did not have your TIPS card with him but has since then presented. Moore submitted (Licensee's Exhibit #2) copy of Juan Juarez TIPS card. Moore asked Juarez is it correct you did not check the patron's ID, and stated this is not the establishment's practice, to ensure you did not have this occur again you took it upon yourself to retake the TIPS course as a refresher to safeguard this error happening again. Juarez stated that is "Correct," Moore stated to the Board he did not suggest this to the licensee or Juarez they did this as good faith to the Board that they take alcohol beverage compliance laws seriously. Moore asked Foust what other steps you have put into place to ensure another incident does not happen again. Foust stated she has also purchased a handheld system so that servers will have to check all IDs. DFC Mark Shayne stated the license holder, and server were very polite, cooperative, and this is not a hot spot.</p> <p>The Board found that the violation did occur on January 20, 2025, and Imposed a letter of Reprimand.</p>								
<b>Motion:</b>	1st	Mr. Cropper	2nd	Mr. Nichols	<b>Approved:</b>	X	Yes	<input type="checkbox"/> No
<b>Restrictions:</b> SAME RESTRICTIONS								
<b>Time Hearing Ended:</b> 2:19 p.m								

**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

***REPORT OF INVESTIGATION***

*Type: Restriction Change*

02-19-2025

*License No: 938*

*Class: B*

*Type: Beer-Wine-Liquor*

APPLICANT(S):

**1. Michael Berardinelli  
3. Brian Shofi**

**2. Robert Masone, M.D.  
4.**

*TRADE NAME: Toast*

*CORP: Bay Bar, LLC*

*LOCATION: 221 Wicomico Street, Ocean City*

RESTRICTIONS: Live entertainment amplified inside with a maximum of one piece four days per week from 5 P.M. until 8 P.M., live entertainment non amplified outside with a maximum of one piece four days per week from 5 P.M. until 8 P.M., no disc jockey allowed, no karaoke allowed, no music technician, **no off sale**, four video games allowed, background music inside first floor only from 12 P.M. until 10 P.M., background music outside from 12 P.M. until 8 P.M., no second floor speakers allowed

This property has operated at this location since June 2022 with no violations. The license holders request that the current **“no off sale”** restriction (See Above) be changed to **“off sale of beer and wine in factory sealed containers permitted”**.

Customers will have to contact an employee to obtain beer and/or wine to go, whether the beer/wine is displayed in a cooler for customers to see, or kept out of sight of the public either behind the bar or in a non public area of the property.

Ian W. Cameron  
Liquor License Inspector

April R. Payne  
Liquor License Administrator





February 18, 2025

To Whom it May Concern,

We would like to request a hearing for modification of our current liquor license #938. We have only 1 modification at this time and it is as follows:

1. The addition of off-premise sales of beer and wine in factory sealed containers.

Thank you for your continued time and consideration.

Respectfully and with much thanks,

A handwritten signature in dark ink, appearing to read "Michael Berardinelli". The signature is written over a horizontal line.

Michael Berardinelli  
TOAST Restaurant  
baybar, llc  
221 Wicomico street unit 202  
Ocean City, MD 21842

## REPORT OF INVESTIGATION

April Payne  
Liquor License Administrator

(410) 289-5740  
Business Phone No.

WORCESTER COUNTY

Received 2-19-25  
ARD

STATE OF MARYLAND

ALCOHOLIC BEVERAGES LAW

APPLICATION FOR A CLASS "B" B/W/L 7-day LICENSE

Change of ownership and modification to licensed premises.

For the use of:

(Check one) An Individual ☐ Partnership ☐ Corporation ☐ Unincorporated Association ☐ Limited Liability Co. ☒

To the Board of License Commissioners Worcester County.

Date FEBRUARY 19, 2025

Application is made by the undersigned under the provisions of Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages," for the above license, and the applicant(s) submit(s) and certify(ies) to the following information required by the Article.

Fill in all the blanks:

Applications will NOT be accepted without all Applicant information, including middle name.

1. Applicant(s)

- (1) Full Name James Ryan Bergey, III Residence 10580 Worcester Highway, Berlin, MD 21811  
Date of Birth [REDACTED] Period of Residence 15 years in Wor. County 41 years  
Place of Birth Salisbury, Maryland Naturalized at n/a Year n/a  
Telephone Number (443) 783-1036 Race Caucasian Sex M
- (2) Full Name n/a Residence \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Period of Residence \_\_\_\_\_ in Wor. County \_\_\_\_\_  
Place of Birth \_\_\_\_\_ Naturalized at \_\_\_\_\_ Year \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_
- (3) Full Name n/a Residence \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Period of Residence \_\_\_\_\_ in Wor. County \_\_\_\_\_  
Place of Birth \_\_\_\_\_ Naturalized at \_\_\_\_\_ Year \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

2. The applicant(s) is/are citizen(s) of the United States, and (if the application is for an individual or a partnership), has/have been for two years next preceding the filing of this application (a) resident(s) of Worcester County. The applicant(s) (if applying as a qualifying individual for a corporation) is a registered voter and taxpayer in Worcester County and shall also have resided there for at least two years prior to the filing of this application. The applicant(s) thus qualified is/are: 1( ☒ ) 2( ☐ ) 3( ☐ ) (Check number to correspond with name(s) listed above.)

3. State the Retail Sales Tax No.: [REDACTED]

4. If a corporation, state corporate name and trade name, if any: OC Flamingo, LLC  
If other than a corporation, state trade name to be used: Flamingo Coast (with The Vault and Laguna Rooftop Lounge)

5. Address of place to be licensed (Give street number or accurate description): 3 Atlantic Avenue, Ocean City, MD 21842

A. Nearest intersecting street: North Division Street Approximate distance: 0 feet

B. Tax District where located: 10 Is this an application for a new license? No

C. Is this a transfer from a present licensee? Yes From Whom? Gentruce G. Russo, deceased

T & T Russo Realty Corporation to OC Flamingo, LLC License # 113

(This Board must be furnished releases by the State Comptroller's Office approving the bulk sales transfer and clearing all tax accounts before any license will be transferred.)

D. Are you represented by an attorney? Whom: Mark Spencer Cropper Tel. No.: (410) 723-1400

Address: 6200 Coastal Highway, Suite 200, Ocean City, MD 21842

- E. Describe premises to be licensed: Restaurant and bar on the boardwalk
- F. If this is a new or proposed building or a building not previously licensed, a copy of the bona fide plans must be filed with this application or presented at the time of the hearing.
6. State name and address of owner of record of premises: T&T Russo Realty Corporation  
3 Atlantic Avenue, Ocean City, MD 21842
7. Have you ever been:
- A. Convicted of a misdemeanor? 1 No 2 n/a 3 n/a
- B. Adjudged guilty of violating alcoholic beverage laws by a court, administrative agency or Board of License Commissioners? 1 No 2 n/a 3 n/a
- C. Adjudged guilty of violating gambling laws? 1 No 2 n/a 3 n/a
- D. Adjudged guilty of any offense against the laws of the United States? 1 No 2 n/a 3 n/a  
If so, when and where: n/a
- E. Convicted of a felony or offered a plea of nolo contendere to a felony indictment and charge was subsequently accepted by a court? 1 No 2 n/a 3 n/a
8. A. Have you ever held a license for the sale of alcoholic beverages? 1 YES 2 n/a 3 n/a  
If yes, state when and where: #653 Waterman's until 2023
- B. If so, has such license been suspended or revoked? 1 NO 2 n/a 3 n/a  
If answer is yes, give full details: n/a
- C. If so, were you ever found in violation of any alcoholic beverage law? 1 NO 2 n/a 3 n/a
9. Have you ever applied for an alcoholic beverage license in the State of Maryland? 1 YES 2 n/a 3 n/a  
If answer is yes, state when and where: Waterman's #653
10. What financial interests do you have in the business to be conducted under this license? 1 None 2 n/a 3 n/a
11. Are you financially interested in any other alcoholic beverage business for which a license has been applied for, granted or issued? 1 No 2 n/a 3 n/a  
If so, give details: n/a
12. Is your wife or husband, as the case may be, a licensee and does her or she have any financial interest in any other alcoholic beverage business in the State of Maryland? 1 No 2 n/a 3 n/a  
If so, give details: n/a
13. Is there now, or will there be, during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder? 1 No 2 n/a 3 n/a  
If so, state name, address, telephone no., age, percent of interest and state whether or not an interest is held in any other alcoholic beverage license: n/a
14. A. Does any manufacturer, brewer, distiller or wholesaler have any financial interest in the premises or business to be conducted under this license? No
- B. Will any such interest be hereafter conveyed or granted to any such manufacturer, brewer, distiller or wholesaler? No
15. Do you now have, or will you hereafter have, any indebtedness or other financial indebtedness, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverage? No
16. A. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes
- B. If granted a license, will you agree to keep current all state and local tax obligations including, but not limited to, state sales and use tax, withholding tax and admissions tax? Yes

I/We consent to the Board of License Commissioners being furnished with a copy of my/our arrest record, if any, by any state, local, or federal law enforcement or judicial agency. App. #1 Yes App. #2 n/a App. #3 n/a

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

James Ryan Bergey, III, 10580 Worcester Highway, Berlin, MD 21811  
Name Residence Zip Code  
15 years (443) 783-1036 (410) 641-2012  
Period of Residence Home Telephone No. Office Telephone No.  
[REDACTED] M Salisbury, Maryland [REDACTED]  
Date of Birth Sex Place of Birth Social Security No.  
n/a n/a  
Naturalized Yes ( ) No ☒ Where Naturalized Petition No.  
Bergey & Company, PA  
Place of Employment  
8939 Worcester Highway, Berlin, MD 20 years  
Address of Employer Length of Employment

1a. What is your ownership interest in the L.L.C.? 0  
Percent of Ownership  
1b. What is your capital contribution to the L.L.C.? 0

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the laws of the United States?

Yes ( ) No ☒ If yes, please detail. n/a

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No ☒ If yes, please detail. n/a

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

Yes. Watermans Seafood, 12505 Ocean Gateway, Ocean City, MD

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No ☒ If yes, please detail.

6. As a member, how much time will you spend on the licensed premises?

Very little

7. What profit will you derive in proportion to the percentage of ownership?

None


8. As a member, have you read the Rules and Regulation of the Board?

Yes

9. If you are a qualified Resident Agent, are you a resident of Worcester County, Maryland?

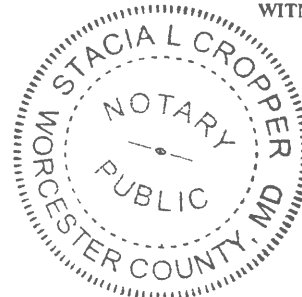
Yes ☒ No ( )

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

  
Signature of Member

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared JAMES RYAN BERGEY, III In said County and State on this 17TH day of FEBRUARY, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 25TH day of FEBRUARY, 2025



  
Notary Public

My Commission Expires: 06-01-2025

## TRANSFER OF LOCATION OR ASSIGNMENT OF LICENSE

My Commission expires:

IN THE MATTER OF THE ESTATE  
OF ANTONIO B. RUSSO  
OF WORCESTER COUNTY,  
MARYLAND, DECEASED

\* IN THE ORPHANS' COURT  
\* FOR WORCESTER COUNTY  
\* STATE OF MARYLAND  
\* ESTATE NO. 19771  
\* Date of Death: JUNE 8, 2023

\*\*\*\*\*

**RESIGNATION OF TRUSTEES AND APPOINTMENT OF  
SUCCESSOR TRUSTEES OF THE RESIDUARY TUW OF ANTONIO B. RUSSO  
TESTAMENTARY TRUST FBO ANTHONY FREDERICK RUSSO**

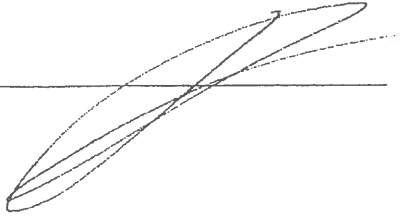
In accordance with the Last Will and Testament of Antonio B. Russo:

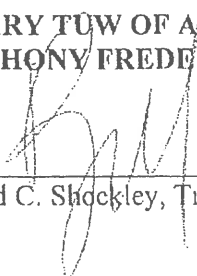
1. Raymond C. Shockley and Giovanni (Pino) Tomasello, as Trustees of the Residuary TUW of Antonio B. Russo FBO Anthony Frederick Russo ("Trust"), a Maryland Trust, hereby resign as Trustees and appoint William E. Esham, III and James Ryan Bergey, III as Successor Trustees.
2. William E. Esham, III and James Ryan Bergey, III accept their appointment as Successor Trustees of the Trust.
3. Anthony Frederick Russo, Beneficiary of the Trust, consents to the resignations and appointments stated above.
4. Regan J. R. Smith waives and relinquishes his appointment as a potential successor trustee of the Trust.
5. All of the parties hereto waive the thirty (30) days written notice provision in said Will.
6. The resignations and appointments shall be effective upon execution by all parties.

**IN WITNESS WHEREOF**, Raymond C. Shockley and Giovanni (Pino) Tomasello, Trustees of the Trust, and William E. Esham, III and James Ryan Bergey, III, Successor Trustees of the Trust, and Anthony Frederick Russo, Beneficiary of the Trust, do hereby set their hands and seals.

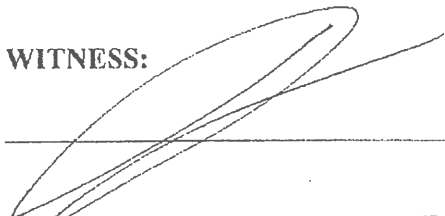
WITNESS:


RESIDUARY TUW OF ANTONIO B. RUSSO  
FBO ANTHONY FREDERICK RUSSO



  
\_\_\_\_\_  
Raymond C. Shockley, Trustee (SEAL)

WITNESS:

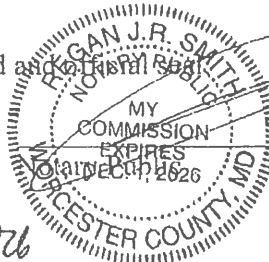


  
\_\_\_\_\_  
Giovanni (Pino) Tomasello, Trustee (SEAL)

STATE OF MARYLAND, WORCESTER COUNTY, TO WIT:

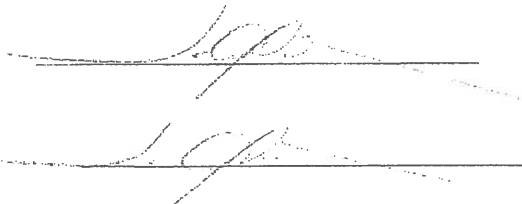
I HEREBY CERTIFY, that on this 3rd day of Oct, 2024, before me, the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared Raymond C. Shockley and Giovanni (Pino) Tomasello, who acknowledged themselves to be the Trustees of the Residuary TUW of Antonio B. Russo FBO Anthony Frederick Russo, a Maryland Trust, who are the duly appointed Trustees of said Trust, and who executed this document for the purposes therein contained.


IN WITNESS WHEREOF, my hand and official seal

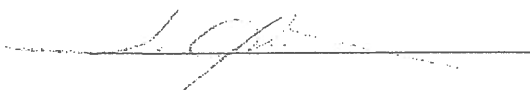


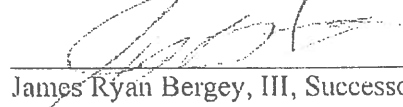
My Commission Expires: Dec 1, 2026

WITNESS:



  
\_\_\_\_\_  
William E. Esham, III, Successor Trustee (SEAL)



  
\_\_\_\_\_  
James Ryan Bergey, III, Successor Trustee (SEAL)

STATE OF MARYLAND, WORCESTER COUNTY, TO WIT:

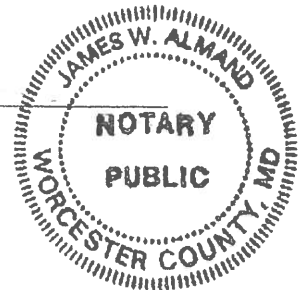


I HEREBY CERTIFY, that on this 3<sup>rd</sup> day of October, 2024, before me, the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared William E. Esham, III and James Ryan Bergey, III, who acknowledged themselves to be the Successor Trustees of the Residuary TUV of Antonio B. Russo FBO Anthony Frederick Russo, a Maryland Trust and who executed this document for the purposes therein contained.

IN WITNESS WHEREOF, my hand and official seal.

My Commission Expires: 6-7-2027

Notary Public



WITNESS:

[Signature] (SEAL)  
Anthony Frederick Russo, Beneficiary

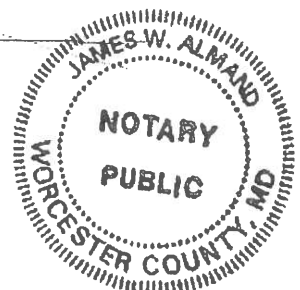
STATE OF MARYLAND, WORCESTER COUNTY, TO WIT:

I HEREBY CERTIFY, that on this 3<sup>rd</sup> day of Oct, 2024, before me, the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared Anthony Frederick Russo, who acknowledged himself to be the Beneficiary of the Residuary TUV of Antonio B. Russo FBO Anthony Frederick Russo, a Maryland Trust and who executed this document for the purposes therein contained.

IN WITNESS WHEREOF, my hand and official seal.

My Commission Expires: 6-7-2027

Notary Public





Law Offices  
**AYRES, JENKINS, GORDY & ALMAND, P.A.**  
6200 COASTAL HIGHWAY, SUITE 200  
OCEAN CITY, MARYLAND 21842  
www.ajgalaw.com

GUY R. AYRES, III (1945-2019)  
JAMES W. ALMAND  
WILLIAM E. ESHAM, III  
MARK SPENCER CROPPER  
BRUCE F. BRIGHT  
HEATHER E. STANSBURY  
MAUREEN F. L. HOWARTH  
RYAN D. BODLEY  
BRADFORD F. KIRBY  
VICTORIA O'NEILL  
SPENCER AYRES CROPPER

EMAIL ADDRESS:  
mcropper@ajgalaw.com

(410) 723-1400  
FAX (410) 723-1861

February 19, 2025

OF COUNSEL  
HAROLD B. GORDY, JR.  
M. DEAN JENKINS  
ALVIN I. FREDERICK

Ms. April Payne, Administrator  
Worcester County Board of License Commissioners  
One West Market Street- Room 1201  
Snow Hill, MD 21863

Re: OC Flamingo, LLC  
Liquor License Transfer Application  
Modification of Licensed Premises  
Modification of Entertainment

Dear April:

On behalf of my client, OC Flamingo, LLC, a Maryland limited liability company, (the "Company") enclosed is an application for the transfer of Class "B" B/W/L 7-day liquor license #113 from Gertrude G. Russo (deceased) to the Company for that property formerly known as Tony's Pizza located at 3 Atlantic Avenue, Ocean City, Maryland (the "Licensed Premises"). The property will hereinafter be known as Flamingo Coast. The sign for Flamingo Coast will also reference two areas contained inside the Licensed Premises – a speakeasy area on the first floor to be known as "The Vault" and the second-floor deck to be known as "The Laguna Rooftop Lounge".

Flamingo Coast will be managed by Matt Ortt Companies, LLC, a Maryland limited liability company (the "Manager"), via a Management Agreement that has been provided to the attorney for the Board of License Commissioners, Tom Coates. The Manager will not be a member of the Company.

The Company is requesting modification of the Licensed Premises and entertainment provisions. The modifications of the Licensed Premises are detailed in this letter on Page 3. The Company is asking to change their allowed entertainment as follows:

*Existing:* Two pieces from 5:00 pm until 12:00 midnight with no amplification allowed.

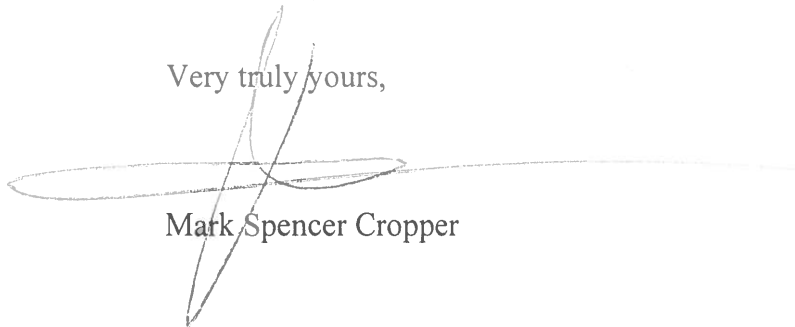
*Proposed:* Four pieces from 4:00 pm until 10:00 pm with amplification through the house system that is used to play background music. This system is controlled by the Manager, not the entertainer.

In support of these requests, enclosed are the following:

1. Completed application with supporting signatures on the last page;
2. Limited Liability Affidavit for the applicant;
3. Articles of Organization and Certificate of Good Standing for the Company;
4. Resignation of Trustees and Appointment of Successor Trustees of the Residuary TUW of Antonio B. Russo Testamentary Trust FBO Anthony Frederick Russo (the "Trust");
5. Operating Agreement, documenting the Trust as holding 100% membership of the Company and James Ryan Bergey, III as Trustee;
6. Fingerprint receipt for the applicant;
7. Lease Agreement between the Company and T&T Russo Realty Corporation;
8. Floor plans of the Licensed Premises –
  - a. As-built plans from 1995. Although there may have been modifications since 1995, neither April Payne nor the applicant have more recent floor plans for your review. In an effort to provide as much detail as possible, we are providing what appears to be available.
  - b. As proposed. See Page 3 for details of the proposed modifications;
9. Transfer of Location or Assignment of License form;
10. One check made payable to Worcester County in the amount of \$25 for signature verification; and
11. One check made payable to Worcester County in the amount of \$660 for the transfer application and advertising fees.

Should you have any questions about this letter or any of the enclosures, do not hesitate to give me a call. As always, your cooperation is appreciated.

Very truly yours,

A handwritten signature in dark ink, appearing to read 'Mark Spencer Cropper', is written over a horizontal line. The signature is stylized with a large, sweeping loop.

Enclosures

### **Details of Proposed Modification of Licensed Premises**

#### **First Floor – Kitchen**

- The footprint of the kitchen will remain the same as it is now, but the configuration inside that footprint will be updated with new equipment.

#### **First Floor - Section “A” – marked on the floor plan as “Speakeasy” to be known as “The Vault”**

- (14) 4-top tables will be replaced with a new (15) stool bar
- The Vault will be configured with sofas, casual seating and coffee tables throughout
- A new wall will be installed along the west wall to house a new electrical room
- The double doors on the south wall will be replaced with a single door
- New walls will be erected in the southeast corner for the installation of an additional small kitchen with access on the east wall to the corridor

#### **First Floor – Section “B” – marked on the floor plan as “Deli”**

- (11 of 22) 4-top tables will be replaced with
  - (14) 2-top tables
  - (2) 8-top tables
    - Total of 88 seats at tables
- Access to the existing restrooms will be modified by relocating the current entrances on the south side of the restrooms (into the dining area) to an entrance along the restrooms’ east wall, across from the stairwell. This will require a small modification to the location of the toilets inside the men’s room.
- A new bar will be installed along the west wall next to the mechanical and electrical closet.

#### **Second Floor – to be known as “The Laguna Rooftop Lounge”**

- All (86) 4-top tables will be replaced with
  - (5) 2-top tables
  - (9) 3-top tables
  - (4) 5-top tables
  - (4) 6-top tables
    - Total of 81 seats at tables
  - Sofas, casual seating and coffee tables throughout
- A new (38) stool bar is being installed on the east side of the deck
- The existing wooden deck on the north side of the second floor at the stairs is in disrepair and is being replaced with the same footprint.

I/We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners of Worcester County, its duly authorized agents and employees, any peace officer of Worcester County, to inspect without warrant, the premises upon which said business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours, and further state that I/We have personally obtained the signatures of the ten citizens to the certificate which is a part hereof.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof shall be subject to the penalties provided by the law for that crime.)

Give name(s) and address(es) of officers:

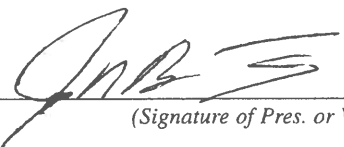
James Ryan Bergey, III, 10580 Worcester Highway, Berlin, MD 21811  
(name) (title) (residence)

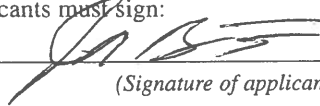
n/a  
(name) (title) (residence)

n/a  
(name) (title) (residence)

If applicant is a Corporation, President or Vice-President must sign:

All Applicants must sign:

  
(Signature of Pres. or Vice-Pres.)

1.   
(Signature of applicant)

2. \_\_\_\_\_  
(Signature of applicant)

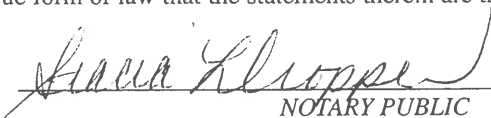
3. \_\_\_\_\_  
(Signature of applicant)

STATE OF MARYLAND COUNTY OF WORCESTER TO WIT:

THIS CERTIFIES, That on the 17<sup>TH</sup> day of FEBRUARY, 2025, before the subscriber, a Notary Public of the State of MARYLAND, personally appeared JAMES RYAN BERGEY, III

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

  
NOTARY PUBLIC

(Seal)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:

THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of \_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

NOTARY PUBLIC

(Seal)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:

THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of \_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

NOTARY PUBLIC

(Seal)

**STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF MARYLAND**

I/WE HEREBY CERTIFY, That I am/we the owner(s) of record of the property known as Tony's Pizza, 3 Atlantic Avenue  
Ocean City, Maryland

named in the foregoing application made to the Board of License Commissioners under the Alcoholic Beverage Laws of Maryland; that I/we assent to the granting of the license applied for; that I/we hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Worcester County, its duly authorized agents and employees, and any peace officer of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

WITNESS, our/my hand(s) and seal(s) this 17<sup>TH</sup> day of FEBRUARY 2025

\_\_\_\_\_  
(seal) \_\_\_\_\_ (seal)  
\_\_\_\_\_  
(seal) \_\_\_\_\_ (seal)

STATE OF MARYLAND COUNTY OF WORCESTER TO WIT:

THIS CERTIFIES, That on the 17<sup>TH</sup> day of FEBRUARY, 2025, before the subscriber, a Notary Public of the State of  
\_\_\_\_\_, personally appeared JAMES RYAN BERGER, III ON BEHALF OF

T&T Russo Realty Corporation  
and acknowledged the execution of the foregoing statement to be HIS OWN WILLFULLY act.

WITNESS my hand and notarial seal.

(Seal)

NOTARY PUBLIC

(The following certificates must be signed by at least ten persons.)

**SIGNATURES MUST BE OBTAINED BY THE RESIDENT, IF APPLICATION IS FOR CORPORATION.**

We the undersigned reputable citizens (real estate owners, registered voters with Worcester County and reside within the tax district in which the business covered by the foregoing application is to be conducted) certify that each of us has been personally acquainted with the applicant for the length of time indicated after our respective names; that we have examined the application of the applicant and that we have good reason to believe that all of the statements contained in said application are true, and that we are familiar with the premises upon which the proposed business is to be conducted and we believe such premises are suitable for the conduct of the business of retail dealer in alcoholic beverages, and that we are of the opinion that the applicant is a suitable person to obtain the license applied for:

(Print name above signature)  
Name

Address  
Voting Residence

Length of time acquainted with applicant(s). If not acquainted prior to application filing, indicate "Just Met." (All three blanks must be filled in.)

Daniel Alexander West  
Daniel Alexander West

Tax District 10 App. 1 27yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 11506 Quillian Way Berlin, MD 21811

James R. Berger Jr

Tax District 10 App. 1 41yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 6213 S Point Rd Berlin MD 21811

Kelly West

Tax District 10 App. 1 10yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 11506 Quillian Way Berlin, MD 21811

Kelly West

Tax District 10 App. 1 20yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 10205 Thoroughfare Farm Rd Ocean City MD 21842

Steven D. Hoffman

Tax District 10 App. 1 20yr-5 App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 10431 New Quay Rd Ocean City MD 21842

Steven D. Hoffman

Tax District 10 App. 1 20yrs App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 12920 Seward Fish Dr Ocean City MD 21842

Brian Hoffman

Tax District 10 App. 1 20yrs App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 12920 Seward Fish Dr Ocean City MD 21842

Mark Elliott

Tax District 10 App. 1 1yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 1409- Jacobson Ave Ocean City MD 21842

Mark Elliott

Tax District 10 App. 1 15 App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 10106 Queens Circle Ocean City MD

Cynthia Elliott

Tax District 10 App. 1 15 App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 10106 Queens Circle Ocean City MD 21842

Cynthia Elliott

Tax District 10 App. 1 41yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 6213 S. Point Rd Berlin MD 21811

Tony Russo Jr

Tax District 10 App. 1 20yr App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_  
Address of property owned 12541 Ocean Point Rd, Berlin, MD 21811

Christopher Zett

Roxanne Zett

Michelle

Betty R. Berger

Betty R. Berger

John R. Berger Jr

John R. Berger Jr

Names and addresses of signers must be printed or typewritten above signatures.





**SCALE:**  $\frac{1}{8}'' = 1'-0''$

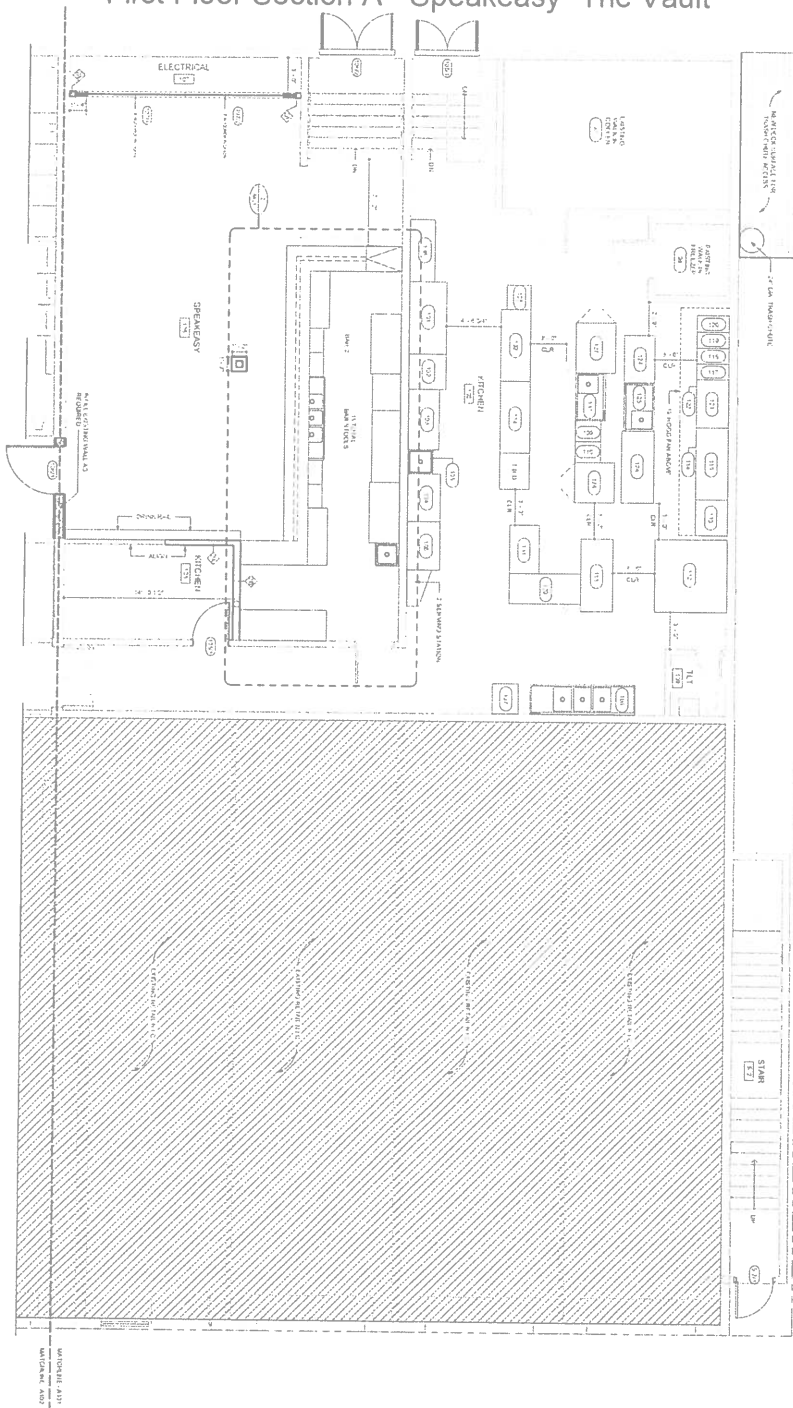
**SCALE:**  $\frac{1}{8}'' = 1'-0''$



9302A 04/21/95 04/29/95		1/5/91-0 04/21/95 04/29/95		architects planners interior designers 111 GORM DRIVE SUITE 100 THAILAND, MD 20693 TEL: (301) 481-9977		HOK		T A T RUBIO REALTY CORP. 201 HANCO STREET OXON HILL, MARYLAND 20842 TEL: (301) 251-1000		0 2 1 1 6		<b>TONY'S PIZZA</b> 2 N. EVIDEN STREET AND BOARDWALK COOKAN CITY, MARYLAND RENOVATIONS and ADDITIONS		15' x 10' x 10' x 10'	
2.0 A		57-7017022-17 04/29/95 04/29/95		TONY'S PIZZA OFFICE CITY, MARYLAND SECOND FLOOR/ROOF DECK		HOK		T A T RUBIO REALTY CORP. 201 HANCO STREET OXON HILL, MARYLAND 20842 TEL: (301) 251-1000		0 2 1 1 6		<b>TONY'S PIZZA</b> 2 N. EVIDEN STREET AND BOARDWALK COOKAN CITY, MARYLAND RENOVATIONS and ADDITIONS		15' x 10' x 10' x 10'	

# As Proposed First Floor Section A - Speakeasy "The Vault"

1  
FIRST FLOOR NEW WORK PLAN  
SCALE: 1/8" = 1'-0"



EQUIPMENT SCHEDULE			
ITEM NO.	DESCRIPTION	QUANTITY	MANUFACTURER
101	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
102	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
103	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
104	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
105	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
106	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
107	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
108	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
109	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
110	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
111	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
112	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
113	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
114	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
115	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
116	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
117	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
118	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
119	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT
120	10" DIA. VENTILATION DUCT	10	VENTILATION DUCT

CONSTRUCTION LEGEND	
10" DIA. VENTILATION DUCT	10" DIA. VENTILATION DUCT
10" DIA. VENTILATION DUCT	10" DIA. VENTILATION DUCT
10" DIA. VENTILATION DUCT	10" DIA. VENTILATION DUCT
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**BECKER MORGAN**  
ARCHITECTS  
INCORPORATED  
1000 N. 10TH AVE.  
SUITE 100  
DENVER, CO 80202  
TEL: 303.733.1000  
WWW.BECKERMORGAN.COM



TONY'S PIZZA RENOVATION

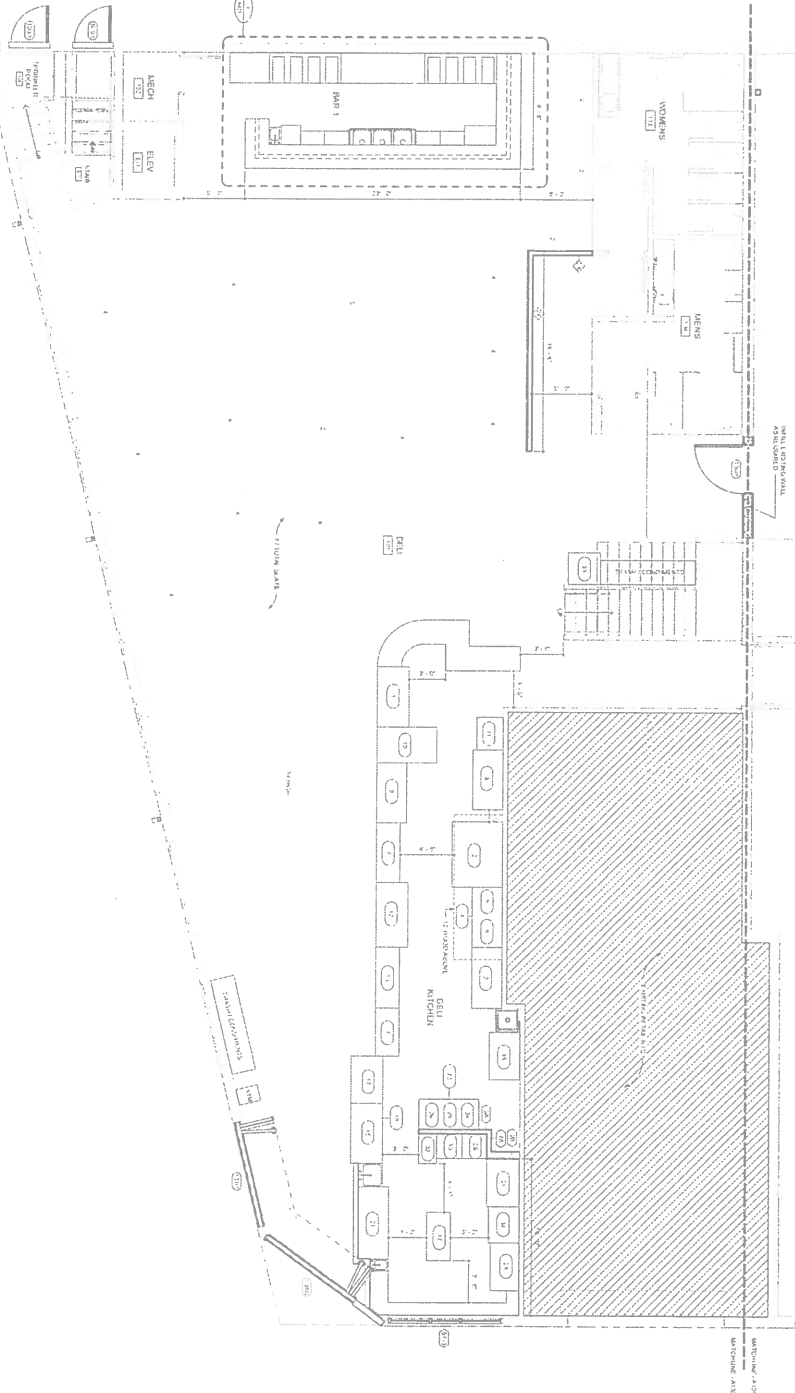
1 ATLANTIC AVE  
OCEAN CITY, MD

FIRST FLOOR NEW WORK PLAN - NORTH

DATE	01/27/20
PROJECT NO.	20041010
SCALE	1/8" = 1'-0"
DESIGNED BY	ARCHITECT
CHECKED BY	ARCHITECT
DATE	01/27/20
PROJECT NO.	20041010
SCALE	1/8" = 1'-0"
DESIGNED BY	ARCHITECT
CHECKED BY	ARCHITECT

# As Proposed First Floor Section B - Deli

1  
FIRST FLOOR NEW WORK PLAN  
- SOUTH  
SCALE: 1/8" = 1'-0"



EQUIPMENT SCHEDULE: DELI			
ITEM NO.	DESCRIPTION	QUANTITY	MANUFACTURER
1	STAINLESS STEEL SINK	1	AMERICAN SINK CO.
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DENVER, CO 80202  
303.733.1000  
www.beckermokan.com

**TONY'S PIZZA RENOVATION**

3 JAMNICK AVE  
ODON CITY, MD

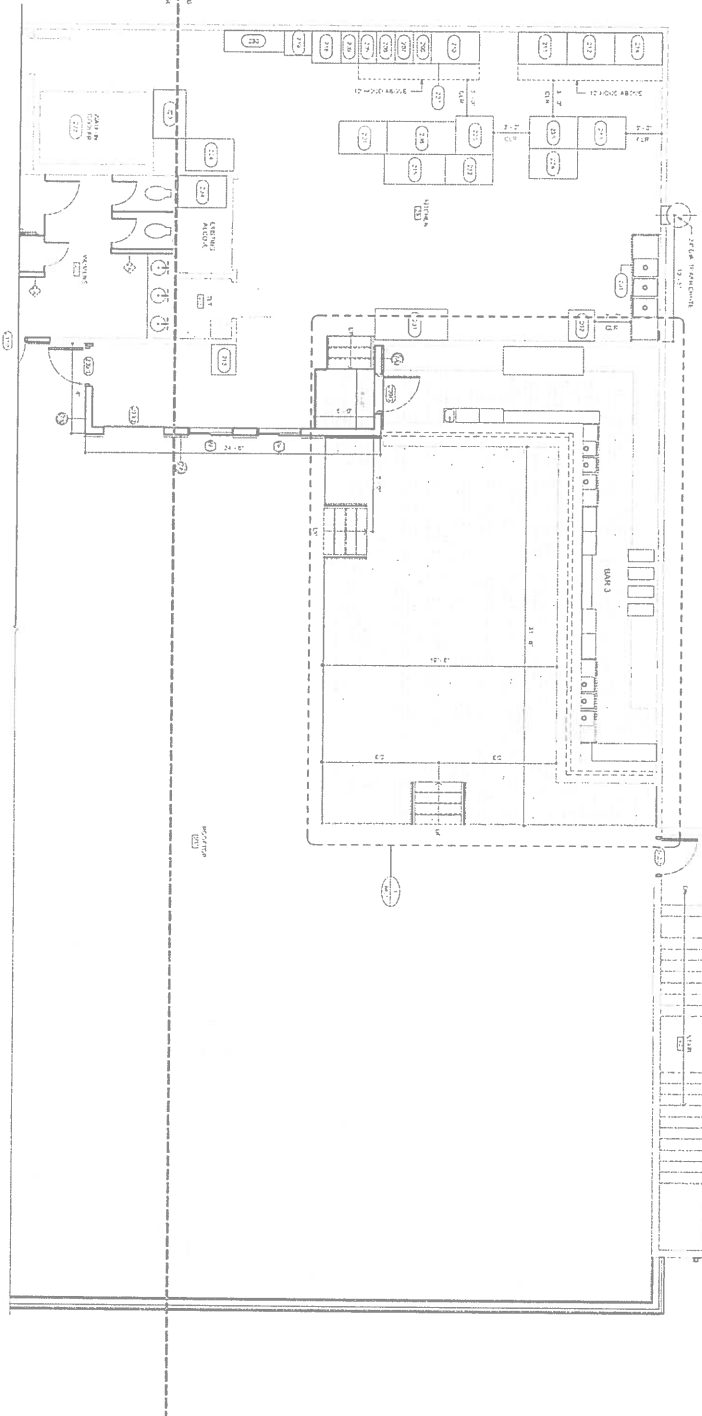
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7/10/2011

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1 SECOND FLOOR/ROOF DECK  
NEW WORK PLAN - NORTH  
SCALE 1/4" = 1'-0"

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1. The first step is to identify the problem. In this case, the problem is that the user is unable to access the internet.

TONY'S PIZZA  
RENOVATION

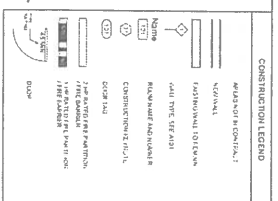
3 ATLANTIC AVE  
OCEAN CITY, MD

SECOND  
FLOOR/ROOF DECK  
NEW WORK PLAN  
NORTH

ISSUED  
FEB 19 1966

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Ud(Cr) 4.124



<b>BECKER</b> <b>MOKMAN</b> C. R. O. U. T.		MR. HILLET RE ENGINEERING 1210 1/2 62nd St Brooklyn N.Y. 11220 212-351-1111 212-351-1112 212-351-1113 212-351-1114 212-351-1115 212-351-1116 212-351-1117 212-351-1118 212-351-1119 212-351-1120 212-351-1121 212-351-1122 212-351-1123 212-351-1124 212-351-1125 212-351-1126 212-351-1127 212-351-1128 212-351-1129 212-351-1130 212-351-1131 212-351-1132 212-351-1133 212-351-1134 212-351-1135 212-351-1136 212-351-1137 212-351-1138 212-351-1139 212-351-1140 212-351-1141 212-351-1142 212-351-1143 212-351-1144 212-351-1145 212-351-1146 212-351-1147 212-351-1148 212-351-1149 212-351-1150 212-351-1151 212-351-1152 212-351-1153 212-351-1154 212-351-1155 212-351-1156 212-351-1157 212-351-1158 212-351-1159 212-351-1160 212-351-1161 212-351-1162 212-351-1163 212-351-1164 212-351-1165 212-351-1166 212-351-1167 212-351-1168 212-351-1169 212-351-1170 212-351-1171 212-351-1172 212-351-1173 212-351-1174 212-351-1175 212-351-1176 212-351-1177 212-351-1178 212-351-1179 212-351-1180 212-351-1181 212-351-1182 212-351-1183 212-351-1184 212-351-1185 212-351-1186 212-351-1187 212-351-1188 212-351-1189 212-351-1190 212-351-1191 212-351-1192 212-351-1193 212-351-1194 212-351-1195 212-351-1196 212-351-1197 212-351-1198 212-351-1199 212-351-1200 212-351-1201 212-351-1202 212-351-1203 212-351-1204 212-351-1205 212-351-1206 212-351-1207 212-351-1208 212-351-1209 212-351-1210 212-351-1211 212-351-1212 212-351-1213 212-351-1214 212-351-1215 212-351-1216 212-351-1217 212-351-1218 212-351-1219 212-351-1220 212-351-1221 212-351-1222 212-351-1223 212-351-1224 212-351-1225 212-351-1226 212-351-1227 212-351-1228 212-351-1229 212-351-1230 212-351-1231 212-351-1232 212-351-1233 212-351-1234 212-351-1235 212-351-1236 212-351-1237 212-351-1238 212-351-1239 212-351-1240 212-351-1241 212-351-1242 212-351-1243 212-351-1244 212-351-1245 212-351-1246 212-351-1247 212-351-1248 212-351-1249 212-351-1250 212-351-1251 212-351-1252 212-351-1253 212-351-1254 212-351-1255 212-351-1256 212-351-1257 212-351-1258 212-351-1259 212-351-1260 212-351-1261 212-351-1262 212-351-1263 212-351-1264 212-351-1265 212-351-1266 212-351-1267 212-351-1268 212-351-1269 212-351-1270 212-351-1271 212-351-1272 212-351-1273 212-351-1274 212-351-1275 212-351-1276 212-351-1277 212-351-1278 212-351-1279 212-351-1280 212-351-1281 212-351-1282 212-351-1283 212-351-1284 212-351-1285 212-351-1286 212-351-1287 212-351-1288 212-351-1289 212-351-1290 212-351-1291 212-351-1292 212-351-1293 212-351-1294 212-351-1295 212-351-1296 212-351-1297 212-351-1298 212-351-1299 212-351-1300 212-351-1301 212-351-1302 212-351-1303 212-351-1304 212-351-1305 212-351-1306 212-351-1307 212-351-1308 212-351-1309 212-351-1310 212-351-1311 212-351-1312 212-351-1313 212-351-1314 212-351-1315 212-351-1316 212-351-1317 212-351-1318 212-351-1319 212-351-1320 212-351-1321 212-351-1322 212-351-1323 212-351-1324 212-351-1325 212-351-1326 212-351-1327 212-351-1328 212-351-1329 212-351-1330 212-351-1331 212-351-1332 212-351-1333 212-351-1334 212-351-1335 212-351-1336 212-351-1337 212-351-1338 212-351-1339 212-351-1340 212-3	
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**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

***REPORT OF INVESTIGATION***

*Type: 99% Stock Transfer*

*Date: 03-04-2025*

*License No: 104*

*Class: B*

*Type: Beer-Wine-Liquor*

**APPLICANT(S):**

**1. Jason Gulshen**

**2. Linda Ruggiero**

**3.**

**4.**

*TRADE NAME: Touch of Italy*

*CORP: Farindola OC, LLC*

*LOCATION: 6600 Coastal Highway, Ocean City*

**RESTRICTIONS:** No off sale, Live entertainment allowed in fenced in outside pool area from 12 noon until 8:30 P.M., Entire hotel licensed, Live entertainment allowed a maximum of four pieces seven night per week from 7 P.M. until 10 P.M.

Mr. Ciprietti held 99% membership interest in Farindole LLC, and (1%) with Jason Gulshen. Whereas, by Assignment dated February 17 ,2025, Ciprietti assigned his ninety-nine percent (99%) interest in the Company to Linda Ruggiero. Ruggiero is now the ninety-nine percent (99%) holder of the property and Gulshen will continue to be a one percent (1%) holder of the property. Touch of Italy has been open July 19, 2018, with no violations.

Lenard Kaschback will manage the property, which will be a Restaurant and Bar. There will be about 4,800 SF. of space total. There is about 4,800 SF of inside space including the kitchen on the main floor, with 144 seats and a Bar that seats 4. The outside patio that is on the west side of the restaurant and is approximately 1,000 SF. which accommodates 12 tables with (4) seats at each and a service bar with no seating. In addition, this area is fully enclosed with a 42" high fence. The patio is utilized seasonally and seats 48. Mr. Gulshen requests all the same current restrictions (see above) be retained.

The hours of operation will be 07:00 AM- 11:00 AM for breakfast and 4:00 PM -9:30 PM for dinner, (7) days a week year-round. The outside patio operating hours are 4:00 PM – 9:00 PM. There will be about 30 wintertime employees and about 70 seasonal employees. All managers will be trained in TAM/TIPs.

Ian W. Cameron  
Liquor License Inspector

April Payne  
Liquor License Administrator

410-524-5252  
Business Phone No.WORCESTER COUNTY  
STATE OF MARYLAND

## ALCOHOLIC BEVERAGES LAW

## APPLICATION FOR A CLASS "B" BVL 7 day LICENSE

For the use of:

(Check one) An Individual ☐ Partnership ☐ Corporation ☐ Unincorporated Association ☐ Limited Liability Co. ☒

To the Board of License Commissioners Worcester County.

Date 2/10, 2025

Application is made by the undersigned under the provisions of Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages," for the above license, and the applicant(s) submit(s) and certify(ies) to the following information required by the Article.

Fill in all the blanks:

Applications will NOT be accepted without all Applicant information, including middle name.

## 1. Applicant(s)

## (1) Full Name

Jason Grulcher, Resident Agent

Residence

10204 Ryeview Ln, Peta, MD 21811

Date of Birth

Period of Residence

4 yrs in Wor. County 18 yrs

Place of Birth

Englewood, CO

Naturalized at

Year

Telephone Number

443-235-1324

Race

CAUCASIAN

Sex

M

## (2) Full Name

\* Linda Ruggiero

Residence

30847 E. Annie Lane, #1206, MONTGOMERY, MD 21868

Date of Birth

Period of Residence

9 yrs in Wor. County 2

Place of Birth

Bronx, NY

Naturalized at

Year

Telephone Number

917-837-2323

Race

CAUCASIAN

Sex

F

## (3) Full Name

Date of Birth

Residence

Period of Residence

Period of Residence

in Wor. County

Place of Birth

\*Rick Lawrence - Administrator

Naturalized at

Year

Telephone Number

303-278-7090

Race

Sex

2. The applicant(s) is/are citizen(s) of the United States, and (if the application is for an individual or a partnership), has/have been for two years next preceding the filing of this application (a) resident(s) of Worcester County. The applicant(s) (if applying as a qualifying individual for a corporation) is a registered voter and taxpayer in Worcester County and shall also have resided there for at least two years prior to the filing of this application. The applicant(s) thus qualified is/are: 1( ☒ ) 2( ☐ ) 3( ☐ ) (Check number to correspond with name(s) listed above.)

## 3. State the Retail Sales Tax No.:

## 4. If a corporation, state corporate name and trade name, if any:

FARINDOLA OC, LLC

If other than a corporation, state trade name to be used:

Touch of Italy

## 5. Address of place to be licensed (Give street number or accurate description):

6600 N. Coastal Hwy, Ocean City, MD 21842

A. Nearest intersecting street:

66th Street

Approximate distance: 50

feet

B. Tax District where located:

10th

Is this an application for a new license?

No

C. Is this a transfer from a present licensee?

From Whom?

Robert Ciprietti to Linda Ruggiero

License #104

(This Board must be furnished releases by the State Comptroller's Office approving the bulk sales transfer and clearing all tax accounts before any license will be transferred.)

## D. Are you represented by an attorney? Whom:

Hugh Cropper

Tel. No.:

410-213-2681

Address:

9927 Stephen Decatur Hwy, Ste. F-12, Ocean City, MD 21842

- E. Describe premises to be licensed: 19001 RESTAURANT, BAR, POOL, PAD, BAN, CONFERENCE ROOMS IN THE HOLIDAY INN HOTEL
- F. If this is a new or proposed building or a building not previously licensed, a copy of the bona fide plans must be filed with this application or presented at the time of the hearing.
6. State name and address of owner of record of premises: HARRISON INN 66 Business Trust  
1801 Philadelphia Ave., Ocean City, MD 21842
7. Have you ever been:
- A. Convicted of a misdemeanor? 1 No 2 No 3 \_\_\_\_\_
- B. Adjudged guilty of violating alcoholic beverage laws by a court, administrative agency or Board of License Commissioners? 1 No 2 No 3 \_\_\_\_\_
- C. Adjudged guilty of violating gambling laws? 1 No 2 No 3 \_\_\_\_\_
- D. Adjudged guilty of any offense against the laws of the United States? 1 No 2 No 3 \_\_\_\_\_
- If so, when and where: \_\_\_\_\_
- E. Convicted of a felony or offered a plea of nolo contendere to a felony indictment and charge was subsequently accepted by a court? 1 No 2 No 3 \_\_\_\_\_
8. A. Have you ever held a license for the sale of alcoholic beverages? 1 YES 2 No 3 \_\_\_\_\_
- If yes, state when and where: MD - Touch of Italy, Ocean City, MD
- B. If so, has such license been suspended or revoked? 1 No 2 No 3 \_\_\_\_\_
- If answer is yes, give full details: \_\_\_\_\_
- C. If so, were you ever found in violation of any alcoholic beverage law? 1 No 2 \_\_\_\_\_ 3 \_\_\_\_\_
9. Have you ever applied for an alcoholic beverage license in the State of Maryland? 1 YES 2 No 3 \_\_\_\_\_
- If answer is yes, state when and where: MD - Touch of Italy, Ocean City, MD
10. What financial interests do you have in the business to be conducted under this license? 1 1% 2 99% 3 \_\_\_\_\_
11. Are you financially interested in any other alcoholic beverage business for which a license has been applied for, granted or issued? 1 No 2 No 3 \_\_\_\_\_
- If so, give details: \_\_\_\_\_
12. Is your wife or husband, as the case may be, a licensee and does her or she have any financial interest in any other alcoholic beverage business in the State of Maryland? 1 No 2 No 3 \_\_\_\_\_
- If so, give details: \_\_\_\_\_
13. Is there now, or will there be, during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder? 1 No 2 No 3 \_\_\_\_\_
- If so, state name, address, telephone no., age, percent of interest and state whether or not an interest is held in any other alcoholic beverage license: \_\_\_\_\_
14. A. Does any manufacturer, brewer, distiller or wholesaler have any financial interest in the premises or business to be conducted under this license? No
- B. Will any such interest be hereafter conveyed or granted to any such manufacturer, brewer, distiller or wholesaler? No
15. Do you now have, or will you hereafter have, any indebtedness or other financial indebtedness, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverage? No
16. A. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? YES
- B. If granted a license, will you agree to keep current all state and local tax obligations including, but not limited to, state sales and use tax, withholding tax and admissions tax? YES
- I/We consent to the Board of License Commissioners being furnished with a copy of my/our arrest record, if any, by any state, local, or federal law enforcement or judicial agency. App. #1 YES App. #2 YES App. #3 \_\_\_\_\_



# LIMITED LIABILITY MEMBERSHIP AFFIDAVIT

Name Jason Gulshan Residence Address 10204 Ruffian Ln., Berlin, MD 21811 Zip Code 21811  
 Period of Residence 4 yrs Home Telephone No. 443-235-1324 Office Telephone No. 410-524-1600  
 Date of Birth [REDACTED] Sex M Place of Birth Englewood, CO Social Security No. [REDACTED]

Naturalized Yes ( ) No ( ) \_\_\_\_\_  
 Where Naturalized Harrison Group Hotels Petition No. \_\_\_\_\_

Place of Employment 1801 Philadelphia Ave, Ocean City, MD 21842 Length of Employment 25 yrs  
 Address of Employer \_\_\_\_\_

1b. What is your ownership interest in LLC? 10% Percent of Ownership  
 2b. What is your capital contribution to LLC? \$1,000

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

No, just this one

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

6. As a stockholder, how much time will you spend on the licensed premises?

weekly or as needed

7. What profit will you derive in proportion to the percentage of ownership?

\$1500/yr.

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes (X) No ( )

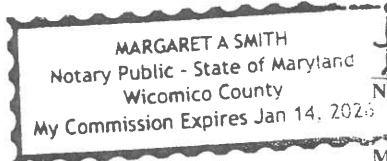
PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Signature

Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Wicomico, personally appeared Jason Gulshan In said County and State on this 17th day of Feb, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 17th day of Feb, 2025



Margaret A. Smith  
 Notary Public

My Commission Expires: 1/14/26

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

Name Linda Ruggiero Residence Address 30847 E. Annie Lane, #1206 Zip Code 19968  
MILTON, DE  
 Home Telephone No. 917-837-2323 Office Telephone No. 410-524-5252  
 Date of Birth [REDACTED] Sex F Place of Birth Bronx, NY Social Security No. [REDACTED]

Naturalized Yes ( ) No ( )  
 Where Naturalized Karndia Lewis, LLC Petition No. 10+ yrs

Place of Employment 101 Second St., Lewes, DE 19958  
 Address of Employer 99% Length of Employment 99%

1b. What is your ownership interest in LLC? 99%  
 Percentage of Ownership 99%

2b. What is your capital contribution to LLC? \$99

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail.

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail.

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

No

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail.

6. As a stockholder, how much time will you spend on the licensed premises?

20 hrs/wk.

7. What profit will you derive in proportion to the percentage of ownership?

99%

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes ( ) No (X)

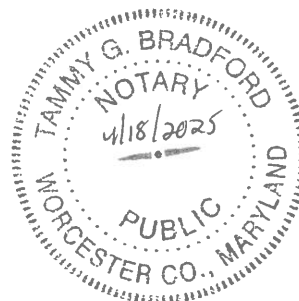
PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

[Signature]  
 Signature

Manager-member  
 Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Linda Ruggiero In said County and State on this 10<sup>th</sup> day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 10<sup>th</sup> day of February, 2025



Tammy G. Bradford  
 Notary Public

My Commission Expires: 4/18/2025

**RESOLUTION ADOPTED BY MEMBERS,**  
**FARINDOLA OC, LLC.,**  
**A MARYLAND LIMITED LIABILITY COMPANY**

The undersigned, hereby adopt the following Resolutions:

**WHEREAS**, Robert Ciprietti (hereinafter “Ciprietti”) formed Farindola OC, LLC, a Maryland Limited Liability Company (hereinafter the “Company”) to operate a food and beverage business, including the sale of alcoholic beverages, among other things;

**WHEREAS**, the membership interests in the Company were originally owned ninety-nine percent (99%) by Ciprietti, and one percent (1%) by Jason Gulshen (hereinafter “Gulshen”);

**WHEREAS**, by Assignment dated February 17, 2025, Ciprietti assigned his ninety-nine percent (99%) interest in the Company to Linda Ruggerio; and,

**WHEREAS**, as set forth in the attached Assignment, the Company is now owned by Ruggerio, ninety-nine percent (99%), and Gulshen, one percent (1%).

Upon Motion duly made, seconded, and unanimously carried, it was hereby:

**RESOLVED**, that the attached Assignment is hereby approved by all of the members of the Company, and that Ruggerio now owns ninety-nine percent (99) of the membership interests in the Company, and Gulshen now owns one percent (1%) of the membership interests in the Company.

Upon Motion duly made, seconded, and unanimously carried it was hereby:

**RESOLVED**, that Ruggerio shall act as the Managing Member of the Company.

Upon Motion duly made, seconded, and unanimously carried, it was hereby:

**RESOLVED**, that Ruggerio and Gulshen shall be the individual license holders, along with the Company, with respect to the Class B, B/W/L, 7 Day License, issued by the Worcester County, Board of License Commissioners. Ruggerio and Gulshen shall provide the Board with all necessary documentation, and they are

authorized to execute the application, renewal application, and any documents associated therewith.

Upon Motion duly made, seconded, and unanimously carried, it was hereby:

**RESOLVED**, that Gulshen shall remain as the Resident Agent of the Company, and agrees to act as such before the Worcester County, Board of License Commissioners.

There being no further business to come before the meeting, upon Motion duly made, seconded, and unanimously carried, it was hereby:

**RESOLVED**, that the meeting be adjourned.

Witness

LINDA RUGGERIO  
MANAGING MEMBER

(SEAL)

Witness

JASON GULSHEN

(SEAL)

Witness

ROBERT CIPRIETTI,  
WITHDRAWING MEMBER

(SEAL)

FARINDOLA OC, LLC RESOLUTION

## **ASSIGNMENT**

**THIS ASSIGNMENT** is made on this 17th day of February, 2025, by and between **ROBERT CIPRIETTI** (hereinafter "Ciprietti") **LINDA RUGGERIO** (hereinafter "Ruggerio"), **JASON GULSHEN** (hereinafter "Gulshen") and **FARINDOLA OC, LLC**, a Maryland Limited Liability Company (hereinafter the "Company").

**WHEREAS**, Ciprietti formed the Company to operate a food and beverage business, among other things;

**WHEREAS**, the Membership Interests in the Company are currently owned ninety-nine percent (99%) by Ciprietti and one percent (1%) by Gulshen; and,

**WHEREAS**, Ciprietti has agreed to sell, transfer, assign, and convey his ninety-nine percent (99%) Membership Interests in the Company to Ruggerio, on the terms and subject to the conditions hereinafter set forth.

**WITNESSETH: NOW, THEREFORE**, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties, intending to be legally bound, do hereby agree as follows:

1. Ciprietti hereby grants and conveys to Ruggiero, her heirs, personal representatives and assigns, ninety-nine percent (99%) of the Membership Interests in the Company, representing all of Ciprietti's ownership interest in the Company. The purchase price shall be Ninety Nine Dollars (\$99.00). Ciprietti shall sign such additional documents and give further assurances as may be necessary to vest title in the ninety nine percent (99%) Membership Interests in the Company to Ruggerio.

The Membership Interests in the Company are now owned as follows:

Linda Ruggerio  
Jason Gulshen

Ninety-Nine Percent (99%)  
One Percent (1%)

2. Upon transfer of the membership interests described herein, Ciprietti shall resign all offices within the Company, including Managing Member for the Company.

3. The affairs of the Company, and all management decisions, shall be determined by Ruggerio, in her sole, absolute, and unrestricted discretion. Ruggerio shall act as the Managing Member of the Company, with full authority to bind the Company. Among other things, Ruggerio, as Managing Member, shall have the full and unrestricted authority to execute all documents on behalf of the Company, without further action.


4. To the extent required, this Assignment shall be construed as an amendment to the Operating Agreement. The provisions of this Agreement and Assignment shall control in all circumstances and shall supersede any existing Operating Agreements.

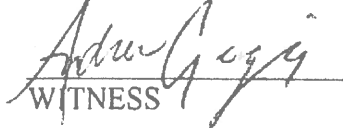
5. Jason Gulshen joins in this Assignment for the purpose of consenting to the transaction.

6. This Assignment shall bind and inure to the benefit of the parties hereto, and their respective heirs, personal representatives and assigns. This Assignment and the rights and obligations of the parties hereunder shall be governed by the laws of the State of Maryland. The items and provisions herein contained constitute the entire agreement between the parties relating to the Company, and all other prior stipulations and agreements had between the parties are merged herein.


**IN WITNESS WHEREOF**, the hands and seals of the parties hereto, as of the day and year first above written.


  
WITNESS

  
WITNESS

  
WITNESS

ATTEST:



  
ROBERT CIPRIETTI (SEAL)

  
LINDA RUGGERIO (SEAL)

  
JASON GULSHEN (SEAL)

FARINDOLA OC, LLC

BY:  (SEAL)  
LINDA RUGGERIO, MANAGING MEMBER

I/We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners of Worcester County, its duly authorized agents and employees, any peace officer of Worcester County, to inspect without warrant, the premises upon which said business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours, and further state that I/We have personally obtained the signatures of the ten citizens to the certificate which is a part hereof.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof shall be subject to the penalties provided by the law for that crime.)

Give name(s) and address(es) of officers:

<u>Jason Gulshan</u> (name)	<u>Member (Resident Agent)</u> (title)	<u>10204 Ruffian Ln, Berlin MD 2081</u> (residence)
<u>Linda Ruggiero</u> (name)	<u>Manager - Member</u> (title)	<u>30847 E. Annie Lake Ave #206</u> <u>MILTON, DE 19968</u> (residence)
_____ (name)	_____ (title)	_____ (residence)

If applicant is a Corporation, President or Vice-President must sign:

All Applicants must sign:

- [Signature]  
(Signature of applicant)
- [Signature]  
(Signature of applicant)
- \_\_\_\_\_  
(Signature of applicant)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:

THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of \_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

\_\_\_\_\_  
NOTARY PUBLIC

(Seal)

STATE OF Maryland COUNTY OF Worcester TO WIT:

THIS CERTIFIES, That on the 10<sup>th</sup> day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Linda Ruggiero

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

Tammy M Bradford  
NOTARY PUBLIC My Comm Exp 4/18/2022

(Seal)

STATE OF Maryland COUNTY OF Wicomico TO WIT:

THIS CERTIFIES, That on the 17<sup>th</sup> day of Feb, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Jason Gulshan

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

MARGARET A SMITH  
Notary Public - State of Maryland  
Wicomico County  
My Commission Expires Jan 14, 2026

Margaret A Smith  
NOTARY PUBLIC

(Seal)

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF MARYLAND

I/WE HEREBY CERTIFY, That I am/we the owner(s) of record of the property known as Touch of Italy

(PARADOLA DC, LLC)  
named in the foregoing application made to the Board of License Commissioners under the Alcoholic Beverage Laws of Maryland; that I/we assent to the granting of the license applied for; that I/we hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Worcester County its duly authorized agents and employees, and any peace officer of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

WITNESS, our/my hand(s) and seal(s) this 17th day of Feb 2025

(seal) (seal)

(seal) (seal)

STATE OF Maryland COUNTY OF Wicomico TO WIT:

THIS CERTIFIES, That on the 17th day of Feb, 2025, before the subscriber, a Notary Public of the State of

Maryland

personally appeared

Hale Harrison

and acknowledged the execution of the foregoing instrument to be of Maryland

WITNESS my hand and notarial seal.

MARGARET A SMITH

Notary Public for the State of Maryland

Wicomico County

My Commission Expires Jan 14, 2026

Margaret A Smith  
NOTARY PUBLIC

(Seal)

(The following certificates must be signed by at least ten persons.)

**SIGNATURES MUST BE OBTAINED BY THE RESIDENT, IF APPLICATION IS FOR CORPORATION.**

We the undersigned reputable citizens (real estate owners, registered voters with Worcester County and reside within the tax district in which the business covered by the foregoing application is to be conducted) certify that each of us has been personally acquainted with the applicant for the length of time indicated after our respective names; that we have examined the application of the applicant and that we have good reason to believe that all of the statements contained in said application are true, and that we are familiar with the premises upon which the proposed business is to be conducted and we believe such premises are suitable for the conduct of the business of retail dealer in alcoholic beverages, and that we are of the opinion that the applicant is a suitable person to obtain the license applied for:

(Print name above signature)

Name

Address  
Voting Residence

Length of time acquainted with applicant(s). If not acquainted prior to application filing, indicate "Just Met." (All three blanks must be filled in.)

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Resident Agent

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

remains the same

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

N/A

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Tax District \_\_\_\_\_ App. 1 \_\_\_\_\_ App. 2 \_\_\_\_\_ App. 3 \_\_\_\_\_

Address of property owned \_\_\_\_\_

Names and addresses of signers must be printed or typewritten above signatures.



**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

**REPORT OF INVESTIGATION**

*Type: Transfer Application*

*March 6, 2025*

*License No: 515*

*Class: B*

*Type: Beer -Wine -Liquor*

**APPLICANT(S):**

**1. Robert Ciprietti**

**2. Wayne Hartman**

**3.**

**4.**

*TRADE NAME: Ocean Pines Yacht Club*

*CORP: Farindola,OP, LLC*

*LOCATION: 1 Mumfords Landing Road, Berlin*

**RESTRICTIONS:** Inside live entertainment permitted with amplification with a maximum of five pieces from 12:00 P.M. until 1:00 A.M., Outside live entertainment permitted with amplification with a maximum of five pieces from 12:00 P.M. until 10:00 P.M., Off sale of beer and wine in factory sealed containers only

Mr. Ciprietti holds 98% of the LLC, and Mr. Hartman, the Resident Agent, holds 2% and obtained the signatures on the application. If the transfer application is approved, the applicants request this license to be designated as Multiple License #1. This location has been open since 1996 with no violations.

Ms. Kattie Krynitsky will manage the property, which will be a restaurant and bar. There will be about 13,000 SF of inside space, including the kitchen, on the first floor, with 160 seats at tables. There are 2 bars inside on the first floor. The bar at the south end will have 30 seats and the bar at the north end will have 8 seats. The second-floor ballroom has 214 seats at tables with a bar that seats 8. This is only open for special events. Outside on the first floor is a patio which has outside dining that has 60 seats at tables, along with a Tiki bar that has 24 seats. Mr. Ciprietti requests most of the current restrictions.

Mr. Ciprietti requests a DJ or a music technician (4) days per week outside and (3) days a week inside. Background music (7) days a week outside at the Tiki bar. Only one form of entertainment would take place at a time.

Hours of operation will be 11:00 AM- 1:00 AM inside and 11:00 AM-10:00 PM outside (7) days a week seasonal but the outside will always close by 10:00 PM. There will be about 50-60 employees, fewer in the off season All servers, bartenders and Managers would be TAM/TIPs trained.

Ian W. Cameron  
Liquor License Inspector

April R. Payne  
Liquor License Administrator

302-278-7090

Business Phone No.

Multiple License #1  
WORCESTER COUNTY

Received 2-19-25

## STATE OF MARYLAND

## ALCOHOLIC BEVERAGES LAW

APP

APPLICATION FOR A CLASS "B" B, W, L 7 day LICENSE

"TRANSFER APPLICATION"

For the use of:

(Check one) An Individual ☒ Partnership ☐ Corporation ☐ Unincorporated Association ☐ Limited Liability Co. ☒

To the Board of License Commissioners Worcester County.

Date 2/10, 2025

Application is made by the undersigned under the provisions of Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages," for the above license, and the applicant(s) submit(s) and certify(ies) to the following information required by the Article.

Fill in all the blanks:

Applications will NOT be accepted without all Applicant information, including middle name.

## 1. Applicant(s)

## (1) Full Name

Robert Ciprietti

Residence 3844 Cypress Lake #5667, Bethesda, MD 20814

Date of Birth

[REDACTED]

Period of Residence

10 yrs

Period of Residence

in Wor. County 2

Place of Birth

Bronx, NY

Naturalized at

Year

Telephone Number

914-906-0175

Race

CAUCASIAN

Sex

M

## (2) Full Name

Wayne A. Hoffman

Residence 60 Hingham Ln, Ocean Pines, MD 21811

Date of Birth

[REDACTED]

Period of Residence

12 yrs

Period of Residence

in Wor. County 20+ years

Place of Birth

Baltimore, MD

Naturalized at

Year

Telephone Number

410-726-2431

Race

CAUCASIAN

Sex

M

## (3) Full Name

Date of Birth

[REDACTED]

Residence

Period of Residence

Place of Birth

[REDACTED]

Naturalized at

Year

Telephone Number

#Bids. Lawrence. Administrator

Race

Sex

2. The applicant(s) is/are citizen(s) of the United States, and (if the application is for an individual or a partnership), has/have been for two years next preceding the filing of this application (a) resident(s) of Worcester County. The applicant(s) (if applying as a qualifying individual for a corporation) is a registered voter and taxpayer in Worcester County and shall also have resided there for at least two years prior to the filing of this application. The applicant(s) thus qualified is/are: 1( ) 2(X) 3( ) (Check number to correspond with name(s) listed above)

## 3. State the Retail Sales Tax No.:

Farindola OP, LLC

## 4. If a corporation, state corporate name and trade name, if any:

FARINDOLA OP, LLC

If other than a corporation, state trade name to be used:

Yacht Club at Ocean Pines

## 5. Address of place to be licensed (Give street number or accurate description):

1 MUMFORDS LNDG Rd.,

Ocean Pines, MD 21811

## A. Nearest intersecting street:

Yacht Club Drive

Approximate distance: 350 feet

## B. Tax District where located:

3rd

Is this an application for a new license? NO

## C. Is this a transfer from a present licensee?

Yes

From Whom?

Ocean Pines International Yacht Club, Inc.

to Farindola OP, LLC

License # 515

(This Board must be furnished releases by the State Comptroller's Office approving the bulk sales transfer and clearing all tax accounts before any license will be transferred.)

## D. Are you represented by an attorney? Whom:

Hugh Cropper

Tel. No.: 410-213-2681

Address: 9927 Stephen Decatur Hwy, Ste F-12, Ocean City, MD 21842

E. Describe premises to be licensed: Ocean View Yacht Club Bar, restaurant, theater, pool deck, patio  
F. If this is a new or proposed building or a building not previously licensed, a copy of the bona fide plans must be filed with this application or presented at the time of the hearing.

6. State name and address of owner of record of premises: Ocean View Association, Inc.  
239 Ocean Pkwy, Ocean View, MD 21811

7. Have you ever been:

A. Convicted of a misdemeanor? 1 NO 2 NO 3 \_\_\_\_\_

B. Adjudged guilty of violating alcoholic beverage laws by a court, administrative agency or Board of License Commissioners? 1 NO 2 NO 3 \_\_\_\_\_

C. Adjudged guilty of violating gambling laws? 1 NO 2 NO 3 \_\_\_\_\_

D. Adjudged guilty of any offense against the laws of the United States? 1 NO 2 NO 3 \_\_\_\_\_

If so, when and where: \_\_\_\_\_

E. Convicted of a felony or offered a plea of nolo contendere to a felony indictment and charge was subsequently accepted by a court? 1 NO 2 NO 3 \_\_\_\_\_

8. A. Have you ever held a license for the sale of alcoholic beverages? 1 YES 2 NO 3 \_\_\_\_\_

If yes, state when and where: see attached list

B. If so, has such license been suspended or revoked? 1 NO 2 NO 3 \_\_\_\_\_

If answer is yes, give full details: \_\_\_\_\_

C. If so, were you ever found in violation of any alcoholic beverage law? 1 NO 2 \_\_\_\_\_ 3 \_\_\_\_\_

9. Have you ever applied for an alcoholic beverage license in the State of Maryland? 1 YES 2 \_\_\_\_\_ 3 \_\_\_\_\_

If answer is yes, state when and where: FACINDOLA OC, LLC dba Touch of Italy, Ocean City, MD

10. What financial interests do you have in the business to be conducted under this license?

1 98% 2 2% 3 \_\_\_\_\_

11. Are you financially interested in any other alcoholic beverage business for which a license has been applied for, granted or issued? 1 Yes 2 NO 3 \_\_\_\_\_

If so, give details: see attached list

12. Is your wife or husband, as the case may be, a licensee and does her or she have any financial interest in any other alcoholic beverage business in the State of Maryland? 1 NO 2 NO 3 \_\_\_\_\_

If so, give details: \_\_\_\_\_

13. Is there now, or will there be, during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder? 1 NO 2 NO 3 \_\_\_\_\_

If so, state name, address, telephone no., age, percent of interest and state whether or not an interest is held in any other alcoholic beverage license: \_\_\_\_\_

14. A. Does any manufacturer, brewer, distiller or wholesaler have any financial interest in the premises or business to be conducted under this license? NO

B. Will any such interest be hereafter conveyed or granted to any such manufacturer, brewer, distiller or wholesaler? NO

15. Do you now have, or will you hereafter have, any indebtedness or other financial indebtedness, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverage? NO

16. A. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? YES

B. If granted a license, will you agree to keep current all state and local tax obligations including, but not limited to, state sales and use tax, withholding tax and admissions tax? YES

I/We consent to the Board of License Commissioners being furnished with a copy of my/our arrest record, if any, by any state, local, or federal law enforcement or judicial agency. App. #1 YES App. #2 YES App. #3 \_\_\_\_\_

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

Robert Ciprietti, 3894 Green Lake Cir #56187, Bethesda, DE 19930  
 Name Residence Address Zip Code

10+ yrs 914-906-0175 [REDACTED]  
 Period of Residence Home Telephone No. Office Telephone No.

[REDACTED] M Brooklyn, NY [REDACTED]  
 Date of Birth Sex Place of Birth Social Security No.

Naturalized Yes ( ) No ( )  
 Where Naturalized Petition No.

Frankola LLC dba Touch of Italy 7 yrs  
 Place of Employment Address of Employer Length of Employment

1b. What is your ownership interest in LLC? 98%  
 Percent of Ownership  
 2b. What is your capital contribution to LLC? \$9800

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail.

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail.

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location? YES

NY - Brooklyn NY - Luciano's restaurant  
MD - Frankola OC, LLC dba Touch of Italy, P.O. Box 307, Lewes, DE 19958  
DE - Touch of Italy, Rehoboth Beach, DE / Touch of Italy, Lewes, DE  
DE - Touch of Italy, Rehoboth Beach, DE / Touch of Italy, Lewes, DE

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail.

6. As a stockholder, how much time will you spend on the licensed premises?

10+ hrs/wk

7. What profit will you derive in proportion to the percentage of ownership?

98%

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes ( ) No (X)

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Robert Ciprietti  
 Signature

Managen - Member  
 Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Robert Ciprietti In said County and State on this 16 day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 16 day of February, 2025

Donahue  
 Notary Public  
 My Commission Expires: Worcester County  
 My Commission Expires Feb 17, 2026

# LIMITED LIABILITY MEMBERSHIP AFFIDAVIT

Wayne A. Hartman 60 Highway Ln., Ocean Pines, MD 21811  
 Name Residence Address Zip Code  
 1 yr 410-726-2431  
 Period of Residence Home Telephone No. Office Telephone No.  
 [Redacted] Choose M Baltimore, MD [Redacted]  
 Date of Birth Sex Place of Birth Social Security No.

Naturalized Yes ( ) No ( )  
 Where Naturalized Petition No.  
 SELF / State of Maryland  
 Place of Employment

SELF / 6 Bladen St., RM. 213 20+ yrs / 6 yrs  
 Address of Employer Annapolis, MD 21401 Length of Employment

1b. What is your ownership interest in LLC? 2%  
 Percent of Ownership

2b. What is your capital contribution to LLC? \$200

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail.

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail.

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

No

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail.

6. As a stockholder, how much time will you spend on the licensed premises?

2 hrs / wk

7. What profit will you derive in proportion to the percentage of ownership?

2%

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes (X) No ( )

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Wayne A. Hartman  
 Signature

Member (Resident Agent)  
 Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Wayne A. Hartman In said County and State on this 16 day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 16 day of February, 2025

Debbie Donahue  
 Notary Public

My Commission Expires:

DEBBIE DONAHUE  
 Notary Public - State of Maryland  
 Worcester County  
 My Commission Expires Feb 17, 2026

WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
TRANSFER OF LOCATION OR ASSIGNMENT OF LICENSE

The purpose of this application is to:

(a) transfer LOCATION from \_\_\_\_\_  
To \_\_\_\_\_

(b) transfer or ASSIGN from OCEAN PINES International Yacht Club, Inc.  
To FARINOLA OP, LLC

I/We, the Transferors, do hereby make oath in due form of law that I/we have fully complied with all provisions of law and all regulations during the time that my/our license for the above-named premises has been in effect and that no indictment or complaint is pending against me/us or any of my/our employees in any court of this State or before the Board of License Commissioners, and that I/we do hereby consent to the transfer (or cancellation) of said license to be the above-named Transferee.

AS WITNESS my/our hand(s) and seal(s) this 14<sup>th</sup> day of February, 2025

Jh Luthan Jr (SEAL)

\_\_\_\_ (SEAL)

\_\_\_\_ (SEAL)

STATE OF Maryland, COUNTY OF Worcester  
I hereby certify that on this 14 day of February, 2025, personally appeared John Luthan Jr. and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

Debbie Donahue

Notary Public  
My Commission expires:

DEBBIE DONAHUE  
Notary Public - State of Maryland  
Worcester County  
My Commission Expires Feb 17, 2026

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_  
I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public  
My Commission expires:

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_  
I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public  
My Commission expires:

List of Liquor Licenses Held By Robert Ciprietti

NY- Luciano's Restaurant, Brooklyn, NY 2002-2020

MD- Touch of Italy, Ocean City, MD 2014-2025

DE- Touch of Italy Lewes, DE 2011-current

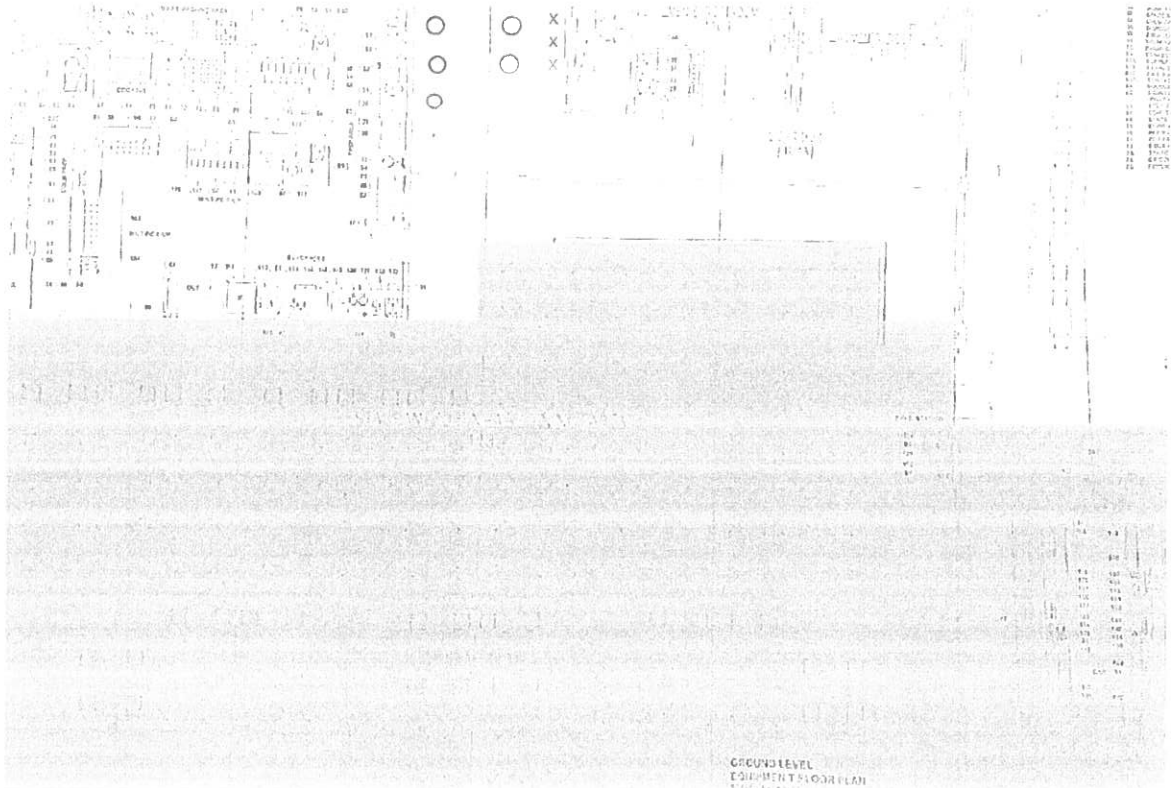
DE- Touch of Italy, Rehoboth Beach, DE 2013-current

DE- Touch of Italy, Wilmington, DE 2017-2022

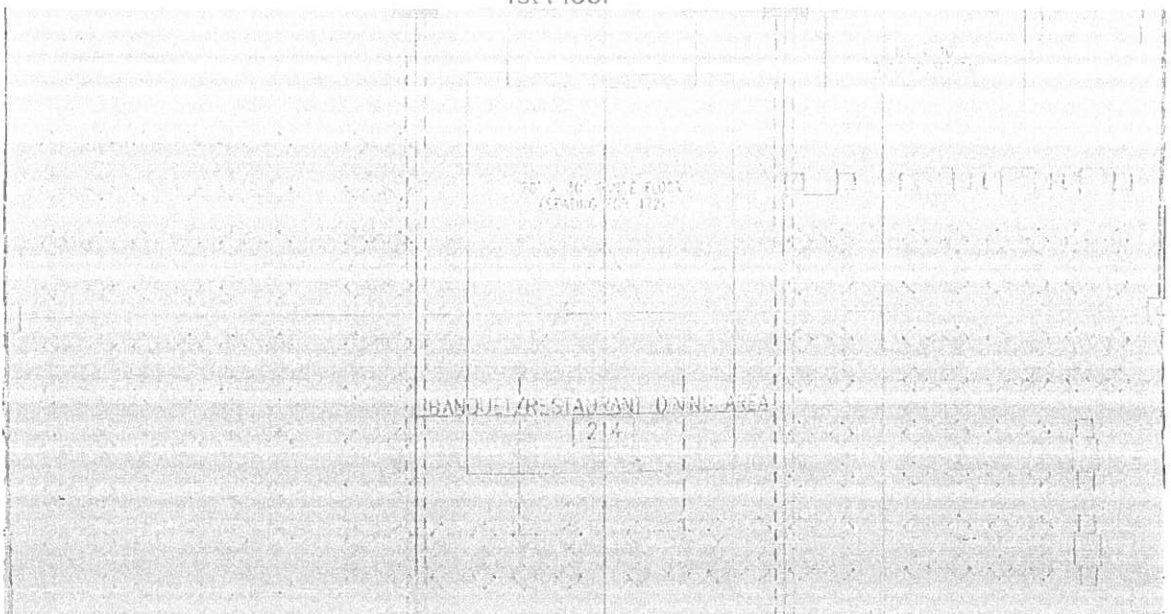
DE- Royal Prime, Dover, DE 2021-current

# Yacht Club Serving area within the building

- 1) 30 seats a main bar
- 2) 8 seats and 10 seats at high tops at entryway bar
- 3) 140 seats at table inside
- 4) 60 seats at tables on the covered veranda



## 1st Floor

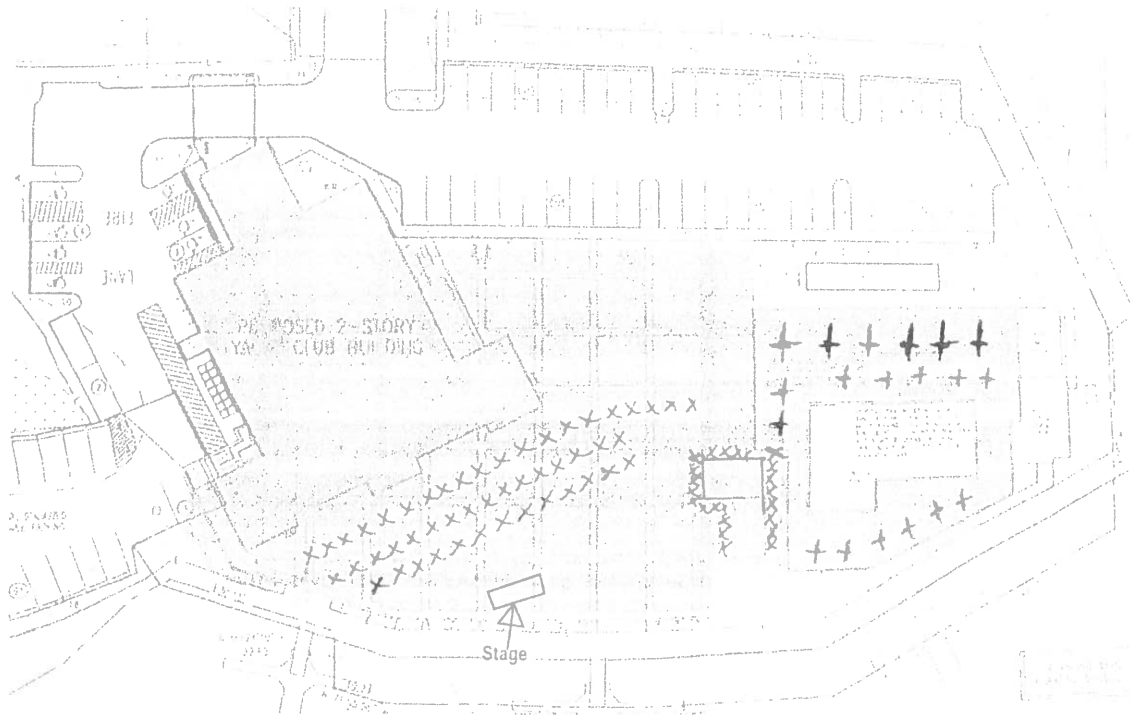


## 2nd Floor

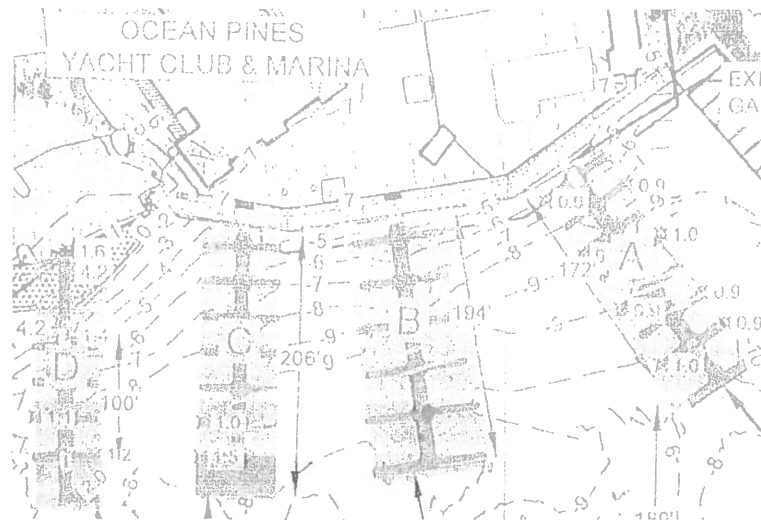
- 1) 20 Seating at bar
- 2a) seating for 172 at tables if a dance floor
- 2b) seating for 214 at tables w/o dance floor



# Yacht Club outside service areas



- 1) 24 seats at Tiki B
- 2) 76 seats on pool deck
- 3) 50+ seats on patio



I/We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners, Worcester County, its duly authorized agents and employees, any peace officer of Worcester County, to inspect without warrant, the premises upon which said business is to be conducted, and any and all parts of the building in which said business is to be conducted, at all times and all hours, and further state that I/We have personally obtained the signatures of the ten citizens to the certificate which is a part hereof.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof shall be subject to the penalties provided by the law for that crime.)

Give name(s) and address(es) of officers:

<u>Robert Cipriotti</u> (name)	<u>Manager - Manager</u> (title)	<u>38944 Cypress Lake Dr, #56167</u> <u>Bethany Bk, DE 19930</u> (residence)
<u>Wayne A. Hartman</u> (name)	<u>Member (resident agent)</u> (title)	<u>60 Hingham Ln, Ocean Pines, MD 21841</u> (residence)

If applicant is a Corporation, President or Vice-President must sign:

All Applicants must sign:

1. <u>Robert Cipriotti</u> (Signature of applicant)
2. <u>Wayne A. Hartman</u> (Signature of applicant)
3. _____ (Signature of applicant)

STATE OF Maryland COUNTY OF Worcester TO WIT:  
THIS CERTIFIES, That on the 16 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Robert Cipriotti

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/her knowledge and belief.

WITNESS my hand and notarial seal.

Debbie Donahue  
NOTARY PUBLIC  
DEBBIE DONAHUE  
Notary Public - State of Maryland  
Worcester County  
My Commission Expires Feb 17, 2026

(Seal)

STATE OF Maryland COUNTY OF Worcester TO WIT:  
THIS CERTIFIES, That on the 16 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Wayne A Hartman

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/her knowledge and belief.

WITNESS my hand and notarial seal.

Debbie Donahue  
NOTARY PUBLIC  
DEBBIE DONAHUE  
Notary Public - State of Maryland  
Worcester County  
My Commission Expires Feb 17, 2026

(Seal)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:  
THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of \_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/her knowledge and belief.

WITNESS my hand and notarial seal.

\_\_\_\_\_  
NOTARY PUBLIC

(Seal)

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF MARYLAND

I/WE HEREBY CERTIFY, That I am/we the owner(s) of record of the property known as

OCEAN PINES INTERNATIONAL YACHT CLUB, INC.

named in the foregoing application made to the Board of License Commissioners under the Alcoholic Beverage Laws of Maryland; that I/we assent to the granting of the license applied for; that I/we hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Worcester County, its duly authorized agents and employees, and any peace officer of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

WITNESS, on my hand(s) and seal(s) this 14th day of February 2025

John LaRocca

(seal)

(seal)

(seal)

(seal)

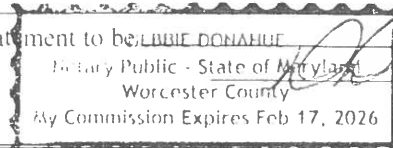
STATE OF Maryland COUNTY OF Worcester TO WIT

THIS CERTIFIES, That on the 14 day of February, 2025, before me, the subscriber, a Notary Public of the State of Maryland, personally appeared John LaRocca

and acknowledged the execution of the foregoing statement to be LIBBIE DONAHUE act

WITNESS my hand and notarial seal.

(Seal)



NOTARY PUBLIC

(The following certificates must be signed by at least ten persons.)

SIGNATURES MUST BE OBTAINED BY THE RESIDENT, IF APPLICATION IS FOR CORPORATION.

We the undersigned reputable citizens (real estate owners, registered voters with Worcester County and reside within the tax district in which the business covered by the foregoing application is to be conducted) certify that each of us has been personally acquainted with the applicant for the length of time indicated after our respective names; that we have examined the application of the applicant and that we have good reason to believe that all of the statements contained in said application are true, and that we are familiar with the premises upon which the proposed business is to be conducted and we believe such premises are suitable for the conduct of the business of retail dealer in alcoholic beverages, and that we are of the opinion that the applicant is a suitable person to obtain the license applied for:

(Print name above signature)

Address

Voting Residence

Length of time acquainted with applicant(s). If not acquainted prior to application filing, indicate "Just Met." (All three blanks must be filled in.)

Kenneth A. Kennedy  
Margaret Kennedy

Tax District 7 App. 1 20 yrs App. 2 Just met App. 3  
Address of property owned 45 Camille Circle

Robert Hillgrass

Tax District 3 App. 1 1 year App. 2 Just met App. 3  
Address of property owned 45 Camille Circle Ocean Pines MD

Robert Hillgrass  
Joseph R. Schmitt

Tax District 3 App. 1 24 yrs App. 2 Just met App. 3  
Address of property owned 329 Piedmont Ct. Ocean Pines, MD

Bob Thompson

Tax District 3 App. 1 10 yrs App. 2 1 App. 3  
Address of property owned 75 Battersea Rd Ocean Pines MD

William C. Caran

Tax District 3 App. 1 24 yrs App. 2 Just met App. 3  
Address of property owned 203 Charleston Rd Ocean Pines MD 21811

Joseph Pino

Tax District 3 App. 1 24 yrs App. 2 6 App. 3  
Address of property owned 329 Piedmont Ct. Ocean Pines MD 21811

Grant Healey

Tax District 3 App. 1 10 App. 2 Just met App. 3  
Address of property owned 463 Ocean Pines Ocean Pines MD 21811

Robert Healey

Tax District 3 App. 1 8 years App. 2 Just met App. 3  
Address of property owned 1443 Ocean Park Way Ocean Pines MD 21811

Stephen C. Bennington

Tax District 3 App. 1 15 years App. 2 Just met App. 3  
Address of property owned 108 Robin Hood Trail Ocean Pines MD

Mary Jaeger

Tax District 3 App. 1 20 yrs App. 2 1 App. 3  
Address of property owned 403 Charlotte Ct Ocean Pines MD 21811

William J. Cravater

Tax District 3 App. 1 10 years App. 2 Just met App. 3  
Address of property owned 59 Sandy Hook Rd Ocean Pines

William J. Michel

Tax District 3 App. 1 22 years App. 2 Just met App. 3  
Address of property owned 123 Pinehurst Rd Ocean Pines, MD 21811

Amelia A. Mike  
Amelia A. Mike

Names and addresses of signers must be printed or typewritten above signatures.

**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

***REPORT OF INVESTIGATION***

*Type: Transfer Application*

*Date: March 7, 2025*

*License No: 49*

*Class: B*

*Type: Beer-Wine-Liquor*

**APPLICANT(S):**

**1. Robert Ciprietti**

**3.**

**2. Wayne Albert Hartman**

**4.**

*TRADE NAME: Ocean Pines Golf and Country Club*

*Corp: Farindola,OP,LLC*

*LOCATION: 100 Clubhouse Drive , Ocean Pines*

No off sale
-------------

Mr. Ciprietti holds 98% of the LLC, and Mr. Hartman, the Resident Agent, holds 2% and obtained the signatures on the application. If the transfer application is approved, the applicants request this license to be designated as Multiple License #2. This location has been open since 1982 with no violations.

Mr. Grayson will manage the property, which will be a restaurant bar. There will be about 2,800 SF of inside space, including the kitchen, and 1,200 SF of outside patio space. The inside will seat 84 seats at tables, and the patio will seat 48 seats at tables. One bar on the inside that seats 21 along with 2 rolling bars that can be moved around inside or outside. Additionally, there are 2 beer carts that will cater to the guests that drive around on the property grounds. Mr. Ciprietti requests that the current restrictions remain in place but would like to make some minor changes.

Mr. Ciprietti requests a DJ or a music technician (7) days a week inside or outside. Background music (7) days a week outside on the patio with 4 speakers pointing inward on the patio. Only one form of entertainment would take place at a time.

Hours of operation will be 6:00 AM-10:00 PM inside (7) day a week seasonal, 3 days a week in the off season 11:00 AM-7:00 PM. The outside will always be closed by 10: 00 PM. There will be about 12 employes, fewer in the off season. All servers, bartenders and managers would be TAM/TIPS trained.

Ian W. Cameron  
Liquor License Inspector

April R. Payne  
Liquor License Administrator

302-278-7090

Business Phone No.

Multiple License # 2

WORCESTER COUNTY

Received 3-19-05

## STATE OF MARYLAND

## ALCOHOLIC BEVERAGES LAW

APPLICATION FOR A CLASS "B" 3, W, L 7 day LICENSE

"TRANSFER APPLICATION"

For the use of:

(Check one) An Individual ☐ Partnership ☐ Corporation ☐ Unincorporated Association ☐ Limited Liability Co. ☒

To the Board of License Commissioners Worcester County.

Date 2/10, 2005

Application is made by the undersigned under the provisions of Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages," for the above license, and the applicant(s) submit(s) and certify(ies) to the following information required by the Article.

Fill in all the blanks:

Applications will NOT be accepted without all Applicant information, including middle name.

1. Applicant(s)

(1) Full Name Robert Cipriotti Robert Residence 38944 Cypress Lake Cir, #56167, Bethesda, MD 20814

Date of Birth [REDACTED] Period of Residence 10+ year in Wor. County 2

Place of Birth Bronx, NY Naturalized at Year

Telephone Number 914-900-0175 Race CAUCASIAN Sex M

(2) Full Name Wayne Albert Hartman

Date of Birth [REDACTED] Residence 60 Hingham Ln, Ocean Pines, MD 21811

Place of Birth Baltimore Period of Residence 1 yr in Wor. County 20+ years

Telephone Number 410-726-2431 Naturalized at Year

Race CAUCASIAN Sex M

(3) Full Name [REDACTED] Residence [REDACTED]

Date of Birth [REDACTED] Period of Residence [REDACTED] in Wor. County [REDACTED]

Place of Birth [REDACTED] Naturalized at Year

Telephone Number 302-278-7090 Race [REDACTED] Sex [REDACTED]

2. The applicant(s) is/are citizen(s) of the United States, and (if the application is for an individual or a partnership), has/have been for two years next preceding the filing of this application (a) resident(s) of Worcester County. The applicant(s) (if applying as a qualifying individual for a corporation) is a registered voter and taxpayer in Worcester County and shall also have resided there for at least two years prior to the filing of this application. The applicant(s) thus qualified is/are: 1( ) 2(X) 3( ) (Check number to correspond with name(s) listed above.)

3. State the Retail Sales Tax No.: [REDACTED] Farindola OP, LLC

4. If a corporation, state corporate name and trade name, if any: FARMOLA OP, LLC

If other than a corporation, state trade name to be used: Clubhouse Grille at Ocean Pines

5. Address of place to be licensed (Give street number or accurate description): 100 Clubhouse Dr, Ocean Pines, MD 21811

A. Nearest intersecting street: Ocean Pines Approximate distance: 1500 feet

B. Tax District where located: Bad Is this an application for a new license? No

C. Is this a transfer from a present licensee? Yes From Whom? Ocean Pines Golf &amp; Country Club, Inc.

to Farindola OP, LLC License # 49

(This Board must be furnished releases by the State Comptroller's Office approving the bulk sales transfer and clearing all tax accounts before any license will be transferred.)

D. Are you represented by an attorney? Whom: Hugh Cropper Tel. No.: 410-213-2687

Address: 9927 Stephen Decatur Hwy, Ste. F-12, Ocean City, MD 21842

- E. Describe premises to be licensed: Ocean Pines Clubhouse Bar & Grille
- F. If this is a new or proposed building or a building not previously licensed, a copy of the bona fide plans must be filed with this application or presented at the time of the hearing.
6. State name and address of owner of record of premises: Ocean Pines Association, Inc.  
239 Ocean Pines, Ocean Pines, MD 21811
7. Have you ever been:
- A. Convicted of a misdemeanor? 1 No 2 No 3 \_\_\_\_\_
- B. Adjudged guilty of violating alcoholic beverage laws by a court, administrative agency or Board of License Commissioners? 1 No 2 No 3 \_\_\_\_\_
- C. Adjudged guilty of violating gambling laws? 1 No 2 No 3 \_\_\_\_\_
- D. Adjudged guilty of any offense against the laws of the United States? 1 No 2 No 3 \_\_\_\_\_
- If so, when and where: \_\_\_\_\_
- E. Convicted of a felony or offered a plea of nolo contendere to a felony indictment and charge was subsequently accepted by a court? 1 No 2 No 3 \_\_\_\_\_
8. A. Have you ever held a license for the sale of alcoholic beverages? 1 YES 2 No 3 \_\_\_\_\_
- If yes, state when and where: NY - Luciano's Restaurant, Brooklyn, NY  
MD - FARMOLA OC, LLC dba Touch of Italy, Ocean City, MD
- B. If so, has such license been suspended or revoked? 1 No 2 No 3 \_\_\_\_\_
- If answer is yes, give full details: \_\_\_\_\_
- C. If so, were you ever found in violation of any alcoholic beverage law? 1 No 2 No 3 \_\_\_\_\_
9. Have you ever applied for an alcoholic beverage license in the State of Maryland? 1 YES 2 No 3 \_\_\_\_\_
- If answer is yes, state when and where: FARMOLA OC, LLC dba Touch of Italy, Ocean City, MD
10. What financial interests do you have in the business to be conducted under this license? 1 98% 2 2% 3 \_\_\_\_\_
11. Are you financially interested in any other alcoholic beverage business for which a license has been applied for, granted or issued? 1 Yes, see attached 1/5/1 2 No 3 \_\_\_\_\_
- If so, give details: \_\_\_\_\_
12. Is your wife or husband, as the case may be, a licensee and does her or she have any financial interest in any other alcoholic beverage business in the State of Maryland? 1 No 2 No 3 \_\_\_\_\_
- If so, give details: \_\_\_\_\_
13. Is there now, or will there be, during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder? 1 No 2 No 3 \_\_\_\_\_
- If so, state name, address, telephone no., age, percent of interest and state whether or not an interest is held in any other alcoholic beverage license: \_\_\_\_\_
14. A. Does any manufacturer, brewer, distiller or wholesaler have any financial interest in the premises or business to be conducted under this license? No
- B. Will any such interest be hereafter conveyed or granted to any such manufacturer, brewer, distiller or wholesaler? No
15. Do you now have, or will you hereafter have, any indebtedness or other financial indebtedness, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverage? No
16. A. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes
- B. If granted a license, will you agree to keep current all state and local tax obligations including, but not limited to, state sales and use tax, withholding tax and admissions tax? YES

I/We consent to the Board of License Commissioners being furnished with a copy of my/our arrest record, if any, by any state, local, or federal law enforcement or judicial agency. App. #1 YES App. #2 YES App. #3 \_\_\_\_\_

# LIMITED LIABILITY MEMBERSHIP AFFIDAVIT

Bethany Beach, DE

Robert Ciprietti, 38944 Cypress Lake Cn, #56/57, 19930  
 Name Residence Address Zip Code

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail.

10+ years 914-906-0175 [REDACTED]  
 Period of Residence Home Telephone No. Office Telephone No.  
[REDACTED] M Brook, NY [REDACTED]  
 Date of Birth Sex Place of Birth Social Security No.

Naturalized Yes ( ) No ( )  
 Where Naturalized Petition No.

Farmville, LLC dba Touch of Italy  
 Place of Employment  
P.O. Box 307, Lewes, DE 19958  
 Address of Employer Length of Employment  
98%  
98%

1b. What is your ownership interest in LLC?

2b. What is your capital contribution to LLC?

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail.

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail.

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location? YES

NY - Brooklyn, NY - Lucinda's Restaurant  
MD - Farmville OC, LLC dba Touch of Italy, OC, MD  
OK - Touch of Italy, Rehoboth Beach, DE / Touch of Italy, Lewes, DE  
Touch of Italy, Wilmington, DE / Royal Pines, Dover, DE

6. As a stockholder, how much time will you spend on the licensed premises?

7. What profit will you derive in proportion to the percentage of ownership?

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes ( ) No (X)

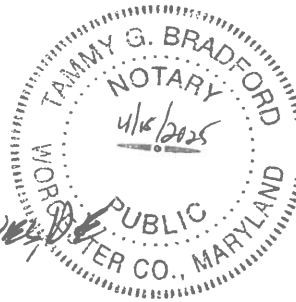
PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Robert Ciprietti  
 Signature

Manoyn Minter  
 Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Robert Ciprietti In said County and State on this 10th day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 10th day of February, 2025



Tammy G. Bradford  
 Notary Public

My Commission Expires: 4/18/2025

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

Wayne Albert Hartman 60 Hingham LA 21811  
 Name Residence Address Zip Code  
1 year 410-726-2431  
 Period of Residence Home Telephone No. Office Telephone No.  
 [Redacted] M Baltimore [Redacted]  
 Date of Birth Sex Place of Birth Social Security No.

Naturalized Yes ( ) No ( ) \_\_\_\_\_  
 Where Naturalized Petition No.

Self / State of Maryland  
 Place of Employment

Self / 6 Bladen St Room 213 20+ years / 6 years  
 Address of Employer Length of Employment  
ANNAPOLIS, MD 21401

1b. What is your ownership interest in LLC? \_\_\_\_\_  
 Percent of Ownership

2b. What is your capital contribution to LLC? \$12.00

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No ( ☒ ) If yes, please detail. \_\_\_\_\_

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No ( ☒ ) If yes, please detail. \_\_\_\_\_

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

No

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No ( ☒ ) If yes, please detail. \_\_\_\_\_

6. As a stockholder, how much time will you spend on the licensed premises?

2 hours / week

7. What profit will you derive in proportion to the percentage of ownership?

2%

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes ( ☒ ) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes ( ☒ ) No ( )

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Wayne A. Hartman Member  
 Signature Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Wayne A. Hartman In said County and State on this 10th day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 10th day of February, 2025



Tammy G. Bradford  
 Notary Public

My Commission Expires: 4/18/2025



WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
TRANSFER OF LOCATION OR ASSIGNMENT OF LICENSE

The purpose of this application is to:

(a) transfer LOCATION from \_\_\_\_\_

To \_\_\_\_\_

(b) transfer or ASSIGN from Ocean Pines Golf & Country Club, Inc.

To FACUNDOLA OP, LLC

I/We, the Transferors, do hereby make oath in due form of law that I/we have fully complied with all provisions of law and all regulations during the time that my/our license for the above-named premises has been in effect and that no indictment or complaint is pending against me/us or any of my/our employees in any court of this State or before the Board of License Commissioners, and that I/we do hereby consent to the transfer (or cancellation) of said license to be the above-named Transferee.

AS WITNESS my/our hand(s) and seal(s) this 14th day of February, 2025

John Latham Jr. (SEAL)

\_\_\_\_\_  
(SEAL)

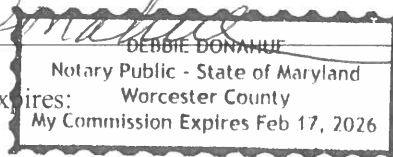
\_\_\_\_\_  
(SEAL)

STATE OF Maryland, COUNTY OF Worcester  
I hereby certify that on this 14 day of February, 2025, personally appeared  
John Latham Jr. and made oath in due form of law  
that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

Debbie Donahue  
Notary Public

My Commission expires:



STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_  
I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared  
\_\_\_\_\_ and made oath in due form of law  
that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public

My Commission expires:

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_  
I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared  
\_\_\_\_\_ and made oath in due form of law  
that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public

My Commission expires:

**List of Liquor Licenses Held By Robert Ciprietti**

NY- Luciano's Restaurant, Brooklyn, NY 2002-2020

MD- Touch of Italy, Ocean City, MD 2014-2025

DE- Touch of Italy Lewes, DE 2011-current

DE- Touch of Italy, Rehoboth Beach, DE 2013-current

DE- Touch of Italy, Wilmington, DE 2017-2022

DE- Royal Prime, Dover, DE 2021-current

[illegible]

In main DR, 21 seats at bar (2 are ADA), 84 seats at tables (3 are ADA)  
In other DR, 96 seats at tables. On patio, 48 seats at tables.



I/We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners of Worcester County, its duly authorized agents and employees, any peace officer of Worcester County, to inspect without warrant, the premises upon which said business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours, and further state that I/We have personally obtained the signatures of the ten citizens to the certificate which is a part hereof.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof shall be subject to the penalties provided by the law for that crime.)

Give name(s) and address(es) of officers:

Robert Ciprietti, 38944 Cymalake Ln, Bethany, DE 19930 Manager member 60 Haystack Ocean Pkwy 2811  
(name) (title) (residence)  
Wayne A. Hartman  
(name) (title) (residence)

If applicant is a Corporation, President or Vice-President must sign:

All Applicants must sign:

1. Robert Ciprietti  
(Signature of applicant)  
2. Wayne A. Hartman  
(Signature of applicant)  
3. \_\_\_\_\_  
(Signature of applicant)

STATE OF Maryland COUNTY OF Worcester TO WIT:  
THIS CERTIFIES, That on the 10<sup>th</sup> day of February, 2025, before the subscriber, a Notary Public of the State of  
\_\_\_\_\_ personally appeared Robert Ciprietti

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.  
WITNESS my hand and notarial seal.  
(Seal) Jammy A Bradford  
NOTARY PUBLIC My Comm Exp 4/15/2025

STATE OF Maryland COUNTY OF Worcester TO WIT:  
THIS CERTIFIES, That on the 10<sup>th</sup> day of February, 2025, before the subscriber, a Notary Public of the State of  
\_\_\_\_\_ personally appeared Wayne A. Hartman

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.  
WITNESS my hand and notarial seal.  
(Seal) Jammy A Bradford  
NOTARY PUBLIC My Comm Exp 4/15/2025

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:  
THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of  
\_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.  
WITNESS my hand and notarial seal.  
(Seal) \_\_\_\_\_  
NOTARY PUBLIC

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF MARYLAND.

I/WE HEREBY CERTIFY That I am/we the owner(s) of record of the property known as \_\_\_\_\_

Ocean Pines Golf & Country Club, Inc.  
named in the foregoing application made to the Board of License Commissioners under the Alcoholic Beverage Laws of Maryland; that I/we assent to the granting of the license applied for; that I/we hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Worcester County, its duly authorized agents and employees, and any peace officer of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

WITNESS our/my hand(s) and seal(s) this 14th day of February 2025

(seal)

(seal)

(seal)

(seal)

STATE OF Maryland COUNTY OF Worcester TO WIT:

THIS CERTIFIES, That on the 14 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared John Latham, Jr.

and acknowledged the execution of the foregoing statement to be DEBBIE DONAHUE act.

WITNESS my hand and notarial seal.

(Seal)

Notary Public - State of Maryland  
Worcester County  
My Commission Expires Feb 17, 2026

NOTARY PUBLIC

(The following certificates must be signed by at least ten persons.)

SIGNATURES MUST BE OBTAINED BY THE RESIDENT, IF APPLICATION IS FOR CORPORATION.

We the undersigned reputable citizens (real estate owners, registered voters with Worcester County and reside within the tax district in which the business covered by the foregoing application is to be conducted) certify that each of us has been personally acquainted with the applicant for the length of time indicated after our respective names; that we have examined the application of the applicant and that we have good reason to believe that all of the statements contained in said application are true, and that we are familiar with the premises upon which the proposed business is to be conducted and we believe such premises are suitable for the conduct of the business of retail dealer in alcoholic beverages, and that we are of the opinion that the applicant is a suitable person to obtain the license applied for:

(Print name above signature)

Address  
Voting Residence

Length of time acquainted with applicant(s). If not acquainted prior to application filing, indicate "Just Met." (All three blanks must be filled in.)

Name	Address	Voting Residence	Length of time acquainted with applicant(s)
Kenneth A Kennedy			
Maurer Kennedy			
Robert Hillerass			
Joseph Schanno			
Bob Thompson			
Howard Caplan			
Joseph Pine			
Grant Helver SR			
Stephen C Bennington			
Mary Joeger			
William T. Gabeler			
Amelia A. Mike			
Amelia A. Mike			

Tax District	Address of property owned	App. 1	App. 2	App. 3
3	45 Camelot Circle	20 yrs	Just met	
3	45 Camelot Circle, Ocean Pines MD	14 yrs	Just met	
3	329 Pigment Ct. Ocean Pines MD	24 yr	Just met	
3	75 Batterse RD Ocean Pines MD	10 yrs	1	
3	202 CHARLESTON RD Ocean Pines MD 21811	24 yrs	Just met	
3	335 PIEDMONT CT. OCEAN PINES, MD. 21811	24 yrs	6	
3	1463 Ocean Pines Ocean Pines MD 21811	10	Just met	
3 1	1443 OCEAN PARKWAY, OCEAN PINES MD 21811	8 yrs	Just met	
3	108 ROBIN HOOD TRAIL OCEAN PINES	15 YEARS	Just met	
3	403 Charlotte Ct Ocean Pines MD 21811	20 yrs	1	
3	59 Sandy Hook Rd Ocean Pines 21811	10 yrs	Just met	
3	128 Pinehurst Rd Ocean Pines 21811	22 years	Just met	

Names and addresses of signers must be printed or typewritten above signatures.



**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

***REPORT OF INVESTIGATION***

*Type: Transfer Application*

*Date: March 7, 2025*

*License No: 516*

*Class: C*

*Type: Beer-Wine-Liquor*

**APPLICANT(S):**

**1. Robert Ciprietti**

**2. Wayne Albert Hartman**

**3.**

**4.**

*TRADE NAME: Ocean Pines Beach Cub*

*CORP: Farindola, OP, LLC*

*LOCATION: 4905 Atlantic Avenue, Ocean City*

Restrictions: Inside live entertainment permitted with amplification with a maximum of five pieces from 12:00 PM until 2:00 AM, Outside live entertainment permitted with amplification with a maximum of five pieces from 12:00 PM until 7:00 PM, No off sale.

Mr. Ciprietti holds 98% of the LLC, and Mr. Hartman, the Resident Agent, holds 2% and obtained the signatures on the application. If the transfer application is approved, the applicants request this license to be designated as Multiple License #3. This location has been open since 1996 with one violation in 2013.

Ms. Lynda Huettner will be the manager of the property, which will be a restaurant and bar. There will be a total of 4,600 SF of inside space, including the kitchen. On the first floor there are 10 tables with 40 seats ,1 bar with 15 seats and 16 additional seats outside on the deck. On the second floor there is an open area for parties with a bar that can seat 8. The second floor is also 2,300 SF. Mr. Ciprietti requests that the current restrictions remain in place but would like to make some minor changes.

As a point of clarification, the property currently has two volleyball areas and two sets of cornhole games, and they would like to keep these games in place.

The Ocean Pines Beach House is only open from Memorial Day till Labor Day (seasonal). There will be about 15-20 (seasonal) employees. All servers, bartenders and managers would be TAM/TIPS trained.

Ian W. Cameron  
Liquor License Inspector

April R. Payne  
Liquor License Administrator

302-278-7090

Business Phone No.

Multiple License #3

WORCESTER COUNTY

## STATE OF MARYLAND

## ALCOHOLIC BEVERAGES LAW

APPLICATION FOR A CLASS 15, W, L 7day LICENSE"TRANSFER APPLICATION"

For the use of:

(Check one) An Individual ☐ Partnership ☐ Corporation ☐ Unincorporated Association ☐ Limited Liability Co. ☒

To the Board of License Commissioners Worcester County.

Date 2/10, 20 25

Application is made by the undersigned under the provisions of Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages," for the above license, and the applicant(s) submit(s) and certify(ies) to the following information required by the Article.

Fill in all the blanks:

Applications will NOT be accepted without all Applicant information, including middle name.

1. Applicant(s)

(1) Full Name Robert Cipriotti Residence 38944 Cypress Lake #5667, Bethesda, MD 20814Date of Birth [REDACTED] Period of Residence 10 years in Wor. County 6Place of Birth BRONX NY Naturalized at \_\_\_\_\_ Year \_\_\_\_\_Telephone Number 914-906-0175 Race CAUCASIAN Sex M(2) Full Name Wayne A. Hartman Residence 60 Hingham Ln Ocean Pines, MD 21842Date of Birth [REDACTED] Period of Residence 1 year in Wor. County 20 yearsPlace of Birth Baltimore, MD Naturalized at \_\_\_\_\_ Year \_\_\_\_\_Telephone Number 410-726-2431 Race CAUCASIAN Sex M

(3) Full Name \_\_\_\_\_ Residence \_\_\_\_\_

Date of Birth \_\_\_\_\_ Period of Residence \_\_\_\_\_ in Wor. County \_\_\_\_\_

Place of Birth \_\_\_\_\_ Naturalized at \_\_\_\_\_ Year \_\_\_\_\_

Telephone Number \*Rick Lawrence - Administrator Race \_\_\_\_\_ Sex \_\_\_\_\_

2. The applicant(s) is/are citizen(s) of the United States, and (if the application is for an individual or a partnership), has/have been for two years next preceding the filing of this application (a) resident(s) of Worcester County. The applicant(s) (if applying as a qualifying individual for a corporation) is a registered voter and taxpayer in Worcester County and shall also have resided there for at least two years prior to the filing of this application. The applicant(s) thus qualified is/are: 1( ) 2(X) 3( ) (Check number to correspond with name(s) listed above.)

3. State the Retail Sales Tax No. Farindola OP, LLC4. If a corporation, state corporate name and trade name, if any: FARINDOLA OP, LLCIf other than a corporation, state trade name to be used: The Beach Club5. Address of place to be licensed (Give street number or accurate description): 4905 Atlantic Ave. Ocean City, MD 21842A. Nearest intersecting street: Coastal Hwy. Approximate distance: 350 feetB. Tax District where located: 10th Is this an application for a new license? NoC. Is this a transfer from a present licensee? Yes From Whom? Ocean Pines Beach Club, Inc.to Farindola OP, LLC License # 516

(This Board must be furnished releases by the State Comptroller's Office approving the bulk sales transfer and clearing all tax accounts before any license will be transferred.)

D. Are you represented by an attorney? Whom: Hugh Cropper Tel. No.: 410-213-2681Address: 9927 Stephen Decatur Hwy., Ste F12, Ocean City, MD 21842



- E. Describe premises to be licensed: Ocean Pines Wooded Club Bar & Restaurant, deck, pool deck
- F. If this is a new or proposed building or a building not previously licensed, a copy of the bona fide plans must be filed with this application or presented at the time of the hearing.
6. State name and address of owner of record of premises: Ocean Pines Association, Inc.  
239 Ocean Pkwy, Ocean Pines, MD 21811
7. Have you ever been:
- A. Convicted of a misdemeanor? 1 No 2 No 3 \_\_\_\_\_
- B. Adjudged guilty of violating alcoholic beverage laws by a court, administrative agency or Board of License Commissioners? 1 No 2 No 3 \_\_\_\_\_
- C. Adjudged guilty of violating gambling laws? 1 No 2 No 3 \_\_\_\_\_
- D. Adjudged guilty of any offense against the laws of the United States? 1 No 2 No 3 \_\_\_\_\_
- If so, when and where: \_\_\_\_\_
- E. Convicted of a felony or offered a plea of nolo contendere to a felony indictment and charge was subsequently accepted by a court? 1 No 2 No 3 \_\_\_\_\_
8. A. Have you ever held a license for the sale of alcoholic beverages? 1 Yes 2 No 3 \_\_\_\_\_
- If yes, state when and where: see attached list
- B. If so, has such license been suspended or revoked? 1 No 2 No 3 \_\_\_\_\_
- If answer is yes, give full details: \_\_\_\_\_
- C. If so, were you ever found in violation of any alcoholic beverage law? 1 No 2 No 3 \_\_\_\_\_
9. Have you ever applied for an alcoholic beverage license in the State of Maryland? 1 Yes 2 No 3 \_\_\_\_\_
- If answer is yes, state when and where: Famindola OC, LLC dba Touch of Italy, Ocean City, MD 21842
10. What financial interests do you have in the business to be conducted under this license? 1 98% 2 2% 3 \_\_\_\_\_
11. Are you financially interested in any other alcoholic beverage business for which a license has been applied for, granted or issued? 1 Yes 2 No 3 \_\_\_\_\_
- If so, give details: see attached list
12. Is your wife or husband, as the case may be, a licensee and does her or she have any financial interest in any other alcoholic beverage business in the State of Maryland? 1 No 2 No 3 \_\_\_\_\_
- If so, give details: \_\_\_\_\_
13. Is there now, or will there be, during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder? 1 No 2 No 3 \_\_\_\_\_
- If so, state name, address, telephone no., age, percent of interest and state whether or not an interest is held in any other alcoholic beverage license: \_\_\_\_\_
14. A. Does any manufacturer, brewer, distiller or wholesaler have any financial interest in the premises or business to be conducted under this license? No
- B. Will any such interest be hereafter conveyed or granted to any such manufacturer, brewer, distiller or wholesaler? No
15. Do you now have, or will you hereafter have, any indebtedness or other financial indebtedness, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverage? No
16. A. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage? Yes
- B. If granted a license, will you agree to keep current all state and local tax obligations including, but not limited to, state sales and use tax, withholding tax and admissions tax? Yes
- I/We consent to the Board of License Commissioners being furnished with a copy of my/our arrest record, if any, by any state, local, or federal law enforcement or judicial agency. App. #1 Yes App. #2 Yes App. #3 \_\_\_\_\_

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

Robert Ciprietti, 38944 Cypress Lake Ct, #16167, Bethesda, MD 20814  
 Name Residence Address Zip Code  
10 + yrs  
 Period of Residence  
914-906-0175  
 Home Telephone No.  
302-278-7090  
 Office Telephone No.  
 [Redacted] M  
 Date of Birth Sex  
Bronx, NY  
 Place of Birth  
 [Redacted]  
 Social Security No.

Naturalized Yes ( ) No ( )  
 Where Naturalized  
Frankola, LLC dba Touch of Italy  
 Place of Employment  
P.O. Box 307, Lewes, DE 19958  
 Address of Employer  
7 yrs  
 Length of Employment

1b. What is your ownership interest in LLC? 98%  
 Percent of Ownership  
 2b. What is your capital contribution to LLC? \$9800

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail.

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail.

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location? YES

NY - Brooklyn, NY - Luciano's Restaurant  
MD - Frankola OC, LLC dba Touch of Italy, O.C. MD  
DE - Touch of Italy Rehoboth, Rehoboth Beach, DE / Touch of Italy, Lewes, Lewes, DE  
Touch of Italy Wilmington, Wilmington DE / Royal Paine, Dover, DE

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail.

6. As a stockholder, how much time will you spend on the licensed premises?

7. What profit will you derive in proportion to the percentage of ownership?

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes ( ) No (X)

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Signature

Office Held in Corporation

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Robert Ciprietti In said County and State on this 16 day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 16 day of February, 2025

Notary Public

My Commission Expires:

DEBBIE DONAHUE  
 Notary Public - State of Maryland  
 Worcester County  
 My Commission Expires Feb 17, 2026

**LIMITED LIABILITY MEMBERSHIP AFFIDAVIT**

Name Wayne A. Hartman Residence Address 60 Hingham Ln., Ocean Pines, MD 21811 Zip Code 21811  
 Period of Residence 1yr Home Telephone No. 410-726-2431 Office Telephone No. \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Sex M Place of Birth Baltimore, MD Social Security No. \_\_\_\_\_

Naturalized Yes ( ) No ( ) \_\_\_\_\_ Where Naturalized \_\_\_\_\_ Petition No. \_\_\_\_\_

Place of Employment SELF/ State of Maryland  
 Address of Employer SELF/ 6 Bladen St. Pkwy, 213 Annapolis, MD 21401 Length of Employment 20<sup>th</sup> Jan/6yrs

1b. What is your ownership interest in LLC? 2% Percent of Ownership  
 2b. What is your capital contribution to LLC? \$200

2. Have you ever been convicted of a felony, or have you been adjudged guilty of violating the laws governing the sale of any alcoholic beverages or for the prevention of gambling in the State of Maryland or adjudged guilty of any offense against the United States laws?

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

3. State whether you have had a license for the sale of alcoholic beverages denied or revoked.

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

4. Have you ever held a license for the sale of alcoholic beverages and if so in what State and what location?

No

5. Are you financially interested in any other place of business that has an alcoholic beverage license in the State of Maryland?

Yes ( ) No (X) If yes, please detail. \_\_\_\_\_

6. As a stockholder, how much time will you spend on the licensed premises?

2 hrs/week

7. What profit will you derive in proportion to the percentage of ownership?

2%

8. As a stockholder, have you read the Rules and Regulations of the Board?

Yes (X) No ( )

9. If you are a qualified Resident Agent, are you a Worcester County, Maryland resident?

Yes (X) No ( )

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS / CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license. (Inclusive of managerial agreements and/or sales contracts.)

Signature Wayne A. Hartman

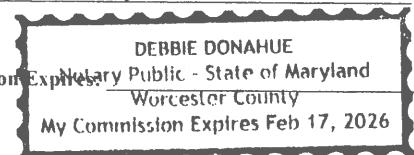
Office Held in Corporation Member (Resident Agent)

I HEREBY CERTIFY THAT BEFORE ME, a Notary Public in and for the State of Maryland, County of Worcester, personally appeared Wayne A. Hartman In said County and State on this 16 day of February, 2025, and made oath in due form of law that the matters and facts in the foregoing Affidavit are true and that they would in fact comply with all statements made therein.

WITNESS my hand and official Seal this 16 day of February, 2025

Notary Public Debbie Donahue

My Commission Expires \_\_\_\_\_



WORCESTER COUNTY BOARD OF LICENSE COMMISSIONERS  
TRANSFER OF LOCATION OR ASSIGNMENT OF LICENSE

The purpose of this application is to:

(a) transfer LOCATION from \_\_\_\_\_

To \_\_\_\_\_

(b) transfer or ASSIGN from OCEAN PINES BEACH CLUB, INC.

To FARINDOLA OP, LLC

I/We, the Transferors, do hereby make oath in due form of law that law that I/we have fully complied with all provisions of law and all regulations during the time that my/our license for the above-named premises has been in effect and that no indictment or complaint is pending against me/us or any of my/our employees in any court of this State or before the Board of License Commissioners, and that I/we do hereby consent to the transfer (or cancellation) of said license to be the above-named Transferee.

AS WITNESS my/our hand(s) and seal(s) this 14th day of February, 2025

John Latham Jr. (SEAL)

\_\_\_\_\_(SEAL)

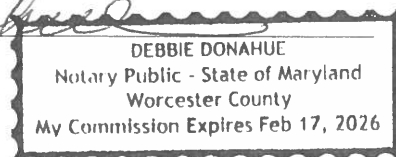
\_\_\_\_\_(SEAL)

STATE OF Maryland, COUNTY OF Worcester

I hereby certify that on this 14 day of February, 2025, personally appeared John Latham Jr. and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

Debbie Donahue  
Notary Public  
My Commission expires:



STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public  
My Commission expires:

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ and made oath in due form of law that the above statement is his/her act/deed.

AS WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Notary Public  
My Commission expires:

**List of Liquor Licenses Held By Robert Ciprietti**

NY- Luciano's Restaurant, Brooklyn, NY 2002-2020

MD- Touch of Italy, Ocean City, MD 2014-2025

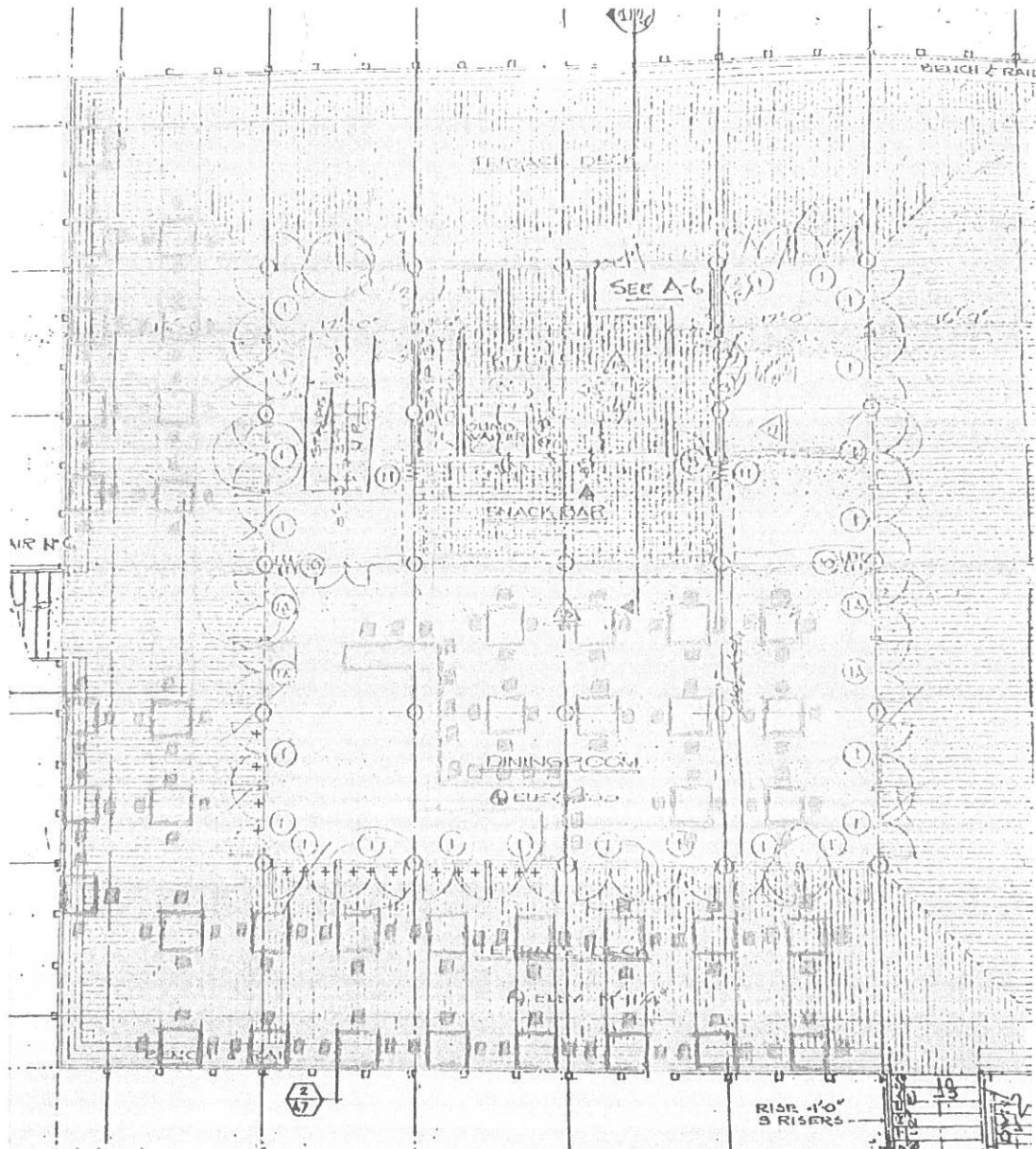
DE- Touch of Italy Lewes, DE 2011-current

DE- Touch of Italy, Rehoboth Beach, DE 2013-current

DE- Touch of Italy, Wilmington, DE 2017-2022

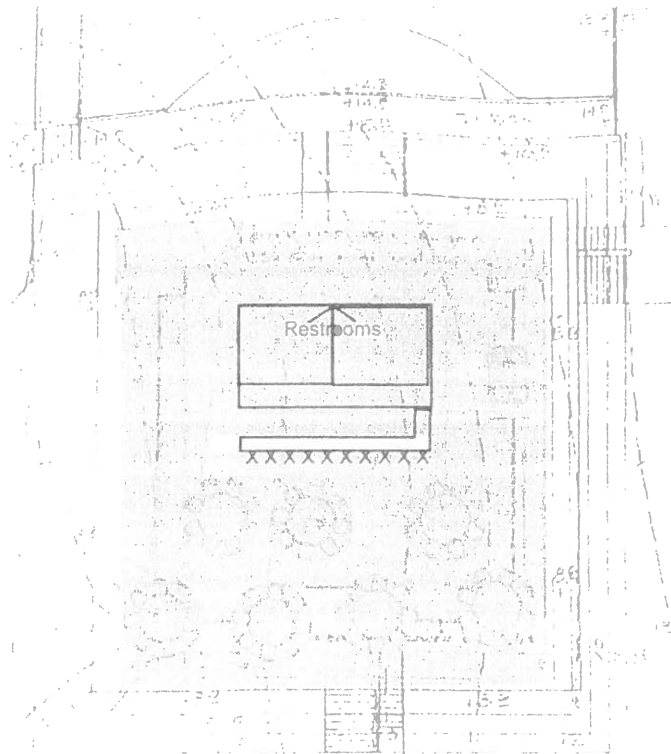
DE- Royal Prime, Dover, DE 2021-current

1st Floor of Beach Club Building Seating Inside & Outside



1st floor:  
 15 at inside bar  
 40 at inside tables  
 16 at outside bar  
 counter  
 100 at tables on dec

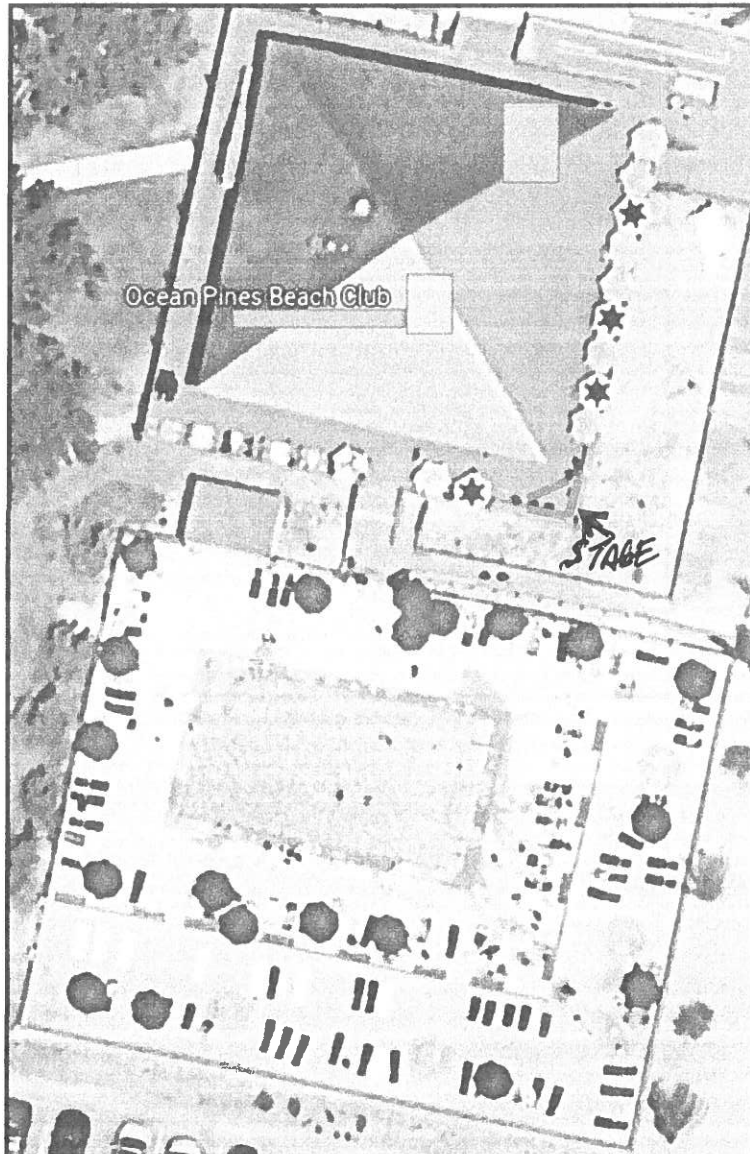
Beach Club 2nd floor serving areas



- 1) 8 bar stools at bar
- 2) seating for 60 at tables

## Beach Club Outdoor Serving Area

- 1) 16 at bar top along window walls facing in
- 2) 8 at counter height at outside railing
- 3) 100 at tables on building deck
- 4) 80 at tables on the pool deck
- 5) 60 at lounge chairs with café tables





I/We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners of Worcester County, its duly authorized agents and employees, any peace officer of Worcester County, to inspect without warrant, the premises upon which said business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours, and further state that I/We have personally obtained the signatures of the ten citizens to the certificate which is a part hereof.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof shall be subject to the penalties provided by the law for that crime.)

Give name(s) and address(es) of officers:

Robert Ciprietti, Manager - member, 38944 Cypress Lake, #56167  
(name) (title) (residence)  
Wayne A. Hartman, member (resident agent), 60 Hingham Ln., Ocean Pines, MD  
(name) (title) (residence) 4/18/11

(name)

(title)

(residence)

If applicant is a Corporation, President or Vice-President must sign:

All Applicants must sign:

1.

Robert Ciprietti  
(Signature of applicant)

2.

Wayne Hartman  
(Signature of applicant)

3.

(Signature of applicant)

STATE OF Maryland COUNTY OF Worcester TO WIT:

THIS CERTIFIES, That on the 16 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Robert Ciprietti

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

(Seal)

Debbie Donahue  
DEBBIE DONAHUE  
Notary Public - State of Maryland  
NOTARY PUBLIC Worcester County  
My Commission Expires Feb 17, 2026

STATE OF Maryland COUNTY OF Worcester TO WIT:

THIS CERTIFIES, That on the 16 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland personally appeared Wayne Hartman

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

(Seal)

Debbie Donahue  
DEBBIE DONAHUE  
Notary Public - State of Maryland  
NOTARY PUBLIC Worcester County  
My Commission Expires Feb 17, 2026

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ TO WIT:

THIS CERTIFIES, That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before the subscriber, a Notary Public of the State of \_\_\_\_\_ personally appeared \_\_\_\_\_

the applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of his/their knowledge and belief.

WITNESS my hand and notarial seal.

(Seal)

NOTARY PUBLIC

STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH  
ALCOHOLIC BEVERAGES LAW OF MARYLAND

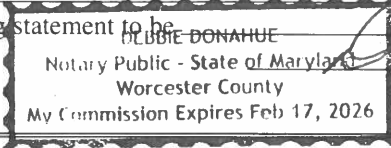
I/WE HEREBY CERTIFY, That I am/we the owner(s) of record of the property known as \_\_\_\_\_

OCEAN PINES BEACH CLUB, INC.  
named in the foregoing application made to the Board of License Commissioners under the Alcoholic Beverage Laws of Maryland; that I/we assent to the granting of the license applied for; that I/we hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Worcester County, its duly authorized agents and employees, and any peace officer of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

WITNESS our/my hand(s) and seal(s) this 14th day of February 2025  
John Latham Jr. (seal) \_\_\_\_\_ (seal)  
\_\_\_\_\_ (seal) \_\_\_\_\_ (seal)

STATE OF Maryland COUNTY OF Worcester TO WIT:  
THIS CERTIFIES, That on the 14 day of February, 2025, before the subscriber, a Notary Public of the State of Maryland, personally appeared John Latham Jr.

and acknowledged the execution of the foregoing statement to be \_\_\_\_\_ act.  
WITNESS my hand and notarial seal.  
(Seal) \_\_\_\_\_



(The following certificates must be signed by at least ten persons.)

SIGNATURES MUST BE OBTAINED BY THE RESIDENT, IF APPLICATION IS FOR CORPORATION.

We the undersigned reputable citizens (real estate owners, registered voters with Worcester County and reside within the tax district in which the business covered by the foregoing application is to be conducted) certify that each of us has been personally acquainted with the applicant for the length of time indicated after our respective names; that we have examined the application of the applicant and that we have good reason to believe that all of the statements contained in said application are true, and that we are familiar with the premises upon which the proposed business is to be conducted and we believe such premises are suitable for the conduct of the business of retail dealer in alcoholic beverages, and that we are of the opinion that the applicant is a suitable person to obtain the license applied for:

(Print name above signature)	Name	Address	Voting Residence	Length of time acquainted with applicant(s). If not acquainted prior to application filing, indicate "Just Met." (All three blanks must be filled in.)
<u>Richard P. McLean</u>	<u>Richard P. McLean</u>	<u>40514th St #18 Ocean City, MD 21842</u>	<u>40514th St #18 Ocean City, MD 21842</u>	App. 1 <u>20 yrs</u> App. 2 <u>8</u> App. 3 _____
<u>Mary. Rita L. Davis</u>	<u>Mary. Rita L. Davis</u>	<u>2205 N. Hill St. Ocean City, MD 21842</u>	<u>2205 N. Hill St. Ocean City, MD 21842</u>	App. 1 <u>12 yrs</u> App. 2 <u>8</u> App. 3 _____
<u>Steven J. Smith</u>	<u>Steven J. Smith</u>	<u>1545 TEAL DRIVE OCEAN CITY, MD 21842</u>	<u>1545 TEAL DRIVE OCEAN CITY, MD 21842</u>	App. 1 <u>20 yrs</u> App. 2 <u>Just Met</u> App. 3 _____
<u>Matthew James</u>	<u>Matthew James</u>	<u>602 Westway Dr. Ocean City, MD 21842</u>	<u>602 Westway Dr. Ocean City, MD 21842</u>	App. 1 <u>12 years</u> App. 2 <u>Just Met</u> App. 3 _____
<u>Allison James</u>	<u>Allison James</u>	<u>602 Westway Dr. Ocean City, MD 21842</u>	<u>602 Westway Dr. Ocean City, MD 21842</u>	App. 1 <u>8 years</u> App. 2 <u>Just Met</u> App. 3 _____
<u>JAMES NORMAN WATKINS JR</u>	<u>JAMES NORMAN WATKINS JR</u>	<u>1523 TEAL DRIVE OCEAN CITY MD 21842</u>	<u>1523 TEAL DRIVE OCEAN CITY MD 21842</u>	App. 1 <u>25 yrs</u> App. 2 <u>8</u> App. 3 _____
<u>John J. Ferrante</u>	<u>John J. Ferrante</u>	<u>1515 TEAL DRIVE OCEAN CITY MD 21842</u>	<u>1515 TEAL DRIVE OCEAN CITY MD 21842</u>	App. 1 <u>20 yrs</u> App. 2 <u>10</u> App. 3 _____
<u>Berry Pillins</u>	<u>Berry Pillins</u>	<u>805 8th St. Ocean City, MD 21842</u>	<u>805 8th St. Ocean City, MD 21842</u>	App. 1 <u>17</u> App. 2 <u>Just Met</u> App. 3 _____
<u>Margaret Pillins</u>	<u>Margaret Pillins</u>	<u>805 8th St. Ocean City, MD 21842</u>	<u>805 8th St. Ocean City, MD 21842</u>	App. 1 <u>17</u> App. 2 <u>Just Met</u> App. 3 _____
<u>William C. Hill</u>	<u>William C. Hill</u>	<u>311 St. Louis Ave Ocean City MD 21842</u>	<u>311 St. Louis Ave Ocean City MD 21842</u>	App. 1 <u>15 yrs</u> App. 2 <u>Just Met</u> App. 3 _____
<u>Joseph Hill</u>	<u>Joseph Hill</u>	<u>617 BAYSHORE DR #49, OC, MD</u>	<u>617 BAYSHORE DR #49, OC, MD</u>	App. 1 <u>12 yrs</u> App. 2 <u>Just Met</u> App. 3 _____
<u>Daniel Robinson</u>	<u>Daniel Robinson</u>	<u>313 Bayshore Dr Ocean City 21842</u>	<u>313 Bayshore Dr Ocean City 21842</u>	App. 1 <u>10 yrs</u> App. 2 <u>Just Met</u> App. 3 _____

Names and addresses of signers must be printed or typewritten above signatures.

**BOARD OF LICENSE COMMISSIONERS  
FOR WORCESTER COUNTY**

***REPORT OF INVESTIGATION***

*Type: Request for Girl's Night Event*

*Date: 03/06/25*

*License No: 908*

*Class: B*

*Type: Beer-Wine-Liquor*

**APPLICANT(S):**

**1. Jason Welch**

**2. Heather Welch**

**3. Meghan Newberger**

**4.**

*TRADE NAME: Oaked at the Globe*

*CORP: Oaked at the Globe, LLC*

*LOCATION: 12 Broad Street, Berlin, MD*

Restrictions: Live entertainment allowed inside amplified five days per week with a maximum of four pieces 11 a.m. until 11 p.m., Karaoke allowed inside one night per week, Background music allowed outside, No outside live entertainment, Outside fully enclosed area must close by 10 p.m., Outside bar permitted with a maximum of 16 bar seats and 47 seats at tables allowed in outside area, Two games allowed, No disc jockey inside allowed, Music Technician allowed inside, No disc jockey outside or music technician allowed outside, No pool tables allowed, No off sale, All doors must be closed during inside entertainment

On March 5, 2025, I, Ian Cameron, Liquor License Inspector for Worcester County, spoke with the owner /operator of Oaked at the Globe Mr. Jason Welch in regards to event that is planned to take place on Sunday ,March 30th between the times of 7:00 PM to 9:30 PM and March 31<sup>st</sup> between the times of 6:00 PM to 8:30 PM. Mr. Welch stated that he was planning on having a Girls Night Out event on above dates and times at the property. He stated that there would be 5 dancers which would dance on the stage and would also go out into the crowd and entertain guests throughout dance music. He further stated that there would be security at all doors leading inside and out. The security on the inside would be controlled by himself and staff. The number of people that are expected to attend is around 150 on both nights. No other specials will be going on that night. There will be a \$18.00 cover charge to get inside, and you will be given a wristband to wear while inside.

Ian W. Cameron  
Liquor License Inspector

April Payne  
Liquor License Administrator



February 26, 2025

Subject: Request for Approval: Girls Night Out Event at Oaked at the Globe

Dear Ms. Payne,

I hope this email finds you well. I am writing on behalf of Oaked at the Globe located at 12 Broad St in Berlin MD to request approval for a special event - Girls Night Out.

Our Girls Night Out event will feature a unique performance that includes a mix of comedy, theatrics, choreographed routines, and themed-based costumes and skits performed by professional male dancers. This event is intended strictly for adults aged 21 and over and will run from 7pm to 9:30pm.

Please note that we will be checking all IDs at the door before allowing entry to ensure compliance with age restrictions. We will also have security measures in place to ensure a safe and enjoyable experience for all attendees.

We believe that this event will be a fun and exciting opportunity for our patrons to enjoy a night out with friends. We are confident that it will be well-received by our audience and contribute positively to the overall atmosphere at Oaked at the Globe.

We kindly request your approval for this event and would be happy to provide any additional information or details that you may require. Thank you for considering our request, and we look forward to hearing from you soon.

Best regards,

Jason Welch  
Owner & CEO  
Oaked at the Globe



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**John Johnson, VP**  
317 NW 144th St  
Edmond, OK 73013  
**702.809.2043**  
[girlsnightoutshows@gmail.com](mailto:girlsnightoutshows@gmail.com)

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26th of February, 2025

To: The City of Berlin, The Liquor Control Board

For whom it may concern, we hope this finds you well. We are drafting this letter for the purpose of providing a written statement regarding the nature and contents of the events planned for March 30th & 31st at The Globe within the city limits of Berlin, MD. While we are looking forward to providing entertainment to the patrons of the venue, we understand there is concern from the city/liquor control board regarding our adherence to certain ordinances and regulations, which we understand completely and we wish to provide clarification.

Our company, Girls Night Out, produced by Gold Productions Inc, is a professional, all-male dance troupe that incorporates choreographed dance numbers, with various costumes (men in uniform, firefighter, army costumes, etc), paired with theatrical elements and comedy in a stage-show experience.

At its most risqué moments, the performers are dressed down to posing trunks, but at no point will the audience be exposed to any nudity; including but not limited to the buttocks, genitals, genital hair, etc.

At no point during the performance will there be simulated sex acts, video depictions of explicit acts, or actual intercourse. Our show is, naturally, for an adult audience, but our ethos is to provide tasteful entertainment to patrons and is in no way pornographic.

Should there be any remaining questions, please feel free to reach out to us at the provided contact information on the left side of this letter. Otherwise, we trust that this brief explanation of our show will satisfy any concerns. Thank you for your time.

- John Johnson