

**State of Arizona**  
**Department of Liquor Licenses and Control**

Created 03/17/2025 @ 08:37:19 AM

Local Governing Body Report

**LICENSE**

Number:		Type:	012 RESTAURANT
Name:	TACOS WINGS & CERVEZA		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	9340 W NORTHERN AVENUE #105 PEORIA, AZ 85305 USA		
Mailing Address:	15602 N 35TH AVENUE PHOENIX, AZ 85053 USA		
Phone:	(602)500-6171		
Alt. Phone:	(602)354-0909		
Email:	BAHIJ0917@GMAIL.COM		

**AGENT**

Name:	JULIA SARAI RUBIO
Gender:	Female
Correspondence Address:	15602 N 35TH AVENUE PHOENIX, AZ 85053 USA
Phone:	(623)843-8399
Alt. Phone:	
Email:	ALEX@MOCACC.COM

**OWNER**

Name:	DD RESTAURANT LLC	
Contact Name:	JULIA SARAI RUBIO	
Type:	LIMITED LIABILITY COMPANY	
AZ CC File Number:	23431705	State of Incorporation: AZ
Incorporation Date:	10/04/2022	
Correspondence Address:	15602 N 35TH AVENUE PHOENIX, AZ 85053 USA	
Phone:	(602)354-0909	
Alt. Phone:		
Email:	BAHIJ0917@GMAIL.COM	



**Officers / Stockholders**

Name:  
ERIKA AZUCENA CEJA ARROYO

Title:  
MEMBER

% Interest:  
100.00

**DD RESTAURANT LLC - MEMBER**

Name: ERIKA AZUCENA CEJA ARROYO

Gender: Female

Correspondence Address: 15602 N 35TH AVENUE  
PHOENIX, AZ 85053  
USA

Phone: (602)500-6171

Alt. Phone: (602)354-0909

Email: BAHIJ0917@GMAIL.COM

## APPLICATION INFORMATION

Application Number: 337883  
Application Type: New Application  
Created Date: 03/10/2025

## QUESTIONS & ANSWERS

### 012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?  
Yes  
What date are you taking ownership? Please upload the Interim Permit Notary page when you reach the upload page.  
03/17/2025
- 2) Are you one of the following? Please indicate below.  
Property Tenant  
Subtenant  
Property Owner  
Property Purchaser  
Property Management Company  
TENANT
- 3) Is there a penalty if lease is not fulfilled?  
Yes  
What is the penalty?  
LEASE
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?  
Yes
- 5) What is the total money borrowed for the business not including the lease?  
Please list each amount owed to lenders/individuals.  
\$0.00
- 6) Are there walk-up or drive-through windows on the premises?  
No
- 7) Does the establishment have a patio?  
No
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
No
- 9) What type of business will this license be used for?  
RESTAURANT, TACOS, WINGS, ALCOHOL. FAMILY ORIENTED

**State of Arizona**  
**Department of Liquor Licenses and Control**

Created 03/17/2025 @ 08:37:10 AM

Local Governing Body Report

**LICENSE**

Number:	INP070032445	Type:	INP INTERIM PERMIT
Name:	TACOS WINGS & CERVEZA		
State:	Active		
Issue Date:	03/17/2025	Expiration Date:	06/30/2025
Original Issue Date:	03/17/2025		
Location:	9340 W NORTHERN AVENUE #105 PEORIA, AZ 85305 USA		
Mailing Address:	15602 N 35TH AVENUE PHOENIX, AZ 85053 USA		
Phone:	(602)500-6171		
Alt. Phone:	(602)354-0909		
Email:	BAHIJ0917@GMAIL.COM		

**AGENT**

Name:	JULIA SARAI RUBIO
Gender:	Female
Correspondence Address:	15602 N 35TH AVENUE PHOENIX, AZ 85053 USA
Phone:	(623)843-8399
Alt. Phone:	
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Phone:	(602)354-0909		
Alt. Phone:			
Email:	BAHIJ0917@GMAIL.COM		

Name:  
ERIKA AZUCENA CEJA ARROYO

Title:  
MEMBER

% Interest:  
100.00

### **DD RESTAURANT LLC - MEMBER**

Name: ERIKA AZUCENA CEJA ARROYO  
Gender: Female  
Correspondence Address: 15602 N 35TH AVENUE  
PHOENIX, AZ 85053  
USA  
Phone: (602)500-6171  
Alt. Phone: (602)354-0909  
Email: BAHIJ0917@GMAIL.COM

### **APPLICATION INFORMATION**

Application Number: 337885  
Application Type: New Application  
Created Date: 03/10/2025



### **QUESTIONS & ANSWERS**

#### **INP Interim Permit**

- 1) Enter License Number currently at location  
012070029073
- 2) Is the license currently in use?  
Yes
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page?  
Yes  
A Document of type INTERIM NOTARY PAGE is required.

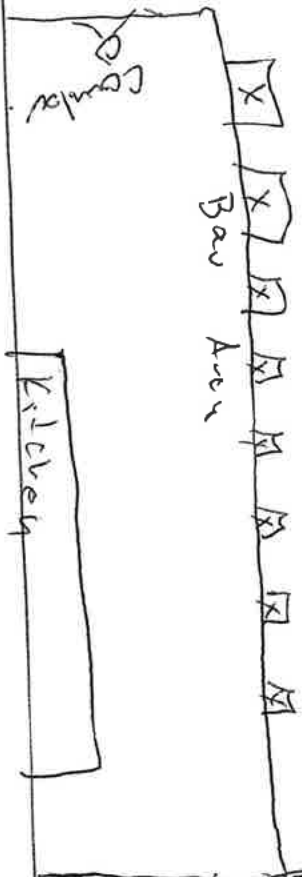
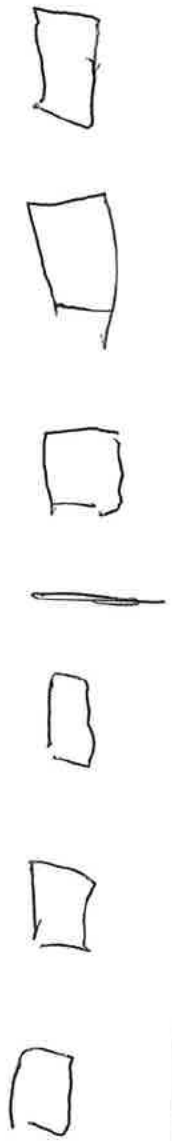
9340 W. Northham Ave, Peoria, IL

2200 sq ft

Entrance

Tables  
Tables

Tables



Kitchen

Beer zone

Kitchen Prep.



Highway

Exit



# RESTAURANT/HOTEL/MOTEL OPERATION PLAN

Arizona Dept. of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

Type or Print with **Black Ink**

1. Name of restaurant (Please print): Tacos Wings & Cerveza

2. Must indicate the equipment below by Make, Model, and Capacity:

**LIST ONLY THE FOLLOWING - NO ATTACHMENTS**

Grill	Cooking Performance Group S36-N Natural Gas 6 Burner 36" Range with Standard Oven
Oven	0
Freezer	Avantco A-49F-HC 54" Solid Door Reach-In Freezer
Refrigerator	Avantco A-49R-HC 54" Solid Door Reach-In Refrigerator
Sink	Regency 94" 16-Gauge Stainless Steel Three Compartment Commercial Sink with 2 Drainboards - 18" x 24" x 14" Bowls
Dish Washing Facilities	1
Food Preparation Counter (Dimensions)	Stainless steel sink 26 by 94 inches
Other	

3. Attach a copy of your FULL menu with pricing **INCLUDING NON-ALCOHOLIC BEVERAGES**

4. What percentage of your public premises is used primarily for restaurant dining?

(Do not include kitchen, bar, hi-top tables, or game area.) 60 %

5. Does your restaurant have a bar area that is distinct and separate from the dining area?  YES  No

(If yes, what percentage of the public floor space does this area cover?) 0 %

6. List the **seating capacity** for:

- a) Restaurant dining area of your premises: [ 28 ]
- (DO NOT INCLUDE PATIO SEATING)**
- b) Bar area [ + 0 ]
- TOTAL [ = 28 ]**

7. What type of dinnerware is primarily used in your restaurant?  Reusable  Disposable  Both

8. Does your restaurant contain any **games, televisions, or any other entertainment**?  YES  No

**If yes, specify what types and how many** (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

3 tvs

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Do you have live entertainment or dancing?  YES  No

**If yes, what type and how often** (example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. List number of employees for each position:

Position	How many
Cooks	2
Bartenders	0
Hostesses	0
Managers	1
Servers	0
Other (Cashier )	2
Other ( )	
Other ( )	

I, (Print Full Name) Erika Ceja-Aroyo, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: \_\_\_\_\_

**Menu**

Tacos: Asada, Pastor, chicken, Cabeza, Birria \$3.00

Burritos: Asada, Pastor, chicken, Cabeza, Birria \$11.00

Quesadillas: Asada, Pastor, chicken, Cabeza, Birria \$12.00

Caldos: Birria, Cabeza, Menudo, caguamanta \$14.00

Refrescos: \$3.00

Aguasfrescos \$5.00

12 oz Beer: \$5.00



**RECORDS REQUIRED  
FOR AUDIT  
RESTAURANT/HOTEL/MOTEL**

Arizona Dept. of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

Type or Print with Black Ink

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine Compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

**Tacos Wings & Cerveza**

1. Name of restaurant (Please print): \_\_\_\_\_
2. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
3. A list of **all** food and liquor vendors
4. The restaurant menu used during the audit period
5. A price list for alcoholic beverages during the audit period
6. Mark-up figures on food and alcoholic products during the audit period
7. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
8. Monthly Inventory Figures - beginning and ending figures for food and liquor
9. Chart of accounts (copy)
10. Financial Statements-Income Statements-Balance Sheets
11. **General Ledger**
  - A. Sales Journals/Monthly Sales Schedules
    - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
    - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
    - 3) Dated Guest Checks
    - 4) Coupons/Specials/Discounts
    - 5) Any other evidence to support income from food and liquor sales
  - B. Cash Receipts/Disbursement Journals
    - 1) Daily Bank Deposit Slips
    - 2) Bank Statements and canceled checks

**12. Tax Records**

- A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
- B. Income Tax Return - city, state and federal (copies)
- C. Any supporting books, records, schedules or documents used in preparation of tax returns

13. Payroll Records

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages

14. Off-site Catering Records (must be complete and separate from restaurant records)

- A. All documents which support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

**REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH  
A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).**

**A.R.S. §4-210(A)7**

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

**A.R.S. §4-205.02(G)**

For the purpose of this section:

- 1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
- 2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

I, (Print Full Name) Erika Ceja-Aroyo, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: \_\_\_\_\_

**\*MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE\***



Arizona Dept. of Liquor Licenses and Control  
https://www.azliquor.gov  
(602) 542-5141

DLLC USE ONLY

Fee:	
Job #:	337883
Date Accepted:	3/19/25
CSR:	[Redacted]

FP Current  
9-1-23

# Personal Information Questionnaire

**ATTENTION APPLICANT:** This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

**Agent:** a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.  
*A.R.S. §4-202(A).*

**Controlling Person:** person directly or indirectly possessing control of an applicant or licensee.  
*A.R.S. §4-101(10).*

**Manager:** An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.  
*A.R.S. §4-101(22) and A.R.S. §4-202(C)*

## SECTION - 1 INDIVIDUAL INFORMATION

AGENT       CONTROLLING PERSON       MANAGER

- Name: Rubio Julia *Sara*  
Last First Middle
- Social Security #: [Redacted] Birth Date: [Redacted]  
(NOT a public record)
- Driver's License #: [Redacted] State: [Redacted]  
(NOT a public record)
- Are you a resident of Arizona?  Yes  No Date of residency: 10 / 17 / 1991
- Email address: julia.rubio2010@gmail.com
- Home Address: [Redacted]
- Daytime phone #: 623-698-3998 Alternative phone #: 602-500-6171

## SECTION 2 - LICENSED BUSINESS INFORMATION

- Liquor License #: ~~012070029073~~
- Business Name (doing business as): Tacos and Wings & Cerveza
- Business Address: 9340 West Northern Ave Suite 105, Peoria Arizona 85305

### SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations?  Agent  Controlling Person  Manager

Name of persons who will be handling the day to day operations: \_\_\_\_\_


**Julia Rubio**

### SECTION 4 – BACKGROUND

**If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED**

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes  No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes  No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? *A.R.S. §4-202(D)* Yes  No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) *A.R.S. §4-202, 4-210*  
*\*Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes  No
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes  No

I, (Print Full Name) **Julia Rubio** hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature:  Date: 7-28-25

25 MAR 10 PM 1:53 AZD LLC

2/28/2025

I Julia Rubio operate a Filibertos with License #012070026127.

Thank you,

Julia Rubio





# ALIEN STATUS

Arizona Dept. of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

Type or Print with **Black Ink**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

**Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.**

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

## SECTION I – APPLICANT INFORMATION

APPLICANT NAME (Print or type) Julia Rubio

## SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States?  Yes  No - If **yes**, indicate place of birth:

City San Diego State Arizona COUNTRY USA

If you answered **Yes, 1)** Attach a legible copy of a document from the list below.

2) Name of document: Arizona Driver License

If you answered **No**, you must complete Sections III.

C  
MAR 10 PM 1:54 AZDLLC

**EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS**

**You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.**

**Evidence showing authorized presence in the United State includes the following:**

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after Jan. 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. \*\*\*Passport must be signed\*\*\*
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

**SECTION III – QUALIFIED ALIEN DECLARATION**

Applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

**NA**

Name of document provided

**Qualified Alien Status** (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States

**Nonimmigrant Status** (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non-immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

**Alien Paroled into the United States for Less Than One Year** (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

**Other Persons** (8 U.S.C § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 etseq.];
- 13. A foreign national not physically present in the United States.
- 14. **Otherwise Lawfully Present**
- 15. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

**PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C § 1621(c)(2)(A).**

**Julio Rubio**

Print Name



**2-26-25**

Date

Certificate # AZB-ON-01230087

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

Certificate of Completion  
For  
Title 4 **BASIC** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**JULIA RUBIO**



09/11/2023

Training Completion Date

09/10/2026

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

**360training.com Inc.**

Company Name

6504 Bridge Point Parkway, Suite 100, Austin, TX 78730

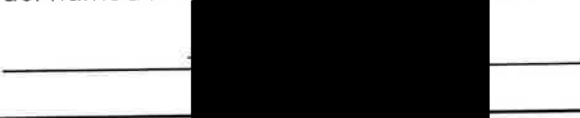
Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, certify that the above named individual did successfully complete  
Instructor Name (please print)

Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



09/11/2023

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below  
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)  
Conveyance (series 8)  
Restaurant (series 12)

Government (series 5)  
Liquor Store (series 9)  
In-state Farm Winery (series 13)

Bar (series 6)  
Private Club (series 14)

Beer & Wine Bar (series 7)  
Hotel/Motel w/restaurant (series 11)  
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

Certificate # AZM-ON01206088

Certificate of Completion  
For  
Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

JULIA RUBIO

Full Name (please print)



09/11/2023

Training Completion Date

09/10/2026

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6504 Bridge Point Parkway, Suite 100, Austin, TX 78730

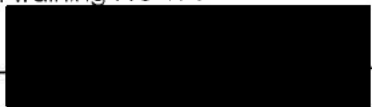
Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, certify that the above named individual did successfully complete  
Instructor Name (please print)

Title 4 MANAGEMENT Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



09/11/2023

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below  
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)  
Conveyance (series 8)  
Restaurant (series 12)

Government (series 5)  
Liquor Store (series 9)  
In-state Farm Winery (series 13)

Bar (series 6)  
Private Club (series 14)

Beer & Wine Bar (series 7)  
Hotel/Motel w/restaurant (series 11)  
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.



Arizona Dept. of Liquor Licenses and Control  
https://www.azliquor.gov  
(602) 542-5141

**DLCC USE ONLY**

Fee:	
Job #:	337 883
Date Accepted:	3/10/25
CSR:	[Redacted]

FP Current  
9-1-2023

# Personal Information Questionnaire

**ATTENTION APPLICANT:** This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

**Agent:** a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.  
*A.R.S. §4-202(A).*

**Controlling Person:** person directly or indirectly possessing control of an applicant or licensee.  
*A.R.S. §4-101(10).*

**Manager:** An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.  
*A.R.S. §4-101(22) and A.R.S. §4-202(C)*

## SECTION - 1 INDIVIDUAL INFORMATION

AGENT       CONTROLLING PERSON       MANAGER

- Name: Ceja-Aroyo Erika  
Last First Middle
- Social Security #: [Redacted] Birth Date: [Redacted]  
(NOT a public record)
- Driver's License #: [Redacted] State Issued: [Redacted]  
(NOT a public record)
- Are you a resident of Arizona?  Yes  No Date of residency: 11 / 28 / 2016
- Email address: Bahij0917@gmail.com
- Home Address: [Redacted]
- Daytime phone #: 602-500-6171 Alternative phone #: 602-354-0909

## SECTION 2 – LICENSED BUSINESS INFORMATION

- Liquor License #: ~~012078029073~~
- Business Name (doing business as): Tacos and Wings & Cerveza
- Business Address: 9340 West Northern Avenue, Suite 105, Peoria Arizona 85305

### SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations?  Agent  Controlling Person  Manager

Name of persons who will be handling the day to day operations: \_\_\_\_\_

**Julio Rubio**

### SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes  No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes  No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? A.R.S. §4-202(D) Yes  No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 Yes  No   
\*Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes  No

I, (Print Full Name) **Erika Arroyo-Ceja** hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information that I have made herein are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: 2-26-25

To whom it may concern:

My name is Erika Ceja Arroyo, I do have another liquor license and the number is License 012070026127. Please contact me if you have any questions or concerns.

Sincerely,

Erika Ceja Arroyo

