	NEVADA STATE L	IOUOR I	LICENS	SE APPLICATION		
	The Board of County Commissioners or Incorporated C LTD 06 application to the Nevada Department of Taxati	itles Governing P	lady Member	a must forward the second out it is		
	License is nontransterable. The Defections of Taxolina	's Meysda Busins	. Please note es Registratio	Per NRS 369.220 (3) the Nevada State Liquor in form start in commission and attached in the		
1			,			
•	white terms and anomitted tol.	r ID:				
2	New Business   Location Change   Additional Location  Application is for:   Importer/Wholesaler Lignor Lign					
3	Application is for: Importer/Wholesaler Liquor License Importer/Wholesaler License Type (Check all that apply):					
	Importer and Wholesaler of Wine, Beer and Spirits  Wholesaler of Wine, Beer and Spirits	Import	er and Wh	olesaler of Beer		
4	Manufacturer License Type (Check all that apply): Brew Pub Brewer Craft Distillery  Estate Distillery Instructional Wine Facility Winemaker Rectifier					
5	Business Type: Corporation LLC Partnersh	nip 🔲 Indiv	idual 🔲	Other:		
6	Date Incorporated/Organized: 03/13/2007	State wher	e Incorpo	rated/Organized: OH		
7	Anticipated Start Date of Location: 12/1/2021	Federal Ta				
8	Name of Business:			Phone Number: Local # TBD		
	BrewDog Las Vegas LLC	614-908-3051 (Corporate)				
9	DBA, if any: BrewDog Las Vegas			Fax Number:		
10	Business Address:			N/A		
	3767 Las Vegas Blvd S, Suites #310 and #400, Las V	/egas. NV 89	109			
1	Location of Operation:					
	3767 Las Vegas Blvd S., Suites #310 and #400, Las \	Vegas, NV 8	9109			
2	Mailing Address:					
3	96 Gender Road, Canal Winchester, OH 43110					
4	Email Address: KEITH @ BREWDOG. C	COM				
1	List All Owners, Officers, Members, Partner Name:					
	James B. Watt			Title: President/Secretary		
	Residence Address:			% Owned: 0%		
1	Name:					
	Nail A. Simpson	Title: Finance Director				
	Residence Address:	% Owned: 0%				
	Name: BrewDog USA, Inc.			Title: Member		

Residence Address:

Residence Address:

Name:

% Owned: 100%

Title:

% Owned:

15	If Partnership, is the agreement recorded? N/A Yes No	In what county and city is it record	ed in? N/A	
16	Operating under a Fictitious Firm Name? Yes No (Supply a certified copy of the certificate to the Department)			
17	Has applicant applied for a local County or City license?  Yes No	If so, where? Clark County Department of Business License		
18	Has applicant secured all necessary Federal permits?  TTB Permit Number (Supply a configuration of the property of the permit Number (Supply a configuration of the permit Number (Supply a configuratio			
19	Is the location of operations shared with any other business?  Yes No If yes, please provide the following:			
	Business Name:	Type of Operations:		
	Business Name:	Type of Operations:		
	Business Name:	Type of Operations:		
20	Does any person listed on this application engage in manufacturing, importing, wholesaling or retailing alcoholic beverages through another company? Yes No If yes, please provide the following:			
	Person's Name: PLEASE SEE ATTA	ICHED	% Owned:	
	Business Name:	Type of Operations:		
	Person's Name:		% Owned:	
	Business Name:	Type of Operations:		
21	Have any individuals with interest, financial or otherwise, in the applicant's business, ever been convicted of a violation of Federal or any state liquor laws?  Yes No If so, provide the following:			
	Name: When:		-	
	Explain:			
22	APPLICANT S'AFFIRMATION: By signifig I certify that, to the best of my knowledge under penalty of perjury, the information contained herein is correct and acknowledge that pursuant to Nevada Revised Statutes (NRS) 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing to the Nevada Department of Taxation. In addition, if I am granted a liquor license, I understand that I am expected to comply with all liquor laws, including, but not limited to NRS 369 and 597, Nevada Administration Code, and all Federal laws. Noncompliance can result in fines, suspension or revocation of my license, and criminal prosecution. By signing this deciment, it is acknowledged you are not permitted to conduct business until you have obtained a State of Nevada Department of Taxation liquor license.			
	Name of responsible party: NEK SIMSON	Title: FINANCE DIRECTOR		
	Signature:	Date: 05/05/2021		
	APPLICATION SUBMITTAL I	OCATIONS		
Boul Nort	e location of business operations is in one of the following citi lder City, Caliente, Carlin, Carson City, Elko, Ely, Fallon, Fernley th Las Vegas, Reno, Sparks, Wells, West Wendover, Winnemucc	v, Henderson, Las Vegas, Lovelock, Me a or Yerington.	squite,	
	mit page 1, 2, 3 and 5 to that Incorporated City's Governing Is artiment of Taxation's Nevada Business Registration Form.	loard for review and a completed		

## Question 20:

BrewDog USA, Inc., the 100% owner of BrewDog Las Vegas LLC, owns the below subsidiaries that operate brewpubs and breweries in the United States. James B. Watt and Neil A Simpson serve as officers for each of these subsidiaries as well. 000

- o BrewDog Brewing Company LLC: Operates 4 brewpub/brewery locations in Ohio
- o BrewDog Indianapolis LLC Operates 1 brewpub location in Indiana
- o BrewDog Pittsburgh LLC Operates 1 brewpub location in Pennsylvania

## **DESCRIPTION OF NEVADA BUSINESS OPERATIONS**

Business Name: BrewDog Las Vegas LLC dba BrewDog Las Vegas

Importer/Wholesaler of Liquor

Provide a detailed description of your business practice in Nevada

N/A	<b>L</b>
	rewer, Craft Distillery, Estate Distillery, Facility, Winemaker, Rectifier)
Describe, step by step, the nature of you	r business and procedure to produce liquor in Nevada
PLEASE SEE ATTACHED DE	SCRIPTION
Provide additio	onal attachments if needed.
correct and acknowledge that pursuant to Nevada Revised Statut strument for filing to the Nevada Department of Taxation. In add th all liquor laws, including, but not limited to NRS 369 and 597	e best of my knowledge under penalty of perjury, the information contained herein tes (NRS) 239.330, it is a category C felony to knowingly offer any false or forged lition, if I am granted a liquor license, I understand that I am expected to comply I, Nevada Administration Code, and all Federal laws. Noncompliance can result in tition. By signing this document, it is acknowledged you are not permitted to epartment of Taxation liquor license.
title: FINANCE DIRECTOR	Date: 05/05/2021
ame of responsible party:	Signature: / bu/ 5
NEIL SIMPSON	1001 Z

#### Description of Nevada Business Operations

The brewing process will use a variety of milled grains (malted barley, oats, wheat, etc.) to produce a sugar solution (wort). The solid milled grains are separated, leaving only wort. The wort is then boiled, during which time hops are added, and then cooled and fermented using yeast (the wort has become green beer). During fermentation, the yeast will create ethanol and co2, along with other metabolites contributing to the flavor. Additional hops and other favor contributing ingredients may also be added during or at the end of fermentation. At the end of fermentation, the green beer will go through filtration, depending on style, and be carbonated. This will then be packaged for potential sale at the brewpub and other appropriate channels, where licensure permits.

## **INCORPORATED CITIES APPROVAL PAGE**

For Incorporated Cities Only:

Boulder City, Caliente, Carlin, Carson City, Elko, Ely, Fallon, Fernley, Henderson, Las Vegas, Lovelock, Mesquite, North Las Vegas, Reno, Sparks, Wells, West Wendover, Winnemucca and Yerington

To show validity please attach letter on Incorporated Cities Letterhead attesting to the fact the application was approved or denied, listing the name of the business, the specific liquor license type and the date of approval or denial. Please add any remarks and recommendations by the Incorporated Cities Governing Body Members.

FOR OFFICIAL USE ONLY			
In order to be	e valid, we require signa	ture(s) by the Incorpora	ted Cities Governing Body Member(s):
Title:		Signature:	
On this	day of		_, the application for a Nevada State Liquor License
			has been Approved Denied

# **COUNTY COMMISSIONERS APPROVAL PAGE**

For all Non-Incorporated Cities

PT-1 (5.6)	rot an non-racor purated Cities
Pri de	FOR OFFICIAL USE ONLY
Remarks and recommendations by	the County Commissioners:
Board of County Commissioners:	
	Chairman:
	Member:
	Member:
[seal]	
	Member:
	Member:
A del	
ATTEST:	
	, County Clerk

6

has been \_\_Approved \_\_Denied

On this \_\_\_\_day of \_\_\_