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March 16, 2023

VIA FEDERAL EXPRESS

Manhattan Community Board No. 8
505 Park Avenue – Suite 620
New York, New York 10022

RECEIVED
MAR 17 2023

ATTN: Will Brightbill, District Manager

BY COMMUNITY BOARD 8

Re: Meal Plan NY LLC, Graduate Roosevelt Island Lessee LLC
and Highgate Hotels L.P.
22 North Loop Road
New York, NY 10044

Dear Mr. Brightbill:

We represent the above-referenced licensee which holds a Hotel Liquor License for the Graduate Roosevelt Island hotel.

We have been advised of an ownership change of Graduate Roosevelt Island Lessee LLC (“GRADUATE”) in that the direct member of GRADUATE has changed. Because the change is that of the direct member of GRADUATE and exceeds 80%, we are required by statute to provide you with the enclosed 30-Day Advanced Notice of intent to file a Corporate Change Application with the New York State Liquor Authority (“SLA”).

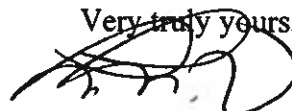
Currently, the approved 100% direct member of GRADUATE is AJ Roosevelt Island TRS Mezz LLC (“AJMEZZ”). AJMEZZ is wholly owned by AJ Capital Fund II Program TRS LLC (“AJCAP”). The corporate change simply removes AJMEZZ from the ownership structure and AJCAP becomes the 100% direct member of GRADUATE. The ownership of AJCAP remains unchanged.

While there is a change in the direct member of GRADUATE, there is no change in the ultimate ownership of GRADUATE. Furthermore, there will not be any change to the method of operation at the premises. We are, therefore, requesting a waiver of the 30-days’ notice period so that the corporate change application may be filed with the SLA as soon as possible.

If you have any questions or require any additional information, contact this office.

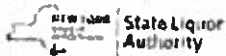
Thank you.

Very truly yours,



Martha M. Redo

Enclosure



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

1. Date Notice Sent: 1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:
For premises outside the City of New York:

- New Application Removal Class Change

For premises in the City of New York:

- New Application New Application and Temporary Retail Permit Temporary Retail Permit Removal
 Class Change Method of Operation Corporate Change Renewal Alteration

For New and Temporary Retail Permit applicants, answer each question below using all information known to date
 For Renewal applicants, answer all questions
 For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s)
 For Corporate Change applicants, attach a list of the current and proposed corporate principals
 For Removal applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation
 For Class Change applicants, attach a statement detailing your current license type and your proposed license type
 For Method of Operation Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes
 Please include all documents as noted above. Failure to do so may result in disapproval of the application.

This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:

3. Name of Municipality or Community Board:

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village: , NY Zip Code:

9. Business Telephone Number of applicant/ Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider Liquor, Wine, Beer & Cider

12. Extent of Food Service: Full Food menu; full kitchen run by a chef/cook Menu meets legal minimum food requirements; food prep area required

13. Type of Establishment:

- Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke

14. Method of Operation: (check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.):

- Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment
 Video/Arcade Games Third Party Promoters Security Personnel

Other (specify):

15. Licensed Outdoor Area: (check all that apply) None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure
 Sidewalk Cafe Other (specify): _____

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

16. List the floor(s) of the building that the establishment is located on: Entire Hotel

17. List the room number(s) the establishment is located in within the building, if appropriate: n/a

18. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation? Yes No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:

Name	Serial Number
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21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name: Graduate Roosevelt Owner LLC

23. Building Owner's Street Address: 133 North Jefferson Street

24. City, Town or Village: Chicago State: IL Zip Code: 60661

25. Business Telephone Number of Building Owner: 312-777-3145

Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice

26. Representative/Attorney's Full Name: Martha M. Rodo, Bernstein Rodo & Savitsky P.C.

27. Representative/Attorney's Street Address: 1177 Avenue of the Americas, 5th floor

28. City, Town or Village: New York State: New York Zip Code: 10036

29. Business Telephone Number of Representative/Attorney: 212-651-3100

30. Business E-mail Address of Representative/Attorney: martha@brpclaw.com

I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.

31. Printed Principal Name: MEHDI ABROUS Title: Managing Member

Principal Signature: X Med Arous