

**BOARD OF LICENSE COMMISSIONERS
FOR ANNE ARUNDEL COUNTY, MARYLAND**

APPLICATION FOR ALCOHOLIC BEVERAGES LICENSE CLASS: HMR Complex (BWL)

☒ Outdoor Dining

If transfer, formerly trading as: _____

For the use of: (Check one)

☐ Individual ☐ Partnership ☒ LLC ☐ Corporation ☐ Unincorporated Association

To the Board of License Commissioners
Anne Arundel County, State of Maryland

Date: 12/14/23

Application is made by the undersigned under the provisions of Alcoholic Beverages and Cannabis Article, Annotated Code of Maryland, for the above license, and the applicant (s) submit (s) and certify (ies) to the following information required by the Article:

1. Applicant(s)

(1) Name: Jeffrey Kolessar Address: 249 Bodley Rd, Aston, PA 19014
Date of Birth: 09/22/1967 Naturalized at: n/a Year: n/a
Place of Birth: Wilkes-Barre, PA Sex: Male
Phone Number: 215-972-2227 Email: kolessar@gfhotels.com

(2) Name: Joseph A. Wellenbusher III Address: 114 Ridge Rd, Juniper, FL 33477
Date of Birth: 11/22/1960 Naturalized at: n/a Year: n/a
Place of Birth: New Rochell, NY Sex: Male
Phone Number: 215-972-2226 Email: wellenbusherj@gfhotels.com

(3) Name: n/a Address: _____
Date of Birth: _____ Naturalized at: _____ Year: _____
Place of Birth: _____ Sex: _____
Phone Number: _____ Email: _____

2. The applicant(s) (is, are) a citizen(s) or permanent resident(s) of the United States. The applicant(s) (if applying as a qualifying individual for a corporation, unincorporated association, or LLC) (is, are) a resident of the State of Maryland at the time of the filing of this application. The license remains valid only for as long as the resident applicant remains a resident of the State. N/A - HMR Complex License

The applicant (s) thus qualified (is, are): ☐ 1 ☐ 2 ☐ 3 (Check number to correspond with name (s) listed above)

If not a resident of Anne Arundel County, Maryland, the Applicant(s) appoint J. Steven Wise, Esq
to serve as resident agent and accept service on behalf of the applicant(s).

3. Corporate name if applicable: AMMD Associates LLC

4. The trade name if applicable (s) is: Aloft/Element Hotel

and the location and address where license is desired is: 7520 & 7522 Teague Rd, Hanover, MD 21076

5. Describe premises: Lot size: 4.47 acres

Square feet of area and type of building applied for: 171,612 sq ft of hotel space plus outdoor patio; two 7-story hotels.

6. The name of the owner of the premises described above: Arundel Mills Chesapeake, LLC

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7. The applicant (s) (has, have) never been convicted of a felony. ☒ True ☐ False
8. The applicant (s) (has, have) never been adjudged guilty of violating the laws governing the sale of alcoholic beverages or for the prevention of gambling in the State of Maryland as follows. ☒ True ☐ False
If false, State name(s) of applicant, date, and offense: _____
9. (Has, have) the applicant (s) ever held a license for the sale of alcoholic beverages. ☐ Yes ☐ No
If yes, in what state, at what location, and name of license establishment: _____
10. The applicant (s) (has, have) not had a license for the sale of alcoholic beverages revoked. ☒ True ☐ False
11. The applicant (s) (has, have) a financial interest in the business to be conducted under said license. ☒ True ☐ False
12. The applicant (s) (is, are) not financially interested in any other place of business in the county, counties or Baltimore City where, or for which, a license has been applied for, granted or issued under Alcoholic Beverages and Cannabis Article, Annotated Code of Maryland. ☒ True ☐ False
13. No person except the applicant (s) is in any way peculiarly interested in the license applied for or in the business to be conducted there under during the continuance of the license, if issued. ☒ True ☐ False
14. The applicant (s) (has, have) not been adjudged guilty of any offense against the laws of the State or of the United States.
☒ True ☐ False
15. No manufacturer, brewer, distiller, or wholesaler, directly or indirectly, has any financial interest in the premises or business of the applicant. ☒ True ☐ False
16. The applicant (s) will not convey or grant to any manufacturer, brewer, distiller, or wholesaler any financial interest, except as otherwise permitted in the Alcoholic Beverages and Cannabis Article, Annotated Code of Maryland.
☒ True ☐ False
17. The applicant (s) (has, have) at the time of filing this application no indebtedness or other financial obligation and will not incur any such indebtedness or other financial obligation, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages. ☒ True ☐ False
18. The applicant (s) will, if granted a license, conform to all laws and regulations relating to the business in which the applicant (s) propose (s) to engage. ☒ True ☐ False
19. The applicant(s) hereby submit(s) a duly executed and acknowledged statement from the premises owner where the proposed business will operate. This statement expresses consent for the issuance of the requested license, granting authority to the State Comptroller, Executive Director of the Alcohol, Tobacco, and Cannabis Commission, and the Board of License Commissioners of the respective county where the business is situated. Additionally, this authorization extends to their duly authorized deputies, inspectors, clerks, agents, and employees, as well as any peace officer within the county. This authorization allows for the inspection and search, without the need for a warrant, of both the business premises and any and all parts of the building where the business will be conducted, at any time and without limitations. ☒ True ☐ False

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EXTRACT FROM LAW: If any affidavit or oath required under the provisions of the Act shall contain any false statement, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof, shall be subject to the penalties provided by law for that crime.

Name(s), title(s), and address(es) of applicants:

Jeffrey Kolessar	Member	249 Bodley Rd, Aston, PA 19014
(Name)	(Title)	(Home Address)
Joseph A. Wellenbusher III	Member	114 Ridge Rd, Jupiter, FL 33477
(Name)	(Title)	(Home Address)
n/a		
(Name)	(Title)	(Home Address)

*Note: If President or Vice-President is one of the applicants, they must also sign as an applicant.

*1. n/a
(Signature of President or Vice President)

1. [Signature] Jeffrey Kolessar
(Signature of applicant)

2. [Signature] Joseph A. Wellenbusher III
(Signature of applicant)

3. n/a
(Signature of applicant)

THE STATE OF ~~MARYLAND~~ Pennsylvania
COUNTY OF Philadelphia

I hereby certify that on the 12/13/2023, before me, the subscriber, a notary public of the State of PA, in and for Philadelphia County (here insert name of the county or City of Baltimore for which notary is appointed), personally appeared Jeffrey Kolessar, Joseph A. Wellenbusher III (name(s) of person(s) swearing) and made affirmation (oath or affirmation) in due form of law that the matters and facts set forth in the Application (here describe document to which the person(s) is or are swearing) are true.

As witness, my hand and notarial seal.

[Signature]
Notary Public Signature Sara Laureti

Commonwealth of Pennsylvania - Notary Seal
SARA LAURETI - Notary Public
Philadelphia County
My Commission Expires July 2, 2025
Commission Number 1399859

Print Name: Sara Laureti

My commission expires: 7/2/2025

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THE STATE OF MARYLAND

COUNTY OF _____

I hereby certify that on the _____, before me, the subscriber, a notary public of the State of Maryland, in and for _____ (here insert name of the county or City of Baltimore for which notary is appointed), personally appeared _____ (name(s) of person(s) swearing) and made _____ (oath or affirmation) in due form of law that the matters and facts set forth in the _____ (here describe document to which the person(s) is or are swearing) are true.
As witness, my hand and notarial seal.

Notary Public Signature

Print Name: _____

My commission expires: _____

THE STATE OF MARYLAND

COUNTY OF _____

I hereby certify that on the _____, before me, the subscriber, a notary public of the State of Maryland, in and for _____ (here insert name of the county or City of Baltimore for which notary is appointed), personally appeared _____ (name(s) of person(s) swearing) and made _____ (oath or affirmation) in due form of law that the matters and facts set forth in the _____ (here describe document to which the person(s) is or are swearing) are true.
As witness, my hand and notarial seal.

Notary Public Signature

Print Name: _____

My commission expires: _____

THE STATE OF MARYLAND

COUNTY OF _____

I hereby certify that on the _____, before me, the subscriber, a notary public of the State of Maryland, in and for _____ (here insert name of the county or City of Baltimore for which notary is appointed), personally appeared _____ (name(s) of person(s) swearing) and made _____ (oath or affirmation) in due form of law that the matters and facts set forth in the _____ (here describe document to which the person(s) is or are swearing) are true.
As witness, my hand and notarial seal.

Notary Public Signature

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Print Name: _____ My commission expires: _____

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

(I, WE) HEREBY CERTIFY, that (I am, we are) the ^{contract purchaser}~~owner~~(s) of the property known as

7520 and 7522 Teague Road, Hanover, MD 21076

Named in the foregoing application made to the State Comptroller under the Alcoholic Beverages Law of Maryland; that (I, we) hereby authorize the State Comptroller, Executive Director of the Alcohol, Tobacco, and Cannabis Commission, and the Board of License Commissioners of the respective county where the business is situated. Additionally, this authorization extends to their duly authorized deputies, inspectors, clerks, agents, and employees, as well as any peace officer within the county. This authorization allows for the inspection and search, without the need for a warrant, of both the business premises and any and all parts of the building where the business will be conducted, at any time and without limitations.

ARUNDEL MILLS CHESAPEAKE, LLC,

(Signature) an Ohio limited liability company

By:

Amit Patel, Manager

(Print Name)

[Signature]

(Signature)

XX

(Print Name)

XX

(Signature)

XX

(Print Name)

THE STATE OF MARYLAND

COUNTY OF _____

I hereby certify that on the _____, before me, the subscriber, a notary public of the State of Maryland, in and for _____ (here insert name of the county or City of Baltimore for which notary is appointed), personally appeared _____ (name(s) of person(s) swearing) and made _____ (oath or affirmation) in due form of law that the matters and facts set forth in the _____ (here describe document to which the person(s) is or are swearing) are true.
As witness, my hand and notarial seal.

Notary Public Signature

Print: _____

My commission expires: _____

STATE OF OHIO

COUNTY OF CUYAHOGA

} SS

This is an acknowledgment clause. No oath or affirmation was administered to the signer.

BEFORE ME, a Notary Public in and for such County and State, personally appeared Amit Patel, the Manager of **Arundel Mills Chesapeake, LLC**, an Ohio limited liability company, whose identity was known or proven to me and who did sign the foregoing instrument and acknowledged the signing hereof to be the voluntary act and deed on behalf of said limited liability company.

In testimony whereof, I have hereunto set my hand and official seal at Cleveland, Ohio, this 14th day of December, 2023.



NATHAN A. FELKER
NOTARY PUBLIC, STATE OF OHIO
MY COMMISSION HAS NO
EXPIRATION DATE
SECTION 147.03 O.R.C.



Notary Public

My Commission expires: N/A

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of my office at Columbus, Ohio, this 1st day of December, 1911.

NATHAN A. FELDER
NOTARY PUBLIC, STATE OF OHIO
MY COMMISSION HAS NO
EXPIRATION DATE
SECTION 14703 O.R.C.

