Department of Alcoholic Beverage Control — State of California

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

ABC 211 (6/99)

TO: Department of Alcoholic Beverage Control
8620 SPECTRUM CENTER BLVD
STE 302
SAN DIEGO, CA 92123
(858) 300-6855

File Number: **673927**
Receipt Number: **3048498**
Geographical Code: **3700**
Copies Mailed Date: **October 7, 2025**
Issued Date:

DISTRICT SERVING LOCATION: **SAN DIEGO**

First Owner: **ROOTS AND RHYTHM LLC**

Name of Business: **CARIBE RESTAURANT AND BAR**

Location of Business: **5080 BONITA RD**
STE H-K
BONITA, CA 91902-1727

County: **SAN DIEGO**

Is Premises inside city limits: **No** Census Tract: **0134.22**

Mailing Address:(If different from premises address)

Type of license(s): **47, 58** Dropping Partner: Yes___ No ✓

Transferor's license/name: **422785 / CARIBE RESTAURANT AND NIGHTCLUB INC**

License Type	Transaction Type	Master	Secondary LT And Count
47 - On-Sale General Eating Place	PER	Y	58[1]
58 - Caterer Permit	PER	N	

License Type	Transaction Description	Fee Code	Dup	Date	Fee
Application Fee	PERSON TO PERSON TRF	NA	0	10/07/25	$1,525.00
Application Fee	FEDERAL FINGERPRINTS	NA	7	10/07/25	$168.00
Application Fee	STATE FINGERPRINTS	NA	7	10/07/25	$273.00
58 - Caterer Permit	ANNUAL FEE	NA	1	10/07/25	$280.00
47 - On-Sale General Eating Plac	ANNUAL FEE	P0	0	10/07/25	$960.00
				Total	$3,206.00

Have you ever been convicted of a felony? **No**
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **No**

STATE OF CALIFORNIA County of SAN DIEGO Date: October 7, 2025

Applicant Name(s)

ROOTS AND RHYTHM LLC

Department of Alcoholic Beverage Control — State of California

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

ABC 211 (6/99)

TO: Department of Alcoholic Beverage Control
570 RANCHEROS DRIVE
SUITE 240
SAN MARCOS, CA 92069
(760) 471-4237

File Number: **673907**
Receipt Number: **3048338**
Geographical Code: **3700**
Copies Mailed Date: **October 7, 2025**
Issued Date:

DISTRICT SERVING LOCATION: **SAN MARCOS**

COSD CLERK OF THE BOARD
2025 OCT 9 AM 10:59

First Owner: **JULIAN HARD CIDER LLC**

Name of Business: **JULIAN HARD CIDER**

Location of Business: **2722 WASHINGTON ST**
JULIAN, CA 92036

County: **SAN DIEGO**

Is Premises inside city limits: **Yes** Census Tract: **0209.04**

Mailing Address: (If different from premises address) **16623 ADRIENNE WAY**
RAMONA, CA 92065

Type of license(s): **41** Dropping Partner: Yes___ No ✓

Transferor's license/name:

License Type	Transaction Type	Master	Secondary LT And Count
41 - On-Sale Beer And Wine - Eating	ORI	Y	

License Type	Transaction Description	Fee Code	Dup	Date	Fee
Application Fee	ADD PRIMARY LICENSE TYPE	NA	0	10/07/25	$1,105.00
41 - On-Sale Beer And Wine - Ea	ANNUAL FEE	NA	0	10/07/25	$550.00
				Total	$1,655.00

Have you ever been convicted of a felony? **No**
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **No**

STATE OF CALIFORNIA County of SAN DIEGO Date: October 7, 2025

Applicant Name(s)

JULIAN HARD CIDER LLC

Department of Alcoholic Beverage Control

State of California

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

ABC 211 (6/99)

TO: Department of Alcoholic Beverage Control
8620 SPECTRUM CENTER BLVD
STE 302
SAN DIEGO, CA 92123
(858) 300-6855

File Number: **673960**
Receipt Number: **3048929**
Geographical Code: **3700**
Copies Mailed Date: **October 8, 2025**
Issued Date:

DISTRICT SERVING LOCATION: **SAN DIEGO**

First Owner: **LUTAPAJ INC**

Name of Business: **LUTAPAJ**

Location of Business: **7175 HORSETHIEF CANYON RD**
ALPINE, CA 91901-2512

County **SAN DIEGO**

Is Premises inside city limits **Yes** Census Tract: **0212.02**

Mailing Address:(If different from premises address)

Type of license(s): **02** Dropping Partner: Yes___ No✓

Transferor's license/name:

License Type	Transaction Type	Master	Secondary LT And Count
02 - Winegrower	ORI	Y	

License Type	Transaction Description	Fee Code	Dup	Date	Fee
Application Fee	ADD PRIMARY LICENSE TYPE	NA	0	10/08/25	$1,105.00
Application Fee	FEDERAL FINGERPRINTS	NA	2	10/08/25	$48.00
Application Fee	STATE FINGERPRINTS	NA	2	10/08/25	$78.00
02 - Winegrower	ANNUAL FEE	GL5K	1	10/08/25	$150.00
				Total	$1,381.00

Have you ever been convicted of a felony? **No**
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **No**

STATE OF CALIFORNIA County of SAN DIEGO Date: October 8, 2025

Applicant Name(s)

LUTAPAJ INC

Department of Alcoholic Beverage Control
APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE
ABC 211 (6/99)

State of California

TO: Department of Alcoholic Beverage Control
8620 SPECTRUM CENTER BLVD
STE 302
SAN DIEGO, CA 92123
(858) 300-6855

File Number: **673950**
Receipt Number: **3048675**
Geographical Code: **3700**
Copies Mailed Date: **October 8, 2025**
Issued Date:

DISTRICT SERVING LOCATION: **SAN DIEGO**

First Owner: **KKS BROS**

Name of Business: **MEDITERRANEO ITALIANO BISTRO & BAR**

Location of Business: **1347 TAVERN RD**
STE 33 & 34 BLDG IV
ALPINE, CA 91901-3853

County: **SAN DIEGO**

Is Premises inside city limits: **No** Census Tract: **0212.05**

Mailing Address:(If different from premises address)

Type of license(s): **47** Dropping Partner: Yes___ No ✓

Transferor's license/name: **634177 / SILVHERC INC**

License Type	Transaction Type	Master	Secondary LT And Count
47 - On-Sale General Eating Place	PER	Y	

License Type	Transaction Description	Fee Code	Dup	Date	Fee
Application Fee	PERSON TO PERSON TRF	NA	0	10/07/25	$1,525.00
Application Fee	FEDERAL FINGERPRINTS	NA	5	10/07/25	$120.00
Application Fee	STATE FINGERPRINTS	NA	5	10/07/25	$195.00
47 - On-Sale General Eating Plac	ANNUAL FEE	P0	0	10/07/25	$960.00
				Total	$2,800.00

Have you ever been convicted of a felony? **No**
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **No**

STATE OF CALIFORNIA County of SAN DIEGO Date: October 7, 2025

Applicant Name(s)

KKS BROS