



**AGENDA ITEM EXECUTIVE SUMMARY**

**Agenda Item Number:** 5b

**Title:**

Recommendation to approve a Proposal for a B-1 Liquor License Application for Pho Ly Located at 305 W. Main St., St. Charles.

**Presenter:**

Police Chief James Keegan

**Meeting:** Government Operations Committee      **Date:** February 21, 2023

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted:

**Executive Summary** *(if not budgeted please explain):*

Pho Ly, located at 305 W. Main St., is requesting approval of a B-1 liquor license application for their business.

*This item will be discussed by the Liquor Control Commission at 4:30 pm on Tuesday, February 21, before consideration by this committee. A final vote will be taken during the March 6, 2023, City Council meeting.*

**Attachments** *(please list):*

Memo, Liquor License Application, Insurance Quote, Articles of Incorporation, Business Plan, Kitchen Plan, Site Plan, Floor Plan, Basset Certificates, Menu

**Recommendation/Suggested Action** *(briefly explain):*

Recommendation to approve a proposal for a B-1 Liquor License application for Pho Ly located at 305 W. Main St., St. Charles.



# Memo

Date: 2/8/2023  
To: Lora Vitek, Mayor - Liquor Commissioner  
From: James Keegan, Chief of Police  
Re: Background Investigation Pho Ly

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The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above-mentioned establishment.

As you're aware, this site has operated as a longstanding restaurant in St. Charles. Recently, the site sat vacant and the new tenants are seeking a liquor license in conjunction with opening a Vietnamese restaurant.

The site location/floor plans and the corresponding application materials were reviewed by my staff. We found nothing of a derogatory nature that would preclude either the site location or the applicants from moving forward with an on-site consumption license, subject to City Council approval.

The local manager does have several arrests in his background, all of which are several years old. Supervision or conditional discharge were ordered in each instance and the manager lives locally within our community. We have not had any adverse contacts with him.

Thank you in advance for your consideration in this matter.

1-5-23

City of St. Charles, Illinois Liquor Control Commission  
CITY RETAIL LIQUOR DEALER LICENSE APPLICATION



Incomplete applications will not be accepted.  
Applications may be submitted to: 2 E. Main Street, St. Charles, IL 60174-1984

Business Name Pho Ly Inc

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use
Application Fee of \$200 (5.08.070C) <b>non-refundable</b> <small>Non-refundable</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Completed Application for all questions applicable to your business.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Lease/Proof of Ownership	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	<input checked="" type="checkbox"/> <i>Quote received</i>	<input checked="" type="checkbox"/>
Copy of <u>Articles of Corporation</u> , if applicable.	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>pending</i>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is <b>only</b> needed for each manager. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees.	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>pending</i>
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>pending</i>
Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all <b>fixed</b> objects, such as pool tables, bar stools, vending/amusement machines; as well as all exits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Business Plan, to include: Hours of Operation Copy of Menu Whether or not live music will be played at this establishment Will there be outdoor seating and/or outdoor designated smoking area Do not include a marketing or financial plan with this business plan	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>pending</i> <i>Menu to come</i>
Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk thru and/or permit are necessary.	<input type="checkbox"/>	<input type="checkbox"/>
All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alcohol Tax Acknowledgement and Business Information Sheet	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>pending</i>

OFFICIAL USE ONLY

[Signature]  
Signature of Investigating Officer

Badge Number & Rank 3171 Guardian

Approval Recommended\*       Approval NOT Recommended  
[Signature]      2.8.23

Signature of Chief of Police      Date

**\*ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

Date Application Received: 1-5-23

**LICENSE INFORMATION:**

A Package \$3200-3600     A1     A2     A4     A5     A6  
 B Restaurant \$2400-3600     B1     B2     B3     Late Night Permit 1:00am \$800 (B/C only)  
 C Tavern \$2400-3600     C1     C2     C1     Late Night Permit 2:00am \$2300 (B/C only)  
 D Hotel/Banquet/Arcada/Q-Center/Entertainment/Club - \$varies    **D-Type** \_\_\_\_\_  
 G Brewery/Restaurant or Site License - \$varies     G1     G2  
 H Catering License - \$varies     H1     H2

*\*Initial Liquor License fees for A, B, C, D, G are reduced by 50% for annual renewals and licenses issued after Nov 1.  
 \*Licenses are valid until April 30 following issuance and a renewal application is required for the next year (May 1-April 30) (5.08.040)*

**APPLICANT INFORMATION**

1. Type of Business:     Individual     Partnership     Corporation     Other (explain):

2. Business Name:  
**Pho Ly Inc**

3. Business Address:  
**305 W. Main St. St. Charles, IL 60174**

4. Type of Business (5.08.070-3): <b>restaurant</b>	5. Length of Time in this Business (5.08.070-4): <b>18 years</b>	6: Value of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ <b>15,000</b>	
7. Business Phone:	8. Business E-mail: <b>minh200723@yahoo</b>	9. Business Website:	10. Illinois Tax ID Number:
11. Applicant/Contact Person Name: <b>Minh Ly</b>		12. Title: <b>president</b>	13. Email: <b>minh200723@yahoo.com</b>

last 10 years:

18. If Corporation, Corporation Name:  
**same as above**

19. Corporation Address (city, state, zip code):

**ADDITIONAL OWNERS, INVESTORS (greater than 5% interest), and MANAGER INFORMATION**

Full Name, include middle initial: **Mongdep Tran**    Title: **Vice-president**

B: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Driver's License#: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ S: **minh200723@yahoo.com**    Email Address: \_\_\_\_\_



Full Name, include middle initial: **Hai Ly** Title: **manager**

Birthdate: Birthplace: Driver's License#: Home Phone:

[Redacted information]

Full Name, include middle initial: Title:

Birthdate: Birthplace: Driver's License#: Home Phone:

Home Address, and all addresses for the last 10 years: Email Address:

**BUSINESS ESTABLISHMENT LOCATION INFORMATION**

1. Exact Street Address for liquor license: 305 W. Main St. St. Charles, IL 601	2. # Parking Spaces: 20	3. Outside Dining s.f. [17.20.020-R]: n/a	4. Total Building s.f.: 4,290
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5. Total # Seats: 90	6. Live Entertainment Area s.f. [5.08.010-H]: n/a
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7. Brief Business Plan description based on type of establishment listed above (5.08.070-6):  
Our restaurant will be full-service providing vietnamese dishes and drinks. Operation hours are Mondays, Wednesday-Sunday 11am-9pm.

**PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY**

Attach to this application a floorplan or layout of the proposed facility to include the following:

1. Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following:
  - a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;
  - b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);
  - c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.
2. The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license.
3. A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
4. It shall be unlawful for any licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.

**THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.**

**CORPORATION / PREMISES QUESTIONS**

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Is any individual a naturalized citizen? <input type="radio"/> Yes <input type="radio"/> No                  If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	<p>Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased</p>
3.	<p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p><b>Name of Building Owner:</b> Oleg Schulzhenko <b>Phone Number:</b> 312-391-0144  <b>Address of Building Owner:</b> 303 W. Main St. Ste 200 St. Charles, IL 60174 <b>E-mail Address:</b> oleg@orawin.com  <b>Mailing Address of Building Owner (if different):</b> n/a</p> <p><b>Name of Building Owner:</b> <b>Phone Number:</b>  <b>Address of Building Owner:</b> <b>E-mail Address:</b>  <b>Mailing Address of Building Owner (if different):</b></p> <p><b>Name of Building Owner:</b> <b>Phone Number:</b>  <b>Address of Building Owner:</b> <b>E-mail Address:</b>  <b>Mailing Address of Building Owner (if different):</b></p>
4.	<p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="radio"/> Yes <input checked="" type="radio"/> No                  If yes, please list the business name(s) and address(es):</p>
5.	<p>Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><i>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued. (5.08.050)</i></p>
6.	<p>Are any improvements planned for the building and/or site that will require a building permit? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, has a building permit been applied for? <input type="radio"/> Yes <input type="radio"/> No Date of permit application _____</p>
7.	<p>Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? <input type="radio"/> Yes <input checked="" type="radio"/> No                  If yes, what was the disposition of the application? Explain as necessary:</p>

8.	<p>Has applicant (and all persons listed on page 2 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is applicant (and all persons listed on page 2 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
9.	<p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit: n/a Location, City/State:</p> <p>Date: Special Explanations:</p> <p>Government Unit: Location, City/State:</p> <p>Date: Special Explanations:</p>
10.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p>
11.	<p>Complete ONLY if yes was answered to the question above (10):</p> <p>Name: Name of Business:</p> <p>Position with the Business: Date(s) of Denial:</p> <p>Reason(s) for Denial of License:</p>
12.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): 11/2/2022</p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): 11/2/22</p>
13.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business (5.08.070-11)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

14.	<p>All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 2 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done?    <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p> <p>If yes, date(s):</p>
15.	<p>Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)?    <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p> <p style="text-align: right;">If already furnished, date of delivery:</p>
16.	<p>Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?</p> <p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>

**B.A.S.S.E.T. TRAINING**

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.

Name (First, Middle, Last): Hai Ly	Birthdate: [REDACTED]		
Home Street Address, Incl City, State, Zip: [REDACTED]			
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:

Name (First, Middle, Last):	Birthdate:		
Home Street Address, Incl City, State, Zip:			
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:

Name (First, Middle, Last):	Birthdate:		
Home Street Address, Incl City, State, Zip:			
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:

Name (First, Middle, Last):	Birthdate:		
Home Street Address, Incl City, State, Zip:			
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:

**NEW MANAGEMENT REQUIREMENTS**

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

**COMMENTS/ADDITIONAL INFORMATION**



Business Name:  
Pho Ly Inc

SIGNATURES

  
Applicant's Signature

Subscribed and sworn before me this 5<sup>th</sup> day of January, 2023



Anne E. Healy  
Notary Public

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date: <u>02/03/23</u>	Name of Applicant: <u>Minh Ly, Mongdep Tran, Hai Ly</u>
Name of Business: <u>Pho Ly, Inc (DBA Pho Ly)</u>	
Address of Business: <u>305 W. Main St</u>	Ward Number: <u>4</u>

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

- Date on which applicant will begin selling retail alcoholic liquors at this location:  
As soon as City license is obtained
- Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station?  Yes  No
- If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business?  Yes  No  
  
If yes, answer a, b and c:  
a. State the kind of such business:  
b. Give date on which applicant began the kind of business named at this location:  
c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?  
 Yes  No
- If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church?  Yes  No  
  
If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore?  Yes  No

5.	<p>Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
6.	<p>Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Restaurant</i></p>
8.	<p>Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
9.	<p>Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
10.	<p>Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
11.	<p>It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
12.	<p>From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No          If no, state exceptions:</p>
13.	<p>Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fingerprinted by: <i>SCPD</i> Date: <i>01/19/03</i></p>
14.	<p>Other necessary data:</p>



1350 E. Touhy Avenue, Suite 200W  
Des Plaines, IL 60018  
(847)768-0040 / Fax (847)795-0080

**Quotation for  
Liquor Liability Coverage**

Quote Number: QC237032

Date: 12/19/2022

We are pleased to offer this quote which will remain valid for 30 days provided there are no rate changes taking effect. Renewal quotes will remain valid until the effective date listed under the policy term.

If between the date of this Quote and the Effective Date of the policy, there is a significant adverse change in the condition of this Applicant, or an occurrence of an event, or other circumstances which could substantially change the underwriting evaluation of the Applicant, then at the insurer's option, this quote may be withdrawn by written notice.

This Quote is based upon the preliminary information provided. Founders Insurance Company reserves the right to modify the terms and condition upon review of the completed application, loss runs for the preceding 5 years (minimum 3 years required) and any other information requested by the underwriter herein or if such material change in the risk is discovered after binding.

**AGENT INFORMATION**

Agent: WEER INSURANCE AND FINANCIAL SERVICES, INC.  
Address: 2409 Westward Dr.  
Spring Grove, IL 60081  
Telephone: (815) 675-1007

**APPLICANT INFORMATION & POLICY TERM**

Applicant Name: MINH LY  
Doing Business As: PHO.LY  
Contact Name: MINH LY  
Telephone: (630) 517 8112  
Policy Term: 12/26/2022 To: 12/26/2023

**LOCATION INFORMATION**

Location # 1  
305 MAIN ST  
ST CHARLES, IL 60174

Location	Total Premium
# 1	\$1,715
<b>Founders' Total:</b>	<b>\$1,715</b>

**FORM BCA 2.10**  
**ARTICLES OF INCORPORATION**  
 Business Corporation Act

Filing Fee: \$150

File #: 73978238

Approved By: MAP

**FILED**  
**OCT 31 2022**  
**Jesse White**  
**Secretary of State**

1. Corporate Name: PHO 92, INC.

2. Initial Registered Agent: MINH LY  
First Name Middle Initial Last Name

Initial Registered Office: 305 W MAIN ST  
Number Street Suite No.  
SAINT CHARLES IL 60174-1813 KANE  
City ZIP Code County

3. Purposes for which the Corporation is Organized:  
 The transaction of any or all lawful businesses for which corporations may be incorporated under the Illinois Business Corporation Act.

4. Authorized Shares, Issued Shares and Consideration Received:

Class	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
COMMON	1000	1000	\$ 1000

**NAME & ADDRESS OF INCORPORATOR**

5. The undersigned incorporator hereby declares, under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated OCTOBER 31, 2022  
Month & Day Year

MINH LY  
Name

[REDACTED]  
Street  
[REDACTED]  
City/Town State ZIP Code



FORM **BCA 10.30**  
**ARTICLES OF AMENDMENT**  
Business Corporation Act

Secretary of State  
Department of Business Services  
Springfield, IL 62756

File # 7397-823-8

Approved: MAP

Filing Fee: \$50

**FILED**

**Nov 02, 2022**

**Jesse White**  
**Secretary of State**

1. Corporate Name:

PHO 92, INC.

2. Manner of Adoption of Amendment:

The following amendment to the Articles of Incorporation was adopted on Nov 02, 2022  
in the manner indicated below: Month & Day Year

- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. At a meeting of shareholders, not less than the minimum number of votes required by statute and by the Articles of Incorporation were voted in favor of the amendment.
- By the shareholders, in accordance with Sections 10.20 and 7.10, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by shareholders having not less than the minimum number of votes required by statute and by the Articles of Incorporation. Shareholders who have not consented in writing have been given notice in accordance with Section 7.10.
- By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by all the shareholders entitled to vote on this amendment.

3. Text of Amendment:

When amendment effects a name change, insert the New Corporate Name below.

Article I: Name of the Corporation:

PHO LY, INC.

4. The undersigned Corporation has caused these Articles to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated Nov 02, 2022  
Month & Day Year

Exact Name of the Corporation:

PHO 92, INC.

MINH LY

Authorized Officer's Signature

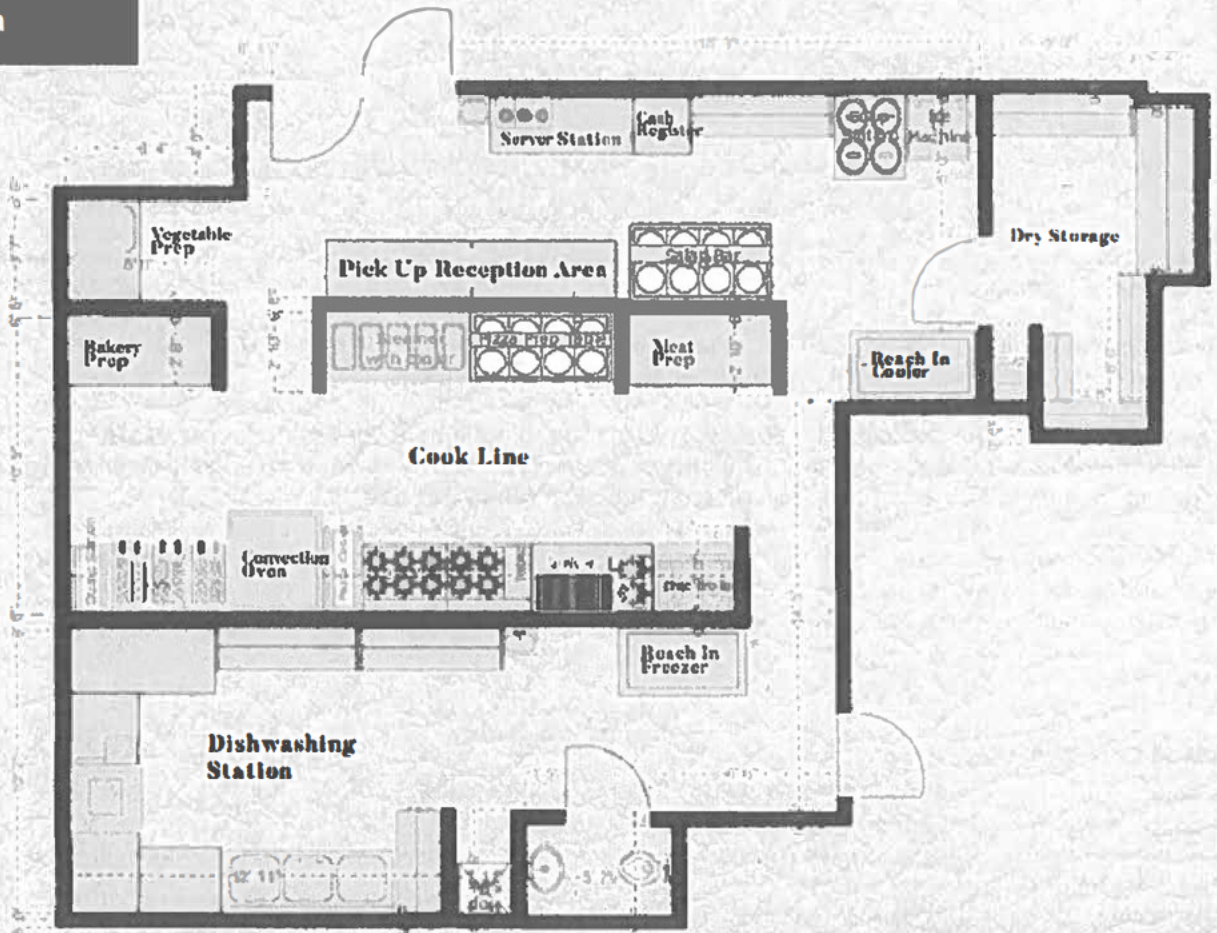
PRESIDENT

Title

## Pho Ly Inc Business Plan

Pho Ly is a full-service restaurant providing vietnamese dishes and drinks. Hours of operation are Mondays, Wednesday-Sunday 11am-9m. There will be no live music or outdoor seating or outdoor designated smoking area. Copy of menu to come.

# Kitchen Plan



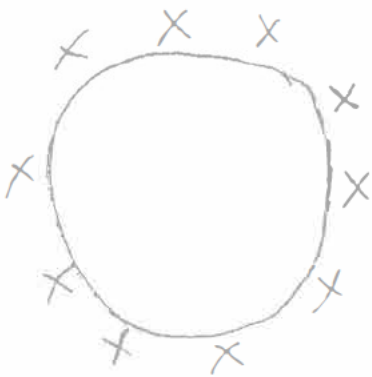




Kitchen

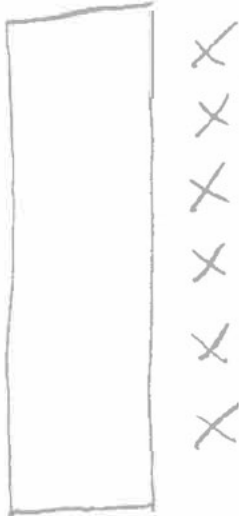
EXIT

women's

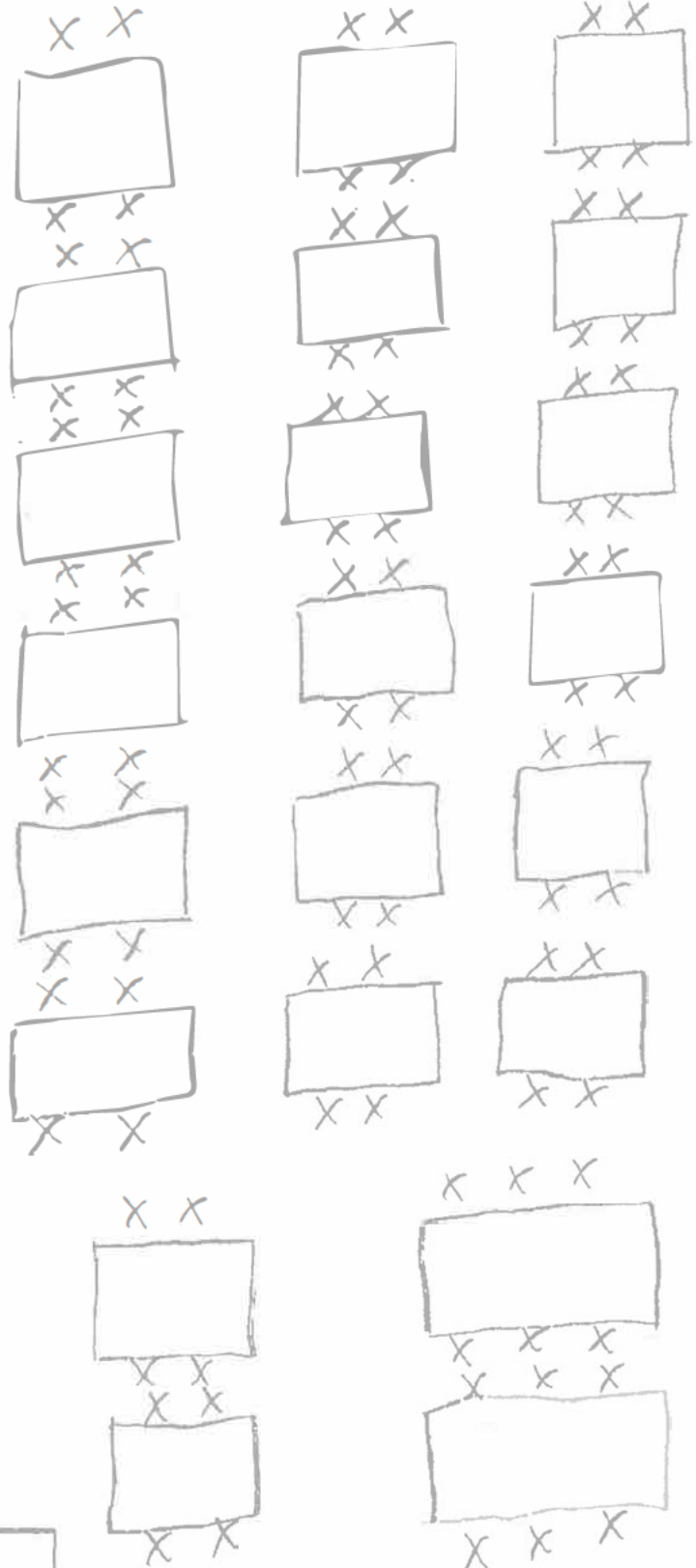


Men's

bar



exit



# Congratulations!

You have successfully completed the ServSafe® Training and Certificate Program. This is your official ServSafe Alcohol Certificate Card and provides confirmation that you have studied, and are knowledgeable about, how to serve alcohol responsibly.

Thank you for participating in the ServSafe Alcohol program. Responsible alcohol service begins with the choices you make, and ServSafe Alcohol training will help you make the right decision when the moment arises.

By completing the ServSafe Alcohol program, you show your dedication to safe and responsible alcohol service. The ServSafe Alcohol program and the National Restaurant Association are dedicated to helping you continue to raise the bar on alcohol safety.

To learn more about our full suite of responsible alcohol service training products, contact your State Restaurant Association, your distributor or visit us at [ServSafe.com](http://ServSafe.com).

We value your dedication to responsible alcohol service and applaud you for making the commitment to keep your operation, your customers and your community safe.

Sincerely,



Sherron Brown

Executive Vice President, National Restaurant Association Solutions



**ServSafe**  
**ServSafe Alcohol® CERTIFICATE**

ID # 227652763  
CARD # 25002015



HAILEY

NAME

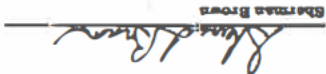
1/8/2023

DATE OF EXAMINATION

*(will expire three years from the date of examination. Local laws apply.)*

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Sherron Brown, Executive Vice President, National Restaurant Association Solutions



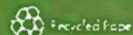
This certificate confirms completion of the ServSafe Alcohol responsible alcohol service program.

In Alaska you must laminate your card for it to be valid.

NATIONAL  
RESTAURANT  
ASSOCIATION

235 South Wacker Drive  
Suite 3600  
Chicago, IL 60606-6383  
1.800.SERVSAFE  
312.715.1010 In the Chicago area  
[ServSafe.com](http://ServSafe.com)

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# Congratulations!

You have successfully completed the ServSafe® Training and Certificate Program. This is your official ServSafe Alcohol Certificate Card and provides confirmation that you have studied, and are knowledgeable about, how to serve alcohol responsibly.

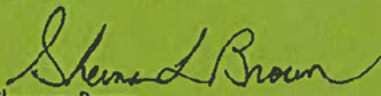
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Sincerely,



Sherman Brown  
Executive Vice President, National Restaurant Association Solutions



ID # 23270203  
CARD # 23231560

## ServSafe Alcohol® CERTIFICATE

MINI LY

NAME  
2/7/2023

DATE OF EXAMINATION  
Card expires three years from the date of examination. Local laws apply.



This certificate confirms completion of the ServSafe Alcohol responsible alcohol service program.

  
Sherman Brown  
Executive Vice President, National Restaurant Association Solutions

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**NOTE:** You can access your score and certification information anytime at [ServSafe.com](http://ServSafe.com).

If you have any questions regarding your certification please contact the National Restaurant Association Service Center at [ServiceCenter@restaurant.org](mailto:ServiceCenter@restaurant.org) or 800.765.2122, ext. 6703.

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Sincerely,



Sherman Brown

Executive Vice President, National Restaurant Association Solutions



ID # 22019518  
CARD # 22106560

## ServSafe Alcohol® CERTIFICATE

MONGDEP TRAN



NAME \_\_\_\_\_  
1/29/2023  
DATE OF EXAMINATION \_\_\_\_\_  
Card expires three years from the date of examination. Local laws apply.

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Sherman Brown  
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**All noodle roll rice noodles are served with lettuce, bean sprouts, fried onions, peanuts & vegetables. Served with a side of fish sauce.**

- |  |        |
|--|--------|
| 33. <b>Bún Đậu Mắm:</b><br>Special rice vermicelli with chicken, pork, shrimp, beef and an eggroll.                                      | \$4.99 |
| 34. <b>Bún Thịt Nướng Chả Giò:</b><br>Vermicelli rice noodles with grilled pork and an eggroll.  | \$3.99 |
| 35. <b>Bún Bò Nướng Chả Giò:</b><br>Vermicelli rice noodles with grilled beef and an eggroll.  | \$3.99 |
| 36. <b>Bún Nấm Chả Giò:</b><br>Vermicelli rice noodles and an eggroll.   | \$3.99 |
| 37. <b>Bún Tôm Nướng Chả Giò:</b><br>Vermicelli rice noodles with grilled shrimp and an eggroll.   | \$3.99 |
| 38. <b>Bún Gà Nướng:</b><br>Vermicelli rice noodles with grilled chicken.  | \$3.99 |
| 39. <b>Bún Bò Huế Mắm:</b><br>Spicy low-style noodle soup with Vietnamese bean curd pork & beef. Baked bread egg available upon request. | \$4.99 |
| 40. <b>Bún Riêu:</b><br>Noodle, shrimp paste, meat, vegetables & rice vermicelli.  | \$4.99 |
| 41. <b>Bún Chay:</b><br>Vegetarian noodle salad stir-fried vegetables and fried tofu served on rice noodles.                             | \$4.99 |



**Add Any Extras To Your Dish**

- |                  |        |
|------------------|--------|
| Extra Meat       | \$1.00 |
| Extra Mushrooms  | \$1.00 |
| Extra Noodles    | \$1.00 |
| Extra Vegetables | \$1.00 |

- |  |        |
|--|--------|
| 42. <b>Hủ Tôm Thịt Cơm:</b> Rice noodles with a combination of shrimp, pork, fish cake & squid.                  | \$4.99 |
| 43. <b>Hủ Thịt Bò Khô:</b> Beef stew with noodles.   | \$4.99 |
| 44. <b>Mì Bò Khô:</b> Beef stew with egg noodles.  | \$4.99 |
| 45. <b>Mì Thịt Cơm:</b> Egg noodles with a combination of shrimp, pork, fish cake & squid.                       | \$4.99 |
| 46. <b>Mì Xào Thịt Cơm:</b> Stir-fried egg noodles with a combination of shrimp, pork, fish cake & squid.        | \$4.99 |
| 47. <b>Hủ Thịt Khô Ấp Cháo:</b> Stir-fried rice noodles with a combination of shrimp, pork, fish cake and squid. | \$4.99 |
| 48. <b>Mì Xào Chay:</b> Stir-fried vegetable noodles with tofu & vegetables.                                     | \$4.99 |

**GIẢI KHÁT - Beverages**

- |   |        |
|---|--------|
| 49. <b>Cà Phê Sữa Đá:</b> Coffee with sweetened milk served over ice. | \$1.00 |
| 50. <b>Nước Chanh:</b> Lemon juice.                                   | \$1.00 |
| 51. <b>Sinh Tố:</b> Smoothie. Choose Avocado, Mango, Strawberry.      | \$2.00 |
| 52. <b>Sinh Tố Chanh:</b> Vietnamese sweetened milk egg with.         | \$1.00 |
| 53. <b>Đá Chanh:</b> Lemon juice with ice.                            | \$1.00 |
| 54. <b>Nước Chanh Vắt:</b> Freshly squeezed orange juice.             | \$1.00 |
| 55. <b>Nước Sốt:</b> Soda, Diet Coke, Pepsi, 7 Up.                    | \$1.00 |
| 56. <b>Trà Húng:</b> Hot tea.   | \$1.00 |
| 57. <b>Trà Đá:</b> Hot tea.   | \$1.00 |



# Phở Ly

Authentic Vietnamese Cuisine



**Business Hours**

Monday, Wednesday, Thursday: 11am - 9pm  
Friday & Saturday: 10am - 9pm  
Sunday: 11am - 9pm  
Closed Tuesday

www.PhLYStCharles.com  
**630-797-6099**

305 W. Main Street, St. Charles, IL 60174



**Khai Vị - Appetizers**

- |   |        |
|---|--------|
| 1. <b>Chả Giò (3 Pcs):</b> Crispy egg rolls deep fried Vietnamese egg roll filled with ground pork, mushrooms & carrots.  | \$4.99 |
| 2. <b>Chả Cua (3 Pcs):</b> Spring roll rice paper wrappers filled with lettuce, meat, bean sprouts, rice noodles, pork, shrimp, served with peanut sauce on the side. | \$4.99 |
| 3. <b>Mắm Chấm Gà:</b> Fried crispy squid.  | \$1.99 |
| 4. <b>Tôm Chấm Gà:</b> Fried crispy shrimp.   | \$1.99 |
| 5. <b>Thịt Chấm Chấm:</b> Crispy chicken wings.   | \$1.99 |
| 6. <b>Chả Gà Chấm Mắm:</b> Fried chicken wings.   | \$1.99 |
| 7. <b>Chả Gà Chấm Mắm:</b> Fried chicken wings.   | \$1.99 |
| 8. <b>Mắm Xào:</b> Vietnamese crispy pancake with shrimp, pork, bean sprouts, lettuce meat sauce & served with fish sauce.  | \$3.99 |
| 9. <b>Thịt Xào Mắm:</b> Crispy fried rolls.   | \$3.99 |
| 10. <b>Cá Xào Mắm:</b> Crispy fried rolls.  | \$3.99 |
| 11. <b>Gỏi Chua Bò:</b> Sweet and sour beef tenderloin salad with green cabbage & banana blossoms.  | \$3.99 |



**Bánh Mì - Vietnamese Sandwiches**

Sandwiches served with pickled daikon and carrots, thick cucumber sauce, fresh cilantro and sliced jalapenos.

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| 12. <b>Bánh Mì Đậu Mắm:</b> Special Vietnamese sandwiches combination of beef, pork & pork roll, lettuce and bread cheese. | \$4.99 |
| 13. <b>Bánh Mì Thịt Heo Nướng:</b> Vietnamese sandwich with grilled pork.  | \$4.99 |
| 14. <b>Bánh Mì Thịt Bò Nướng:</b> Vietnamese sandwich with grilled beef.   | \$4.99 |
| 15. <b>Bánh Mì Bò Khô:</b> Vietnamese sandwich with beef stew.   | \$4.99 |



**Phở - Rice Noodle Soup**

Rice noodles with bean sprouts, basil and jalapenos on the side.

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|---|-------------------------------|
| 16. <b>Phở Gà:</b> Special Combination Noodle Soup with sliced steak, beef tenderloin, fish, and tendon, soup & vegetables. (Chicken, beef, medium or well done). | Medium \$3.99<br>Large \$4.99 |
| 17. <b>Phở Thịt:</b> Sliced steak noodle soup. (Chicken, beef, medium or well done).  | \$3.99                        |
| 18. <b>Phở Tôm:</b> Tendon noodle soup. (Chicken, beef, medium or well done).   | \$3.99                        |
| 19. <b>Phở Thịt Nướng:</b> Steak, fish & soft tendon noodle soup.   | \$3.99                        |
| 20. <b>Phở Thịt Khô:</b> Steak, tripe noodle soup.  | \$3.99                        |
| 21. <b>Phở Thịt Gà:</b> Steak, fish & soft tendon noodle soup.  | \$3.99                        |
| 22. <b>Phở Bò Viên:</b> Meatball noodle soup. (Chicken, beef, medium or well done).   | \$3.99                        |
| 23. <b>Phở Thịt Gà:</b> Steak, fish & soft tendon noodle soup.  | \$3.99                        |
| 24. <b>Phở Thịt Chấm:</b> Steak, fish & soft tendon noodle soup.  | \$3.99                        |
| 25. <b>Phở Gà Chấm:</b> Chicken noodle soup.  | \$3.99                        |
| 26. <b>Phở Chay:</b> Vegetarian noodle soup made with vegetable broth. No meat. Vegetarian options available upon request.  | \$3.99                        |



**CƠM - Steamed Rice**

Served with steamed rice & a side of fish sauce.

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| 27. <b>Cơm Thịt Heo Chả:</b> Grilled pork chop & stir-fried pork slices. A steamed pork egg custard.                | \$4.99 |
| 28. <b>Cơm Thịt Nướng:</b> Grilled pork chop.   | \$3.99 |
| 29. <b>Cơm Bò Nướng:</b> Grilled beef.  | \$3.99 |
| 30. <b>Cơm Gà Nướng:</b> Grilled chicken.   | \$3.99 |
| 31. <b>Cơm Gà Xào Mắm:</b> Lemongrass chicken.  | \$3.99 |
| 32. <b>Cơm Chấm Đậu Mắm (Gà, Heo, Bò Viên Tôm):</b> Special fried rice (with Chicken, Pork, Beef or Shrimp).        | \$4.99 |
| 33. <b>Cơm Chấm (Gà, Heo Bò Hoặc Tôm):</b> Fried rice (Chicken, Pork, Beef or Shrimp).                              | \$3.99 |
| 34. <b>Cơm Bò Khô:</b> Beef stew with sauce etc.  | \$3.99 |
| 35. <b>Cơm Thịt Bò Đậu Mắm:</b> Beef tenderloin stir fry.   | \$3.99 |
| 36. <b>Bò Lạc Lạc:</b> Steamed rice with french style beef marinated beef cubes with carrots, cucumbers & cilantro. | \$4.99 |
| 37. <b>Cá Húng Chấm Mắm Mắm:</b> Deep fried whole red snapper. (Market Price)                                       |        |
| 38. <b>Cơm Chay:</b> Vegetarian steamed rice stir-fried with vegetables & steamed rice.                             | \$3.99 |



Authentic Vietnamese Cuisine

