

Exhibit 1 Item 3-A, 7-2-18 Zoning Administrator Hearing

LICENSED PREMISES DIAGRAM (RETAIL)

APPLICANT NAME (Last, first, middle)		2. ```
Elizabell FREITAS		and the second s
3. PREMISES ADDRESS (Street number and name, city, zip co	$bd\theta)$	4. NEAREST CROSS STREET
1130 BALLENA BIVD, AU	AMEDA CA 9.4501	CENTRAL
The diagram below is a true and correct description of the entrances exite interior wells and extension		
The diagram below is a true and correct description of the entrances, exits, interior walls and exterior boundaries of the premises to be licensed, <i>including dimensions and identification of each room (i.e., "storeroom", "office", etc.)</i> .		
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It is hereby declared that the above-described boundaries, entrances and planned operation as indicated on the reverse side, will not be changed without first notifying and securing prior written approval		
ADVICALT OF ALTER A		
APPLICANT SIGNATURE (Only one signature required)		DATE SIGNED
CERTIFIED CORRECT (Signature)	PRINTED NAME	INSPECTION DATE
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