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Δ
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PAUL C. TAYLOR, OF COUNSEL Δ+

ADMITTED TO PRACTICE +NY, +CT, *PA, ΔNJ, ΩMA, ΦCA

March 5, 2025

Via FedEx Overnight Delivery

Manhattan Community Board 8 505 Park Avenue, Suite 620 New York, NY 10022 RECEIVED

MAR 06 2025

BY COMMUNITY BOARD 8

Re:

Roccos Partners LLC

License ID: 0240-24-116096

To Whom It May Concern:

Please accept the enclosed Standardized 30-Day Notice for filing. Thank you in advance for your anticipated attention to the enclosed notice. Should you have any questions or require any additional documentation please do not hesitate to contact me at (212) 837-8482.

Yours truly,

Michael Paleudis, Esq.

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Enclosure

cc: Rocco Sacramone, via email



Standardized NOTICE FORM for Providing Notice to a Local Municipality for Adding or Removing Contiguous and/or Non-Contiguous Municipal Space

Doc ID: 05281d4ab1f76098d3d054045137b29ecc4c8cf7

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1. Date Notice Was Sent:	March 5, 2025	1a. Delivered by:	edEx (Overnight D	elivery		-	
2. This form must be subm	nitted to the clerk or Local M	lunicipality when filing	for a Su	ınday On-Prer	nises Sales F	'ermit		
This N	Notice is Being Provided to	the Clerk of the follo	wing Lo	cal Municipa	lity			
3. Name of Municipality:	Manhattan Community	y Board 8			07 100000		(100 cm (2)	
		Licensee Informati	ion					
4. License Serial Number:	6024388 License ID:	0240-24-116096	5. Perr	nit Date(s):	n/a			
6. License name:	Roccos Partners	occos Partners						
7. Trade Name (if any):	L'Incontro by Rocco				-	13		
8. Street Address of Establ	lishment: 1572 2nd Aven	ue						
9. City, Town or Village:	New York			,NY	Zip Code :	10028		
10. Business Telephone Nu	umber of Applicant/License	e: (917) 697-4244						
11. Business E-mail of App	olicant/Licensee: [linco	ontro@hotmail.com						
12. Describe municipal spa	ace to be added: Sidewall	k Cafe						
12a. What date did you app	ply for a municipal permit?	12/9/24						
Repr	esentative or Attorney rep	resenting the license	e					
13. Representative/Attorn	ey's Full Name: Michael	J. Paleudis, Esq.						
14. Street Address:	100 Canal Pointe Boule	vard, Suite 125						
15. City, Town or Village:	Princeton		·	<u> </u>	7:- 6-4-	00540		
15. City, fowfroi vinage.	Filliceton		State: [VJ	Zip Code :	08540		
16. Business Telephone Nu	umber of Representative/Att	torney: (212) 837-84	182					
17. Business Email Address	s: mjp@kplawyers.com							
answers therein; that the sto make the statements at		dge; that I have been a on on behalf of said lice th statements and anse	uthorize ensee wi wers itsel	d, by order of th the same fo f.	the Board o	of Directo ect as if s	ors of said licensee said licensee made	
	nature, I affirm - under Pena	Ity of Perjury - that th				m are tr	ue.	
18. Printed Name: Rocco	Sacramone		Title	LLC Manag	ger			
Signature: X / S	<u> </u>							
The above capt Liquor Authorit	tioned on-premises license by to sell alcoholic beverag	e is applying for an a es on municipal spac	lteration e.	n to their exis	ting license	• with ti	he State	
Please forward The New York S	any concerns regarding th tate Liquor Authority by e	ne issuance of the alternatives	eration t	o the attentic	on of			
08/20/2024	,				Page 4	of 4	Print Form	