



# Legal Notices Transmittal and Scanning Separator Sheet

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## Legal Notice Type: Legal Mailings

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Date of Transfer to ERM: 2/6/2012

Page Count: 3

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Meeting Date: 2/15/2012

Meeting Type: City Council <=>

Case Number(s): VAC-43891 <=>

Subject of Affidavit: APPLICANT: LUCKY DRAGON, LLC - OWNER: LUCKY DRAGON, LLC AND SAHARA INVESTMENTS, LLC - Vacate A PORTION OF AN EXISTING ALLEY SOUTH OF CINCINNATI AVENUE AND EAST OF TAM DRIVE <=>

Record Series: Legal Notices

LRDA Number: 2007-1717

Retention: Permanent

File By: Meeting Date

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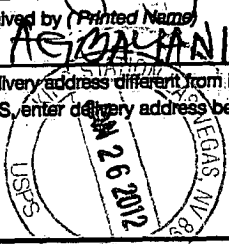
Prepared By: acrolli

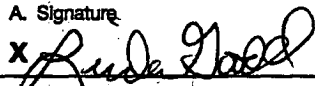
Scanned By:



QC By:

FEB 20 2012

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature   <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> <p style="text-align: right;">Case: VAC-43891</p> <p>16204811028            LUCKY DRAGON L L C            601 S 10TH ST #201            LAS VEGAS NV 89101-7027 89101-7027</p> </div>		<p>B. Received by (Printed Name) C. Date of Delivery               A-AGIBAJANI 1/26/12</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            If YES, enter delivery address below:</p>	
		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7007 3020 0003 1596 5992</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature   <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> <p style="text-align: right;">Case: VAC-43891</p> <p>16204807004            SAHARA INVESTMENTS L L C            ROYAL ASSOCIATES            9710 W TROPICANA AVE #120            LAS VEGAS NV 89147-8498 89147-8498</p> </div>		<p>B. Received by (Printed Name) C. Date of Delivery            Linda Corbell 1/27/12</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            If YES, enter delivery address below:</p>	
		<p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7007 3020 0003 1596 5985</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name) RONALD L RYAN	C. Date of Delivery 1-26-12
1. Article Addressed to:  2/15/2012 VAC-43891 Mr. Greg Borgel Moreno & Associates 300 South Fourth Street, Suite #1700 Las Vegas, Nevada 89101	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		
7005 3110 0002 6466 3837		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name) Linda Goodell	C. Date of Delivery 1/27/12
1. Article Addressed to:  2/15/2012 VAC-43891 Mr. Andrew Fonfa Sahara Investments, LLC Lucky Dragon, LP 9710 West Tropicana Avenue, Suite #120 Las Vegas, Nevada 89147	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		
7005 3110 0002 6466 3820		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

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<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Linda Gooder</u> C. Date of Delivery <u>1/27/12</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: right;">Case: VAC-43891</p> <p>16204814002  SAHARA INVESTMENTS L L C  9710 W TROPICANA AVE #120  LAS VEGAS NV 89147-8498 89147-8498</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number  (Transfer from service label)</p>	<p><b>7007 3020 0003 1596 5978</b></p>
<p>PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540</p>	

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<p>1. Article Addressed to:</p> <p>2/15/2012 VAC-43891  Mr. Andrew Fonfa  Lucky Dragon, LP  3575 Post Road, Suite #1  Las Vegas, Nevada 89118</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number  (Transfer from service label)</p>	<p><b>7007 3020 0003 1596 9778</b></p>
<p>PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540</p>	