## Please provide the following Information about your business Please select what best describe your business. • Existing Business (in operation more than six (6) months) **Business Name** Form of Ownership Island Chill Limited Liability Company (LLC) **Business Address** 7823 Military Ave Omaha, Nebraska 68134 **United States** Date the business was established 05/05/2020 **Company representative First Name Last Name** Hernandez Deshawn **Phone Number Email** (402) 687-0801 Islandchill402@gmail.com Name of Presenter

#### More about your business

#### Certificate of good standing from the Secretary of State's Office

• IMG\_1302.pdf

Deshawn Hernandez

Nature of business - include a brief description of the product/service and the nature of your market. Submit product brochures, links to social media sites, and any other company literature. Please only share non-confidential.

Island Chill is a family operated food truck specializing in frozen beverages, Boba tea, coffee and lemonades. We offer salads and finger food options. We are known for keeping the city cool. Island Chill also hosts small business markets showcasing local entrepreneurs. You can find us at, Islandchill402 on all social media platforms.

#### **Customer segment served**

We have something for everyone.

#### Goals for joining the accelerator

My goal is to scale and strengthen all of my weaknesses in order to reach my full potential. **Upload a 3-minute Elevator Pitch Video** • Island-Chill.mp4 Headshot of the company's CEO • IMG 4115.jpg Does the business own all rights (including intellectual property) to the material submitted and presented for this competition? Yes Describe your business, product or service and what differentiates it from your competitors. I believe I'm the only female minority owned slushy/Boba/ beverage food trailer. Current status or stage of development of business: (e.g. working on prototype, produce in advanced development, etc.) Operating. Current sales revenue (dollar volume per What is your gross annual revenue? (dollar volume per year) month) \$1,000.00 \$12,000.00 Number of employees (include **Projected Number of Projected number of employees** in 24 months principals) employees in 12 months **Part Time Full Time Part Time Full Time Part Time Full Time** 1 2 Is this your original concept? Is this your primary business? Yes Yes Please specify your ethnicity. What is your age? Two or More 30-45 Is the business owned by a veteran? Is at least 51% of the business owned and controlled by a woman? No Yes Is your company a small business? Do you have any investors or partners? No Yes Is your business currently licensed or Is at least 51% of the business is owned, and

controlled by an ethnic minority and please

registered in the State of Nebraska or Iowa?

Yes	specify which one.	
	African American	
Type of financing used to operate a business to date		
Personal Resources		
Status of Business Plan		
Not yet started		

### Would you like free business advisory assistance in writing a business plan?

Yes

#### Types of business assistance needed (Check all that apply)

- Business Strategic Plan development
- Funding for start-up and maintenance
- Commercialization
- Promotion and marketing assistance
- Programs Sales/Marketing
- Business Networking Opportunities
- Legal/Patent Services

#### Do you need help building your Pitch Black registration material?

Yes

# Please explain what services you or your organization can offer other clients of the Business Accelerator Program:

We offer catering services currently. I am also willing to share any knowledge or experience I have.

#### Consent 1

✓ I understand the Pitch Black Accelerator Program is designed to support the Midlands African Chamber emerging businesses to succeed and thrive. Participating in the Pitch Black Accelerator Program necessitates interaction with the assigned mentor, attendance at educational and networking sessions, and reporting to the Midlands African Chamber on business changes. Once selected as a Pitch Black Accelerator participant, I must become a member of the Midlands African Chamber.

#### **Consent 2**

✓ By registering and participating in this program, I consent to the recording of my likeness, image and/or voice and authorize the Midlands African Chamber to use photographs, videos, and audio recordings containing my likeness, image and/or voice in any medium for any purpose

#### **Consent 3**

✓ I agree to the terms and conditions of the <u>Pitch Black Accelerator Program</u>.

#### **Applicant's Name**

Deshawn Hernandez

Applicant's Title	
Owner	
Date	Signature
12/15/2022	Deshawn Hernandez
Approved? (Admin-only)	
• Approved	