



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

**Department of Commerce, Community,
and Economic Development**

ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

December 7, 2018

Piccolino's Restaurants, Inc.
DBA Piccolino's (License #4965)
12801 Old Glenn Highway
Eagle River, AK 99577

Dear Piccolino's Restaurants, Inc.:

The attached accusation is being served on you in accordance with AS 04.11.510(c) and has been filed with the Alcoholic Beverage Control Board. In accordance with AS 44.62.360, the accusation is a written statement of charges setting out the acts or omissions with which you are charged. It specifies the statutes and regulations that you are alleged to have violated.

In accordance with AS 04.11.510(c), you are entitled to an opportunity to informally confer with the director or the board **within 10 days** after the accusation is served. If you wish to informally confer with either the board at their meeting on December 17 or with me, please let me know as soon as possible: erika.mcconnell@alaska.gov or 907-269-0351.

Unless a written request for a hearing signed by or on behalf of the person named as respondent in the accompanying accusation is delivered or mailed to AMCO within 15 days after the accusation was served on you or within 15 of the informal conference should you choose to request one, the Alcoholic Beverage Control Board may act upon the accusation without a hearing. The request for a hearing may be made by delivering or mailing the enclosed form entitled "Notice of Defense," or by delivering or mailing a notice of defense as provided by AS 44.62.390 to:

Administrative Officer
Department of Commerce, Community, and Economic Development
Alcohol and Marijuana Control Office
550 West 7th Ave, Suite 1600
Anchorage, AK 99501

If you request a hearing before the Alcoholic Beverage Control Board, a hearing will be scheduled at the next available meeting, and you will be given notice at least 10 days before the hearing in accordance with AS 44.62.420.

Sincerely,

A handwritten signature in cursive script that reads "Erika McConnell".

Erika McConnell
Director

CC: Alcoholic Beverage Control Board
Harriet Dinegar, Assistant Attorney General, Department of Law
License File

ALASKA DEPARTMENT OF COMMERCE, COMMUNITY, AND
ECONOMIC DEVELOPMENT
ALCOHOL AND MARIJUANA CONTROL OFFICE

In the matter of:)
)
Piccolino's Restaurants, Inc.)
DBA Piccolino's)
12801 Old Glenn Highway)
Eagle River, AK 99577,)
Respondent)
_____) License #4965

NOTICE OF DEFENSE / REQUEST FOR HEARING

The Respondent, pursuant to AS 44.62.390, hereby gives Notice of Defense in this proceeding. A hearing on the matters set forth in the Decision is hereby requested.

I. Respondent Initiating Request

Date: _____ Respondent's Name (printed): _____

Respondent's Signature: _____

Mailing Address: _____

City State Zip Code

Phone Number: _____

OR

II: Attorney Representing Respondent (Note: An attorney is not required for this proceeding.)

Name of Attorney Representing Respondent: _____

Mailing Address: _____

City State Zip Code

Phone Number: _____

Date: _____ Signature: _____

NOTE: This Notice of Defense/Request for Hearing must be signed by or on behalf of Respondent, must set forth Respondent's current mailing address, and must be filed **within 15 days** after the enclosed Decision was mailed or delivered to the Respondent (time period held in abeyance for informal conference). It shall be filed accordingly:

Administrative Officer
Department of Commerce, Community, and Economic Development
Alcohol and Marijuana Control Office
550 West 7th Ave, Suite 1600
Anchorage, AK 99501

STATE OF ALASKA

ALCOHOLIC BEVERAGE CONTROL BOARD

In the matter of)
Piccolino's Restaurants, Inc.)
DBA Piccolino's)
12801 Old Glenn Highway)
Eagle River, AK 99577,)
Respondent)
_____) Accusation No. 2018-08

ACCUSATION

Petitioner, Erika McConnell, Director of the Alcoholic Beverage Control Board, acting in her official capacity and upon information and belief, alleges as follows:

INFORMATION

1. Respondent, Piccolino's Restaurants, Inc., DBA Piccolino's Restaurant, is the holder of a restaurant or eating place license, located at 551 W. Parks Highway, Wasilla, Alaska, license #4965.
2. According to board records, Piccolino's Restaurants, Inc., is owned 51% by Tara L. Petricca and 49% by Francisco Eduardo Rodriguez.
3. According to the Division of Corporations, Business, and Professional Licensing, Piccolino's Restaurants, Inc., is a business corporation in good standing with the State of Alaska, owned 100% by Tara Petricca.
4. License #4965 was first issued on March 0, 2010.

COUNT 1

5. Petitioner incorporates paragraphs 1-4 of this accusation as if fully set forth in Count 1.

6. On September 14, 2016, AMCO received an email from Tara Petricca, stating that she and her husband, Francisco Rodriguez, were divorcing, and a court ordered that Mr. Rodriguez operate the Wasilla Piccolino's license (#4965) under a new company. At that time, Piccolino's Restaurants, Inc., was owned by 51% by Tara Petricca and 49% by Francisco Rodriguez. (Attachment A)

7. On September 18, 2017, a change of officials was filed with the State of Alaska Division of Corporations, Business, and Professional Licensing for Piccolino's Restaurants, Inc. The change removed Francisco Rodriguez as an owner and listed Tara Petricca as 100% owner. No change of officials report was sent to the ABC Board. A Notice of Violation was issued. (Attachment B)

8. An application to transfer the ownership of license #4965 from Piccolino's Restaurants, Inc., to Francisco Rodriguez was received on October 27, 2017. After required corrections were not made timely, the application was returned on February 15, 2018. (Attachment C)

9. The licensee failed to renew at the end of 2017 and the license expired on March 9, 2018. The Alcoholic Beverage Control Board approved a request for reinstatement and renewal on April 3, 2018, and the license was issued and mailed to the address on file (12801 Old Glenn Highway, Eagle River, Alaska) on April 30, 2018.

10. The Division of Corporations, Business, and Professional Licensing shows two inactive business licenses at 551 W. Parks Highway, Wasilla, as follows:

- Business license #1040797 for Piccolino's GreekItalian Restaurant, owned by Francisco E. Rodriguez, issued on August 9, 2016, and expired on December 31, 2017. (Attachment D)
- Business license #1040992 for Piccolinos Wasilla, owned by FCAOLM LLC, issued on August 15, 2016, and expired on December 31, 2017. FCAOLM LLC is a limited liability company in good standing, owned 100% by Francisco E. Rodriguez, with an entity physical address at 551 W. Parks Highway, Wasilla. (Attachment E)

11. An inspection, performed on July 25, 2018, found that the DBA of the restaurant is "Marcello's," the license was not posted at the location, and the "owner," Francisco Rodriguez, did not have required server education. A Notice of Violation was issued. (Attachment F)

12. The above-described actions, consisting of not reporting a transfer of 10% or more of the corporate stock and of not reporting any change in corporate officers, within 10 days of the transfer and/or change; of operating a license without being the licensee; of not posting the license on the premises; and of not having required server education; violate AS 04.11.010, AS 04.11.040, AS 04.11.050, AS 04.11.630, and AS 04.21.025, which is grounds for discipline under AS 04.11.370 and AS 04.11.575.

Wherefore, in accordance with AS 04.11.370, AS 04.11.575, 3 AAC 304.535, and 3 AAC 304.540, petitioner asks:

13. That the Alcoholic Beverage Control Board find that the respondent, Piccolino's Restaurant, Inc., DBA Piccolino's, committed the acts alleged above.

14. That the Alcoholic Beverage Control Board suspend license #4965 until such time as a transfer is approved and effectuated by the Alcoholic Beverage Control Board, a license is issued to the transferee, and any imposed fine is paid, as authorized under AS 04.11.510 and 3 AAC 304.180(a), in accordance with AS 04.11.370(10), which states that "A license or permit shall be suspended or revoked if the board finds...(10) violation by a licensee of this title, a condition or restriction imposed by the board, a regulation adopted under this title, or an ordinance adopted under AS 04.21.010;"

15. That the Alcoholic Beverage Control Board impose a \$10,000 civil fine on Piccolino's Restaurant, Inc., DBA Piccolino's Restaurant, license #4965, as authorized under AS 04.11.575 and 3 AAC 304.540.

16. For such other relief as the Alcoholic Beverage Control Board considers just and proper.

Dated at Anchorage, Alaska, this 7th day of December, 2018.



Erika McConnell, Director
Alcoholic Beverage Control Board

From: Franklin, Cynthia A (CED)
To: bakedalaskaalehouse@yahoo.com
Cc: [Alcohol Licensing, CED ABC \(CED sponsored\)](#); [Oates, Sarah D \(CED\)](#)
Subject: "Pulling" a License
Date: Thursday, October 06, 2016 9:39:27 AM

Ms. Petricca,

There is no such thing as "pulling" a license. Only the ABC board can suspend or revoke a license, and they meet every 8-10 weeks. There is an elaborate due process procedure and rights of appeal, etc. Neither I nor the board have any legal authority to order any licensee to immediately cease operation of the license. You have not provided the court order, so I do not know what it says and whether it addresses the restaurant and the liquor license separately. The Superior Court does not have any authority over the liquor license. The ABC Board controls liquor licensing in Alaska.

As the 51% shareholder you can send us notification under AS 04.11.050 that you have changed the corporate entity and removed the 49% shareholder from your corporation. The notification to us would take place after you have filed documents with CBPL requesting the change in the ownership of the entity and CBPL's database has been updated to reflect the changes. As the 49% shareholder he cannot file any document with us that would entitle him to take over the license. He can operate it as a licensee, but he cannot operate #4965 as a different corporation from what we have on file without YOU filing a transfer of ownership under AS 04.11.280.

In reviewing Piccolino's file, I cannot find a current lease. The one on file with us expired September 2012. We can see that there was an option to extend. Please submit a copy of the current lease.

Cynthia Franklin, Director
Alcohol & Marijuana Control Office
907-269-0351

From: tara petricca [<mailto:bakedalaskaalehouse@yahoo.com>]
Sent: Wednesday, September 14, 2016 10:10 AM
To: Alcohol Licensing, CED ABC (CED sponsored)
Cc: Lisa Fink; Gary Eschbacher
Subject: piccolinos wasilla #4965

Dear Shiloh,

My name is Tara Petricca. I own 51% of Piccolino's Restaurants inc. My husband owns 49%. We are in the middle of a divorce and it was court ordered that he operate Piccolinos Restaurant on 551 W Parks Hwy under a new company with a new EIN number different from the original Piccolino's Restaurants Inc. that applied for said license, still dba Piccolinos. I did not give him permission to utilize the current license and do not want to be held liable if I am not in the daily operations. I am willing to transfer the license to Francisco when he applies for a new EIN number. Until then please pull the license from that premises.

I appreciate your quick response to this matter.

Sincerely,

Tara Petricca
947-5515

3711073



THE STATE
 of **ALASKA**
 Department of Commerce, Community and Economic Development
 Division of Corporations, Business and Professional Licensing

COR

FOR DIVISION USE ONLY

RECEIVED
 Juneau
SEP 18 2017
 CBPL

cc 25 (8)

Corporations Section
 State Office Building, 333 Willoughby Avenue, 9th Floor
 PO Box 110806, Juneau, AK 99811-0806
 Phone: (907) 465-2550 • Fax: (907) 465-2974
 Email: corporations@alaska.gov
 Website: Corporations.Alaska.Gov

Notice of Change of Officials

Domestic Business Corporation (AS 10.06)

- This Notice of Change of Officials form is only for Domestic Business Corporations and is used to report changes between biennial reporting periods in: officers, directors, alien affiliates, and shareholders.
- This Notice of Change of Officials will not be filed if the entity's biennial report is not current. To verify the entity's biennial report due date, go online to www.Corporations.Alaska.Gov and select, *Search Corporations Database*
- Standard processing time for complete and correct filings submitted to this office is approximately 10-15 business days. All filings are reviewed in the date order they are received.
- The information you submit is a public record and will be posted on the State's website.

1. Important:	AS 10.06.813
<p>Each Domestic Business Corporation is required to notify this office when there is a change of officials. — AS 10.06.813</p> <p>Failure to meet this requirement may result in involuntary dissolution of the entity's authority to transact business in the State of Alaska. — AS 10.06.633(5)(7)</p> <p>The Domestic Business Corporation is to keep and make available the records of the official(s) changes. — AS 10.06.430</p>	

2. Fee:	<input checked="" type="checkbox"/> \$25 Nonrefundable Filing Fee (CORF)	3 AAC 16.030(b)
Mail this form and the non-refundable \$25 filing fee in U.S. dollars to the letterhead address. Make the check or money order payable to the State of Alaska, or use the attached credit card payment form.		

3. Entity Information:	AS 10.06.813
Entity Name:	Piccolino's Restaurants Inc
Alaska Entity Number:	116908



K 1 9 5 3 6 8 7

4. REMOVE from Record: AS 10.06.813(b)

The following officials (officers, directors, shareholders, and alien affiliates) will be completely removed from the record as a result of this filing. If necessary, use the following SUPPLEMENT page.

RECEIVED
Juneau
SEP 18 2017
CBPL

Name: FRANCISCO RODRIGUEZ Name: _____

Name: _____ Name: _____

If an official is not being removed from record, then list them in Item #5 below (with their current information).

5. ALL Current Officials: AS 10.06.813(b) and
AS 10.06.950

The following is a complete list of ALL remaining and new officials who will be on record as a result of this filing. Domestic Business Corporations must have a President, Secretary, Treasurer, and at least one Director. The President and the Secretary cannot be the same person unless the President is 100% shareholder. The entity must also provide all shareholders who own 5% or more of the issued shares, and all alien affiliates.
— AS 10.06.453 and 10.06.483


List **ALL** officials and their current information to be on record.
BOLD fields are required.

FULL LEGAL NAME	COMPLETE MAILING ADDRESS	% Owned	Shareholder	PRESIDENT	Vice-President	SECRETARY	TREASURER	DIRECTOR	Assistant Secretary	Assistant Treasurer	Alien Affiliate
TARA PETRICCA	PO BOX 773412 EAGLE RIVER AK 99577	100	*	*		*	*	*			

→ If necessary, use the following SUPPLEMENT page.

6. Required Signature: AS 10.06.813(b) and
AS 10.06.825

The Notice of Change of Officials must be signed by the President or Vice-President of the corporation. Persons who sign documents filed with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor.

Signature:  Date: 9/8/17

Printed Name: TARA PETRICCA

Title of Authorized Signer: President — or — Vice-President

Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: License #/Type:
 Licensee: Address:
 DBA: AMCO Case #:

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

***Please send your response to the address below and include your alcohol license number in your response.**

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Alcohol & Marijuana Control Office
ATTN: Enforcement
550 W. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator:

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA:

Date:



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Attachment C

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

February 15, 2018

Francisco Rodriguez
DBA: Marcello's Greek and Italian Restaurant
VIA email: piccolinosgir@gmail.com

Re: Incomplete Application for Restaurant Eating Place License #4965 dba: Marcello's Greek and Italian Restaurant

Dear Applicant:

At this time, your application is still considered incomplete for the following reason:

- **AB-01: Transfer License Application**
 - We have not received the remainder of the Transfer Application corrections.

Because these errors in your application were not corrected by the deadline given to you in the letter dated November 15, 2017, nor after repeated attempts to correct your application, your application is being returned to you, and you will be required to reapply and pay a new application fee, per 3 AAC 304.105(e).

If you have any questions or concerns, please email them to alcohol.licensing@alaska.gov.

Respectfully,

A handwritten signature in cursive script that reads "Jacquene Drulis".

Jacquene Drulis
Occupational Licensing Examiner

Encl: Fingerprint Cards mailed to physical address



November 15, 2017

Francisco Rodriguez

DBA: Marcello's Greek and Italian Restaurant

VIA email: piccolinosgir@gmail.com

Re: Incomplete Application for Restaurant Eating Place License #4965 dba: Marcello's Greek and Italian Restaurant

Dear Applicant:

I have received and reviewed your liquor license application. At this time, your application is considered incomplete. Please make the following necessary changes and/or submit the required documents in order for your application to be deemed complete:

- **Renewal Application**
 - An application for the transfer of a liquor license received after October 1 of the year in which the license expires must be accompanied by an application to renew the liquor license. A Renewal Application must be submitted with a complete Transfer Application as required by 3 AAC 304.175.

- **AB-00: New License Application**
 - Page 1- This portion is for the Transferor, the current licensee.
 - Please correct the Licensee to say, Piccolino's Restaurants, Inc.
 - Please correct the portion for, "Doing Business As" to say, Piccolino's
 - The statutory reference is incorrect. Please correct it to say, AS 04.11.100.
 - Page 2, 3, and 4- On page 3, you indicated that the applicant is a Sole Proprietor and an Entity; however, on page 4, you provided an Entity #: 10040619- FCAOLM LLC. Please clarify which licensee is applying for the Transfer. If the LLC is applying for the Transfer, please correct the Licensee field on every form to say, FCAOLM LLC.
 - Please note that once this clarification is determined, there may be additional corrections needed.
 - Page 5, Section 6- Please correct this section to say:
 - Francisco Rodriguez, Restaurant Eating Place, Baked Alaska Alehouse, License #5390 in Eagle River, AK
 - Francisco Rodriguez, Restaurant Eating Place, Piccolino's, License #5559 in Eagle River, AK
 - Page 6- This section is for the current licensee with controlling interest. Our system shows Tara Petricca as having 51% ownership. Tara Petricca must sign as the Transferor.

- **AB-02: Premises Diagram**
 - Page 1
 - Please checkmark Yes or No in the boxes provided, depending on the following correction needed on page 2.
 - Depending on the clarification needed for the Licensee, the Licensee portion may need to be corrected.
 - The License # was left blank. Please correct it to say, 4965.
 - Page 2- Please follow the directions at the top of the page and submit a new Detailed Premises Diagram.

- **AB-03: Restaurant Designation Permit**
 - Page 1- Depending on the clarification needed for the Licensee, the Licensee portion may need to be corrected.
 - Page 1- The License # was left blank. Please correct it to say, 4965.
 - Page 2- Please checkmark Yes or No in the boxes provided at the bottom of the page, depending on the following correction needed on page 3.
 - Page 3- Please provide a detailed floor plan that meets the requirements listed in Form AB-02 and clearly indicates the proposed designated and undesignated areas of the licensed business for purposes of the permit application.
 - Page 4- Please initial the 3 spaces provided for initials.
 - Menu- Please include a menu, or expected menu, listing the meals to be offered to patrons.

- **Public Notice Requirements**
 - Depending on if the Licensee is supposed to be FCAOLM LLC, and because of other errors listed below, the Public Notice Requirements will need to be redone.
 - **AB-07: Posting Affidavit**
 - Depending on the clarification needed for the Licensee, the Licensee portion may need to be corrected.
 - Repost copies of your application on the premises and at a second conspicuous location for ten (10) days, then complete and submit a new copy of this form. Make sure to include the Start and End Date, and the other conspicuous location.
 - **Publisher's Affidavit**
 - There was no Publisher's Affidavit submitted with your application. Please submit the Publisher's Affidavit.

- **AB-08a: Authorization of Records Release**
 - Page 1-
 - Depending on the clarification needed for the Licensee, the Licensee portion may need to be corrected.
 - The License # was left blank. Please correct it to say, 4965.
 - Page 2- Please initial the spaces provided for initials.

- **AB-09: Statement of Financial Interest**
 - Depending on the clarification needed for the Licensee, the Licensee portion may need to be corrected.
 - The EIN field was left blank. Please fill in this portion.

- **AB-11: Creditors Affidavit**
 - This portion is for the Transferor, the current licensee.
 - Please correct the Licensee to say, Piccolino's Restaurants, Inc.
 - Please correct the portion for, "Doing Business As" to say, Piccolino's
 - In Section 2, if there are no debts or taxes owed, please write "None" in the first field.
 - In Section 3, please initial the space provided for initials.

- **Entity Documents**
 - Depending on the clarification needed for the Licensee, you may need to submit the Articles of Organization, the Certificate of the Organization, and the Operating Agreement for the LLC, per 3 AAC 304.105(7)(A).

- **Proof of Right, Title, or Interest**
 - A legal description of the proposed business location and proof that the applicant has a lease, rental contract or recorded property deed to the land and real property wherein and whereon the business will be conducted must accompany the application. The applicant must furnish specific information for premises location. The actual physical location is to include directions, street address and if no actual address, a detailed location map.

- **Fingerprints**
 - Please submit new copies of fingerprint cards for Francisco Rodriguez. AMCO requires new fingerprint cards every 5 years, and Francisco Rodriguez's fingerprints were last submitted in 2012.
 - Fingerprint Fees of \$47 will need to be submitted with the fingerprint cards.

Please submit all documents to complete your application within thirty (30) days from the date of this notice. If, after 30 days, your application is still incomplete due to any of the above listed reasons, your application will be returned to you in the manner in which it was received, and you will be required to reapply, per 3 AAC 304.105(e).

Completed documents (with the exception of fingerprint cards or payments) may be scanned and emailed, and questions or concerns may be sent to alcohol.licensing@alaska.gov.

Thank you for your immediate diligence toward completing your application.

Respectfully,



Jacquene Drulis

Occupational Licensing Examiner



Attachment C

Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	Francisco Rodriguez		License #:	4965	
License Type:	Restaurant/Eating Place		Statutory Reference:		
Doing Business As:	Piccolino's Greek and Italian Restaurant				
Premises Address:	551 W Parks Hwy				
City:	Wasilla	State:	Alaska	ZIP:	99654
Local Governing Body:	Matsvo Borough				

Transfer Type:

- Regular transfer
 Transfer with security interest
 Involuntary retransfer

OFFICE USE ONLY

Complete Date:		Transaction #:	1022007
Board Meeting Date:		License Years:	
Issue Date:		BRE:	



Attachment C

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 - Transferee Information

Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	Francisco E. Rodriguez		
Doing Business As:	Marcello's Greek and Italian Restaurant		
Premises Address:	551 W parks hwy		
City:	Wasilla	State:	Alaska
		ZIP:	99654
Community Council:	Matsv Borough		

Mailing Address:	PO Box 770215		
City:	Eagle River	State:	Alaska
		ZIP:	99577

Designated Licensee:	Francisco Rodriguez		
Contact Phone:	907-406-3688	Business Phone:	907-357-4303
Contact Email:	piccolinosgirl@gmail.com		

Seasonal License? Yes No
If "Yes", write your six-month operating period: _____

Section 3 - Premises Information

Premises to be licensed is:

an existing facility a new building a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.





Attachment C

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5. If more space is needed, please attach a separate sheet with the required information.

The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: applicant affiliate

Name:	Francisco Rodriguez		
Address:	551. W PARKS HWY		
City:	Wasilla	State:	ALASKA
		ZIP:	99654

This individual is an: applicant affiliate

Name:			
Address:			
City:		State:	
		ZIP:	

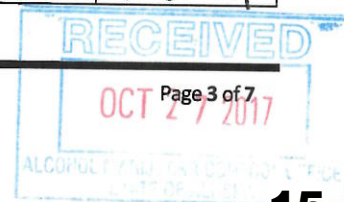
Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

Entity Official:	Francisco Rodriguez		
Title(s):	Owner	Phone:	907-406-3688 % Owned: 100
Address:	551. W. PARKS HWY		
City:	Wasilla	State:	ALASKA
		ZIP:	99654





Attachment C

Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

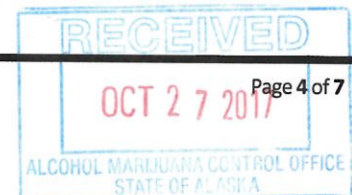
This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10640619	AK Formed Date:	10/12/16	Home State:	ALASKA
Registered Agent:	Francisco Rodriguez	Agent's Phone:	907-357-4303		
Agent's Mailing Address:	PO Box 770215				
City:	Eagle River	State:	ALASKA	ZIP:	99577

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Francisco Rodriguez, Restaurant, Alaska based business in Anchorage, Alaska, named Marcello's Greek + Italian Restaurant in Anchorage.

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

If "Yes", disclose the name of the individual and the reason for this authorization:





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Signature of transferor

Francisco Rodriguez

Printed name of transferor

Subscribed and sworn to before me this 11th day of OCTOBER, 20 17.

Rosalinda B Prado
 Signature of Notary Public



Notary Public in and for the State of ALASKA.

My commission expires: 01-24-2021

Signature of transferor

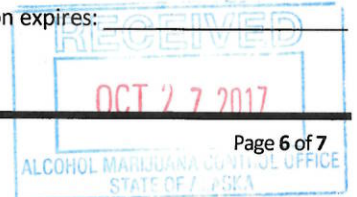
Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20_____.

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____





Alaska Alcoholic Beverage Control Board
Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.



I certify that all proposed licensees have been listed with the Division of Corporations.



I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.



I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.



I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.



As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

Signature of transferee

Francisco Rodriguez

Printed name

Subscribed and sworn to before me this 11th day of OCTOBER, 20 17.



Rosalinda B Prado
 Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 01-24-2021





Alaska Alcoholic Beverage Control Board
Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

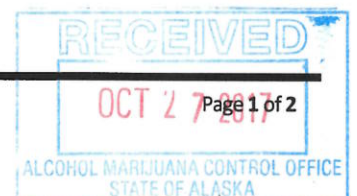
Yes No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Francisco Rodriguez	License Number:	
License Type:	Restaurant/Eating place		
Doing Business As:	Marcello's Greek and Italian Restaurant		
Premises Address:	551 W parks hwy		
City:	Wasilla	State:	AK
		ZIP:	99654

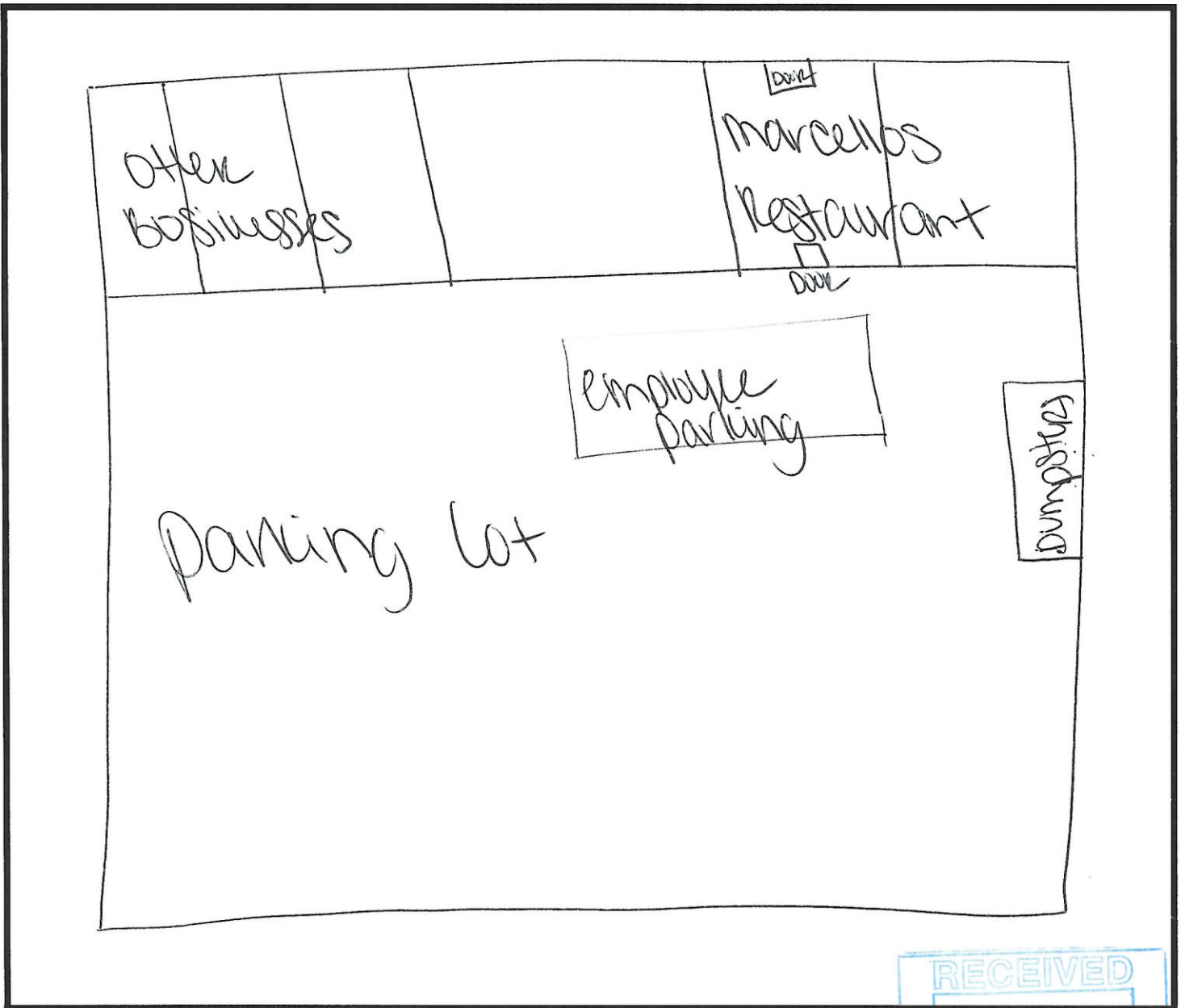




Alaska Alcoholic Beverage Control Board
Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.





Attachment C

Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

alcohol.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A **detailed floor plan** of the proposed designated and undesignated areas of the licensed business and a **menu** or expected menu listing the meals to be offered to patrons must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Francisco Rodriguez		
License Type:	Restaurant / Eating place	License Number:	
Doing Business As:	Marcellos Greek and Italian Restaurant		
Premises Address:	551 W Parks Hwy		
City:	Wasilla	State:	AK
		ZIP:	99654
Contact Name:	Pancho Rodriguez	Contact Phone:	907-406-3688

Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- Dining after standard closing hours: AS 04.16.010(c)
- Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
- Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
- Employment for persons 16 or 17 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY			
Issue Date:		Transaction #:	BRE:





Attachment C

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 – Additional Information

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

Monday - Thursday - 11:00AM - 9:00pm
Friday / Saturday - 11:00 am - 10:00 pm / Sunday 11:00AM - 9:00 pm

Are any forms of entertainment offered or available within the licensed business or on the proposed designated portions of the premises?

Yes No

If "Yes", describe the entertainment offered or available:

Food and beverage service offered or anticipated is:

table service buffet service counter service other

If "other", describe the manner of food and beverage service offered or anticipated:

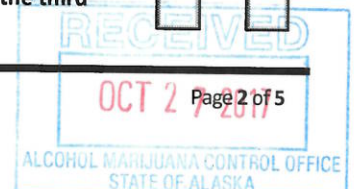
Is an owner, manager, or assistant manager 21 years of age or older always present on the premises during business hours?

Yes No

Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the third page of this form.

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the third page of this form that meet the requirements of this form.

Yes No



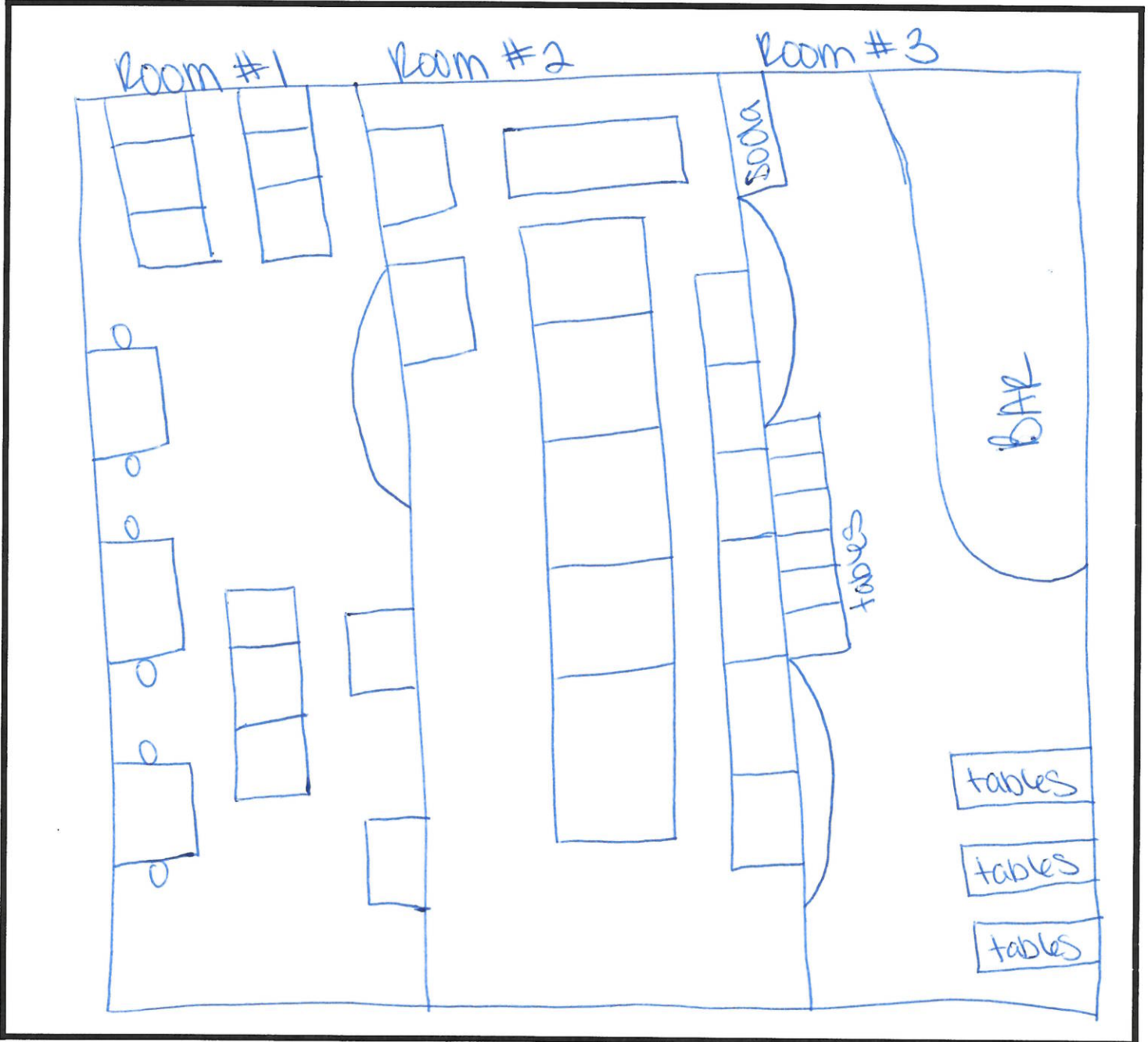


Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 4 – Detailed Floor Plan

Provide a detailed floor plan that meets the requirements listed in Form AB-02 and clearly indicates the proposed designated and undesignated areas of the licensed business for purposes of this permit application.





Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I have included with this form a detailed floor plan of the proposed designated and undesignated areas of the licensed business for purposes of this application. I understand that this diagram is different than my licensed premises diagram.

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons.

I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license.

I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Francisco Rodriguez
 Printed name of licensee

Signature of Notary Public

[Handwritten Signature]

Notary Public in and for the State of ALASKA

My commission expires: 09/01/2020



Subscribed and sworn to before me this 27th day of OCTOBER, 2017.

Local Government Review (to be completed by an appropriate local government official):

Approved Disapproved

Signature of local government official

Date

Printed name of local government official

Title





Attachment C

Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

alcohol.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:

Signature of AMCO Enforcement Supervisor

Printed name of AMCO Enforcement Supervisor

Enforcement Recommendations:

AMCO Director Review:

Approved Disapproved

Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:





Alaska Alcoholic Beverage Control Board

Form AB-07: Public Notice Posting Affidavit

What is this form?

A public notice posting affidavit is required for all liquor license applications. An applicant must give notice of a liquor license application to the public by posting a true copy of the **Form AB-00** (new licenses) or **Form AB-01** (license transfers) for ten (10) days at the location of the proposed licensed premises and one other conspicuous location in the area of the proposed premises, per AS 04.11.310 and 3 AAC 304.125. The public notice must be given within the 60 days immediately preceding filing of the application.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Francisco Rodriguez			
License Type:	Restaurant/Eating place			
Doing Business As:	Marcello's Greek and Italian Restaurant			
Premises Address:	551 W. Parks Hwy			
City:	Wasilla	State:	AK	ZIP: 99654

Section 2 – Certification

I certify that I have met the public notice requirement set forth under AS 04.11.310 by posting a copy of my application for the following 10-day period at the location of the proposed licensed premises and at the following conspicuous location in the area of the proposed premises:

Start Date: _____

End Date: _____

Other conspicuous location: _____

I declare under penalty of perjury that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

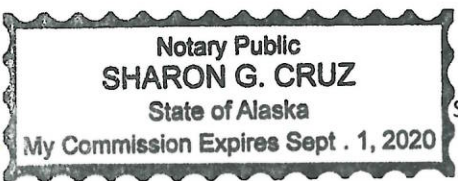
Francisco Rodriguez

Printed name of licensee

Sharon G. Cruz
 Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 09/01/2020



Subscribed and sworn to before me this 27th day of OCTOBER, 2017.





Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the **applicant** and the applicant's **spouse**.
- If the applicant is a **corporation**, this form must be completed for each **stockholder who owns 10% or more** of the stock in the corporation, and for each **president, vice-president, secretary, and managing officer**.
- If the applicant is a **limited liability organization**, this form must be completed for each **member with an ownership interest of 10% or more**, and for each **manager**.
- If the applicant is a **partnership**, including a **limited partnership**, this form must be completed for each **partner with an interest of 10% or more**, and for each **general partner**.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Francisco Rodriguez				
License Type:	Restaurant/Eating Place	License Number:			
Doing Business As:	Marcello's Greek and Italian Restaurant				
Premises Address:	551 W Parks Hwy				
City:	Wasilla	State:	AK	ZIP:	99654

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Francisco Rodriguez				
Title:	Owner/Operator				
Date of Birth:	[REDACTED]				





Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **never** been convicted of an act that constitutes a crime involving moral turpitude.

I certify that I have **never** been convicted of a violation of AS 04 or regulations adopted by the ABC Board.

I certify that I have **never** been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.

I certify that I have **not** been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 10 years immediately preceding the date of this form.

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I **have been convicted** of one or more of the above offenses, and I **have attached a written explanation** that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.

I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. *The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

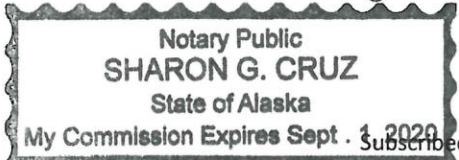
Signature of licensee/affiliate

Francisco Rodriguez
 Printed name of licensee/affiliate

Signature of Notary Public

Sharon Cruz

Notary Public in and for the State of ALASKA



My commission expires: 09/01/2020

Subscribed and sworn to before me this 20th day of OCTOBER, 2017





Attachment C

Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

alcohol.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-09: Statement of Financial Interest

What is this form?

A statement of financial interest is required for all liquor license applications, per 3 AAC 304.105(b)(3). A person other than a licensee may not have a direct or indirect financial interest (as defined in AS 04.11.450(f)) in the business for which a liquor license is issued, per AS 04.11.450.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Section 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Francisco Rodriguez		
License Type:	Restaurant/Eating	EIN:	
Doing Business As:	Marcello's Greek and Italian Restaurant		
Premises Address:	551 W parks hwy		
City:	Wasilla	State:	AK ZIP: 99654

Section 2 - Certifications

The sole proprietor or entity listed above certifies that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f), in the business for which a liquor license is being applied for.

The sole proprietor or entity listed above additionally certifies that any ownership change shall be reported to the board as required under AS 04.11.040, AS 04.11.045, AS 04.11.050, and AS 04.11.055.

I, as the sole proprietor or as an officer or stakeholder of the entity listed above, declare under penalty of perjury that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Francisco Rodriguez
Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of ALASKA

Notary Public
SHARON G. CRUZ
State of Alaska

My Commission Expires Sept . 1, 2026

My commission expires: 09/01/2020

Subscribed and sworn to before me this 27th day of October, 2017.

OCT 27 2017

RECEIVED
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA



Attachment C

Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board Form AB-11: Creditors Affidavit

What is this form?

This form must be completed by the transferor of a liquor license in order to report all debts of and taxes owed by the business, as required by AS 04.11.280(b). The Alcoholic Beverage Control Board will deny an application for transfer of a license to another person if the Board finds that the transferor has not paid all debts or taxes arising from the conduct of the licensed business, unless the transferor gives security for the payment of the debts or taxes satisfactory to the creditor or taxing authority, per AS 04.11.360(4)(A).

This form must be completed and submitted to AMCO's main office before any application to transfer the ownership, including the controlling interest, of a license will be considered complete.

Section 1 – Transferor Information

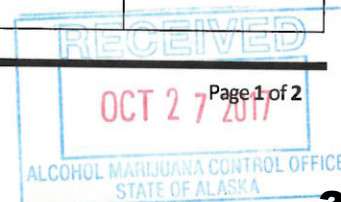
Enter information for the **current** licensee and licensed establishment.

Licensee:	Francisco Rodriguez	License Number:	4965
License Type:	Restaurant/Eating Place		
Doing Business As:	Marcello's Greek and Italian Restaurant		
Premises Address:	551 W parks hwy		
City:	Wasilla	State:	Alaska ZIP: 99654
Federal Tax ID # / EIN:	[REDACTED]		

Section 2 – Debts and Taxes Owed

Enter information for each creditor or taxing authority to which debts or taxes are owed. If there are no debts or taxes owed by the business, write "None" in the first field. You will be required to correct this form if a response of "N/A" is written in any field. Attach additional pages or documentation as necessary.

Creditor / Taxing Authority	Current Valid Email or Mailing Address of Creditor	Amount Owed





Attachment C

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board Form AB-11: Creditors Affidavit

Section 3 – Transferor Certifications

Read the line below, and then sign your initials in the box to the right of the statement:

Initials

I certify that all debts of the business and all taxes the business owes are listed on Page 1 of this form, and that the contact information provided for each creditor is current.

I declare under penalty of perjury that this form, including all accompanying schedules and statements, is true, correct, and complete.

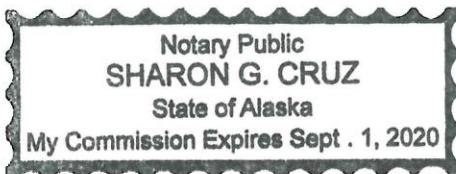
Signature of transferor

Francisco Rodriguez
Printed name of transferor

Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 09/01/2020



Subscribed and sworn to before me this 27th day of OCTOBER, 2017.



FORMAT FOR ADVERTISING
Transfer of ownership and/or location

Applicants must advertise one (1) day each week for three (3) consecutive weeks in a newspaper that is generally circulated in the vicinity of the premises; or if by radio, two (2) times each week for three (3) consecutive weeks. A newspaper notice of an application must be by display advertisement measuring a minimum of one column inch by three inches. Provide this form to the newspaper or radio station.

Under 3 AAC 304.125(e) Premises that are located within the Municipality of Anchorage, the City & Borough of Juneau, and the Fairbanks North Star Borough, the ad must be in a newspaper ONLY (no radio).

This public notice is required for all applicants within 60 days immediately prior to filing with the ABC Board.

REGULAR TRANSFER

Francisco Rodriguez d/b/a Piccolinos Wasilla
(Current licensee(s)) (Name of Establishment)

located at 551 W Parks Hwy, Wasilla, Alaska, 99654
(Premises Address and City)

is applying for transfer of a Accommodation + Food Service AS 04.11. 72
(Type of License) (Statute Reference)

liquor license to Francisco Rodriguez (same owner)
(New Licensee(s))

d/b/a Marcello's Greek and Italian Restaurant (new name)
(Only if Different)

located at 551 W Parks Hwy, Wasilla, Alaska, 99654
(Only if Different)

Interested persons should submit written comment to their local governing body, the applicant and to the Alcoholic Beverage Control Board at 550 West 7th Ave. Suite 1600 Anchorage AK 99501.

~ OR ~

TRANSFER WITH SECURITY AGREEMENT

_____, d/b/a _____
(Present licensee(s)) (Name of Establishment)

located at _____
(Premises Address and City)

is applying for transfer of a _____ AS 04.11. _____
(Type of License) (Statute Reference)

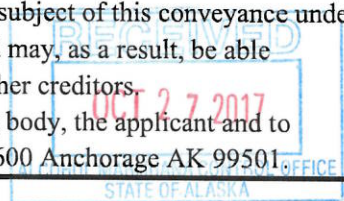
liquor license to _____
(New Licensee(s))

d/b/a _____
(Only if Different)

located at _____
(Only if Different)

The transferor/lessor retains a security interest in the liquor license which is the subject of this conveyance under the terms of AS 04.11.360 (4)(B); AS 04.11.670 and 3 AAC 304.107 and may, as a result, be able to obtain a retransfer of the license without satisfaction of other creditors.

Interested persons should submit written comment to their local governing body, the applicant and to the Alcoholic Beverage Control Board at 550 West 7th Ave. Suite 1600 Anchorage AK 99501.




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Department of Commerce, Community, and Economic Development

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LICENSE DETAILS

License #: 1040797

Business Name: PICCOLINO'S GREEKITALIAN RESTAURANT

Status: INACTIVE

Business Type: SOLE PROPRIETOR

Issue Date: 08/09/2016

Expiration Date: 12/31/2017

Primary Line Of Business: 72 - Accommodation and Food Services

Primary NAICS: 722110 - FULL-SERVICE RESTAURANTS

Secondary Line Of Business:

Secondary NAICS:

Mailing Address: POBOX 770215, EAGLE RIVER, AK 99577

Physical Address: 551 W. PARKS HWY, WASILLA, AK 99654

Owners

FRANCISCO E RODRIGUEZ

Endorsements

No Endorsements Found

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[OEO](#)
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Department of Commerce, Community, and Economic Development

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LICENSE DETAILS

License #: 1040992**Business Name:** PICCOLINOS WASILLA**Status:** INACTIVE**Business Type:** LLC**Issue Date:** 08/15/2016**Expiration Date:** 12/31/2017**Primary Line Of Business:** 72 - Accommodation and Food Services**Primary NAICS:** 722110 - FULL-SERVICE RESTAURANTS**Secondary Line Of Business:****Secondary NAICS:****Mailing Address:** PO BOX 770215, EAGLE RIVER, AK 99577**Physical Address:** 551 W. PARKS HWY., WASILLA, AK 99654

Owners

FCAOLM LLC

Endorsements

No Endorsements Found

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Department of Commerce, Community, and Economic Development
**CORPORATIONS, BUSINESS &
 PROFESSIONAL LICENSING**

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ENTITY DETAILS

Name(s)

Type	Name
Legal Name	FCAOLM LLC

Entity Type:

Limited Liability Company

Entity #:

10040619

Status:

Good Standing

AK Formed Date:

8/12/2016

Duration/Expiration:

Perpetual

Home State:

ALASKA

Next Biennial Report Due:

1/2/2020

Entity Mailing Address:

PO BOX 770215, EAGLE RIVER, AK 99577

Entity Physical Address:

551 W. PARKS HWY, WASILLA, AK 99654

Registered Agent

Agent Name:

Francisco E Rodriguez

Registered Mailing Address:

PO BOX 770215, EAGLE RIVER, AK 99577

Registered Physical Address:

551 W. PARKS HWY, WASILLA, AK 99654

Officials Show Former

AK Entity #	Name	Titles	Owned
	Francisco E Rodriguez	Member	100

Filed Documents

Date Filed	Type	Filing	Certificate
8/12/2016	Creation Filing	Click to View	Click to View
8/12/2016	Initial Report	Click to View	
10/05/2017	Agent Change	Click to View	
10/05/2017	Biennial Report	Click to View	

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Department of Commerce, Community, and Economic Development
Alcoholic Beverage Control Board
550 W. 7th Ave, Suite 1600, Anchorage, AK 99501
Tel. (907) 269-0350

LICENSED PREMISES INSPECTION REPORT Case No. AB18-0889

Form with fields: Premises, DBA (PICCOLINO'S), Date (7/25/18), Time (1640), Address (551 W. PARKS HWY, WASILLA, AK), Type of License (RESTAURANT EATING PLACE), License or Permit Number (4965), Type of Inspection (Initial, Routine, Requested, Follow-Up), and Important Notice.

GENERAL ITEMS

Table with 4 columns: Question, Yes, No, See Comments. Contains 10 inspection items regarding DBA, license posting, restaurant designation, warning signs, employee training, closure expectations, premises safety, off-premises storage, physical changes, and duplicate licenses.

MISCELLANEOUS

Table with 4 columns: Question, Yes, No, Comments. Contains 4 miscellaneous items regarding room requirements, restaurant operation, investigator questions, and rural area location.

COMMENTS:

- 1 DBA IS MARCELLO'S
2 LICENSE IS ACTUALLY AT THE EAGLE RIVER LOCATON, NOT POSTED IN WASILLA
3 SENT NEW RDP TO ESTABLISHMENT
5 LICENSEE DID NOT HAVE SERVER EDUCATION

Form with fields: Owner/Manager/Agent Name (FRANCISO E. RODRIGUEZ-CASTILLO), Investigator Name (Joe Hamilton), Driver's License Number / Date of Birth (ADL [redacted]), Alcohol Server Education Card Number / Expiration Date (NONE), Rank or Title (Special Investigator I), Contact Number (OWNER).

Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: License #/Type:
 Licensee: Address:
 DBA: AMCO Case #:

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

***Please send your response to the address below and include your alcohol license number in your response.**

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Alcohol & Marijuana Control Office
ATTN: Enforcement
550 W. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator:

Received by:

SIGNATURE: *JR Hamilton*

SIGNATURE:

Delivered VIA:

Date: