

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

## **Tourism Statement**

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be submitted to AMCO's main office before any tourism license application will be reviewed.

Doing Business As:	Denali North Star Inn	License #:	3724				
License Type:	Beverage Dispensary - Tourism						
	Section 2 – Tourism Stateme	ent					
1. Explain how issuance of	f a liquor license at your establishment has/will encourage	tourism.					
	or the independent economy minded traveler and i ational Park with local tours available.	is located within 10 mi	ies irom the				
	was/will be constructed or improved as required by AS 04 aroom and flooring replacements as well as securing in the kitchen.		ades and				
	plicant for this liquor license also operate the this license is located?	YES	NO				
3 Does the licensee or app tourism facility in which							
	tourism facility?						



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### Alaska Alcoholic Beverage Control Board

# **Tourism Statement**

2.5 Do you offer room rentals to the traveling public?	X	NO
If "yes" answer the following questions:		
How many rooms are available?		·
127		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for with refrigeration and cooking appliance devices, including a microwave)?	food prepara	ation along
None		
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO X
If "no" is your facility located within an airport terminal?	YES	NO X
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please wi	rite "none".	
Restaurant and bar are located on the property		
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours of guests, other activities that attract tourists), please describe them. If they are not offered, please write		l equipment for
There is an exercise room on site and internet access is available.Local Tours include horseback riding and flightseeing via either airplane or helicopter.	ing river ra	fting,

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

3724

XXXX

**ISSUED** 4/13/2021

**ABC BOARD** 

LIQUOR LICENSE 2021 - 2022

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

Denali North Star Inn D/B/A: 248.8 Mile Parks Hwy

Mail Address:

Alaska Hotel Properties, LLC

Attn: Michelle Pipkin 450 Third Ave West

Seattle, WA 98119

CITY / BOROUGH: Outside City Limits

Denali Borough

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

04-900 (REV 9/09)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

LIQUOR LICENSE **ISSUED** 2021 - 2022

4/13/2021

**ABC BOARD** 

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

TYPE OF LICENSE: Beverage Disper

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Outside City Limits Denali Borough

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 9/09)

D/B/A:

Denali North Star Inn 248.8 Mile Parks Hwy

Mailing Address:

Alaska Hotel Properties, LLC

Attn: Michelle Pipkin 450 Third Ave West

Seattle, WA 98119



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

# Master Checklist: Renewal Liquor License Application

Doing Business As:	Dena	ali North Star	· Inn		License Number:	3724	
License Type:	Beve	erage Dispen	sary - Tourisr	n			
Examiner:	K	15tine S	5.		Transaction #:	10002	7404
Document		Received	Completed	Notes			,
AB-17: Renewal Applic	ation	12/24	4-13-2021			4	
App and License Fees		12/24	4-13-2021				
Supplemental Docume	ent	Received	Completed	Notes		<del></del>	
Tourism/Rec Site State	ment	12/24	4-13-2021		,		
AB-25: Supplier Cert (V	VS)						
AB-29: Waiver of Oper	ation	12/24	4-13-2021				
AB-30: Minimum Oper	ation	en_ 7:			the side		
AB-33: Restaurant Affic	davit	:					
COI / COC / 5 Star							
FP Cards & Fees / AB-0	8a						
Late Fee							
Names on FP Cards:							
			-			Yes	No
Selling alcohol in respo	nse to v	vritten order (pa	ckage stores)?				
Mailing address and co	ntact in	formation differe	ent than in databa	se (if yes, upda	te database)?		
In "Good Standing" wit	h CBPL	(skip this and nex	kt question for sole	e proprietor)?			
Officers and stockholde	ers mate	ch CBPL and data	base (if "No", dete	ermine if transf	er necessary)?		
LGB 1 Response: $\mathcal{D}$	ena	li Beroug	کس LGB 2 Resp	onse:			
Waive	Protest	Lapsed	Waiv	e Pro	test Lapsed		



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Suite 1600
Anchorage, AK 99501
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Phone: 907.269,0350

#### Alaska Alcoholic Beverage Control Board

## Form AB-17: 2021/2022 License Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540,3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

Licensee (Owner):	Alaska Hotel Properties, LLC		License #:	3724
License Type:	Beverage Dispensary - Tourism			J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Doing Business As:	Denali North Star Inn			
Premises Address:	248.8 Mile Parks Hwy			
Local Governing Body:	Denali Borough			
Community Council:	None			
your mailing address ha	is changed, write the NEW address below:			
Mailing Address:				
City:	State:		ZIP:	
ust be listed on CBPL with the designation will be the designation.	ated point of contact regarding this license, unles	3 as an Official/Owners the Optional contact	is completed	I.
<u>ust be listed on CBPL with th</u>	ividual listed below must be listed in Section 2 one same name and title.	3 as an Official/Owne		
<u>ust be listed on CBPL with th</u>	ividual listed below must be listed in Section 2 one same name and title.	3 as an Official/Owne	is completed	
ust be listed on CBPL with the designation will be the designation.	ividual listed below must be listed in Section 2 one same name and title.  ated point of contact regarding this license, unles	3 as an Official/Owners the Optional contact	is completed	I.
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ust be listed on CBPL with the designation will be the designation will be the designation with the designation will be the designation with the designation will be the designation with the designation will be the designat	ividual listed below must be listed in Section 2 one same name and title.  ated point of contact regarding this license, unles  David McGlothlin	s the Optional contact  Contact Phone	is completed 206-	ı. -336-5910
ust be listed on CBPL with the his person will be the designation of t	ividual listed below must be listed in Section 2 one same name and title.  ated point of contact regarding this license, unlest  David McGlothlin  dmcglothlin@hagroup.com  staff to communicate with anyone other than the Co	as an Official/Owner  the Optional contact  Contact Phone	is completed 206-	1. -336-5910 them below:
ust be listed on CBPL with the his person will be the designation of t	ividual listed below must be listed in Section 2 one same name and title. ated point of contact regarding this license, unless  David McGlothlin  dmcglothlin@hagroup.com  staff to communicate with anyone other than the Co	Contact Phone  Contact Phone  Contact Phone	206-	1. -336-5910 them below: -336-6105
ust be listed on CBPL with the his person will be the designation of Contact Licensee:  Contact Email:  ptional: If you wish for AMCO  Name of Contact:  Contact Email:	ividual listed below must be listed in Section 2 one same name and title.  ated point of contact regarding this license, unless  David McGlothlin  dmcglothlin@hagroup.com  staff to communicate with anyone other than the Co	as an Official/Owner  the Optional contact  Contact Phone	206-	1. -336-5910 them below:
ust be listed on CBPL with the his person will be the designation of Contact Licensee:  Contact Email:  ptional: If you wish for AMCO  Name of Contact:  Contact Email:	ividual listed below must be listed in Section 2 one same name and title. ated point of contact regarding this license, unless  David McGlothlin  dmcglothlin@hagroup.com  staff to communicate with anyone other than the Co	Contact Phone  Contact Phone  Contact Phone	206-	1. -336-5910 them below: -336-6105
ust be listed on CBPL with the his person will be the designation of Contact Licensee:  Contact Email:  ptional: If you wish for AMCO  Name of Contact:  Contact Email:	ividual listed below must be listed in Section 2 one same name and title. ated point of contact regarding this license, unless  David McGlothlin  dmcglothlin@hagroup.com  staff to communicate with anyone other than the Co  Michelle Pipkin  mpipkin@hagroup.com  Philippe Janicka	Contact Phone  Contact Phone  Contact Phone	is completed 206- ur license, list t 206-	1. -336-5910 them below: -336-6105



## Form AB-17: 2021/2022 License Renewal Application

### Section 2 – Entity or Community Ownership Information

### Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>

Alaska CBPL Entity #: 70654F

**READ BEFORE PROCEEDING:** Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

### DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of any type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of <u>any</u> type must list ONLY the following:
  - o All Members with an ownership interest of 10% or more
  - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	Westmark Hotels, Inc					
Title(s):	Member	Phone:	206-336-6105	% Ow	ned:	100
Mailing Address:	450 3rd Ave W					
City:	Seattle	State:	WA	ZIP:	981	19

Name of Official:	Janet Swartz							
Title(s):	Affiliate	Phone:	661-753-1850	% Owned: 0				
Mailing Address:	24305 Town Center D	24305 Town Center Drive						
City:	Santa Clarita	State:	CA	ZIP: 91355				

Name of Official:	Charles E Ball					
Title(s):	Affiliate	Phone:	206-336-5980	% Owi	ned:	0
Mailing Address:	450 3rd Ave W					
City:	Seattle	State:	WA	ZIP:	981	19



## Form AB-17: 2021/2022 License Renewal Application

### **Section 2 - Entity or Community Ownership Information**

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Alaska CBPL Entity #: 70654F

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The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

### DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of <u>any</u> type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
  - All Members with an ownership interest of 10% or more
  - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	Daniel Howard			71107.				
Title(s):	Affiliate	Phone:	661-753-1564	% Ow	ned: 0			
Mailing Address:	24305 Town Center D	24305 Town Center Drive						
City:	Santa Clarita	State:	CA	ZIP:	91355			

Name of Official:	Lisa K Syme			
Title(s):	Affiliate	Phone:	206-336-5901	% Owned: 0
Mailing Address:	450 3rd Ave W			
City:	Seattle	State:	WA	ZIP: 98119

Name of Official:	David McGlothlin				
Title(s):	Affiliate	Phone:	206-336-5910	% Ow	ned: 0
Mailing Address:	450 3rd Ave W			<b></b>	
City:	Seattle	State:	WA	ZIP:	98119



## Form AB-17: 2021/2022 License Renewal Application

### Section 3 – Sole Proprietor Ownership Information

### Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require.

If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected. This individual is an: Applicant Affiliate Name: **Contact Phone: Mailing Address:** City: State: ZIP: Email: This individual is an: Applicant Affiliate Name: **Contact Phone: Mailing Address:** City: State: ZIP: Email: **Section 4 – License Operation** Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: 1. The license was regularly operated continuously throughout each year. (Year-round) 2. The license was only operated during a specific season each year. (Seasonal) If your operation dates have changed, list them below: The license was only operated to meet the minimum requirement of 240 total hours each calendar year. A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendaryears. A complete Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated. If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason. Section 5 - Violations and Convictions Yes No Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020?

If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.



## Form AB-17: 2021/2022 License Renewal Application

#### **Section 6 - Certifications**

As an applicant for a liquor license renewal, 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, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons
  have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their
  course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth
  in AS 04.21.025 and 3 AAC 304.465.
- I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name from what is currently approved and on file with the Alcoholic Beverage Control Board.

I certify on behalf of myself or of the organized entity 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.

Comm. Expires

11/01/2021

Signature of licensee

David McGlothlin

Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of: N

My commission expires:

-

202

Restaurant/Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit
Recreational Site applications must include a completed Recreational Site Statement
Tourism applications must include a completed Tourism Statement
Wholesale applications must include a completed AB-25: Supplier Certification

sworm to before me this \_\_\_\_\_ day of \_\_\_\_\_(

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

#### FOR OFFICE USE ONLY

License Fee:	\$2500.00	Application Fee:	\$ 300.00	Misc. Fee:	\$	
Total Fees Due:					\$2800.00	

### Serezhenkov, Kristina R (CED)

From:

Pipkin, Michelle (PCL) <mpipkin@hagroup.com>

Sent:

Tuesday, April 13, 2021 11:03 AM

To:

Alcohol Licensing, CED ABC (CED sponsored); Janicka, Philippe (HAP); McGlothlin, Dave

(HAP

Subject:

RE: [EXTERNAL] #3724, #3731, #4901 and #4902 Alcohol License Renewal Question on

approved Affiliates

**Categories:** 

Kristina

Good Day -

Stein Kruse is transitioning to a different role and so we left him off the listing as an affiliate for liquor licenses on purpose.

Let me know if you need anything further.

Regards~

\*\*\*\*\*\*\*\*\*\*\*

Michelle Pipkin | Manager, Financial Systems | HA Group | HAP Alaska-Yukon | Westmark Hotels 450 Third Ave West, Seattle, WA 98119-4002 | <a href="mailto:mpipkin@hagroup.com">mpipkin@hagroup.com</a> | (206) 336-6105 Phone | (206) 287-9706 Fax

From: Alcohol Licensing, CED ABC (CED sponsored) [mailto:alcohol.licensing@alaska.gov]

Sent: Friday, April 9, 2021 3:37 PM

To: Pipkin, Michelle (PCL) <mpipkin@hagroup.com>; Janicka, Philippe (HAP) <pjanicka@hagroup.com>; McGlothlin,

Dave (HAP) <dmcglothlin@hagroup.com>

Cc: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>

Subject: [EXTERNAL] #3724, #3731, #4901 and #4902 Alcohol License Renewal Question on approved Affiliates

CAUTION: This email originated from outside of the organization.

## Good Afternoon,

I am in the process of reviewing #3724, #3731, #4901 and #4902 for license renewal and need to know if Stein Kruse – Affiliate was left off of the renewal applications because you want him removed as an affiliate from AMCO records?

If so please let me know and I will remove him from AMCO records and proceed with issuing your temporary licenses and scheduling you on the next board agenda.

If Stein Kruse should be left as an affiliate I will need his name and info added to the blank page 2 of the renewal application I have attached to this email. One page will suffice for all four licenses.

Thank you,

Kristina Serezhenkov Licensing Examiner Alcohol and Marijuana Control Office 550 West 7<sup>th</sup> Avenue, Suite 1600 Anchorage, Alaska 99501

The information contained in this email and any attachment may be confidential and/or legally privileged and has been sent for the sole use of the intended recipient. If you are not an intended recipient, you are not authorized to review, use, disclose or copy any of its contents. If you have received this email in error please reply to the sender and destroy all copies of the message. Thank you.

To the extent that the matters contained in this email relate to services being provided by Princess Cruises and/or Holland America Line (together "HA Group") to Carnival Australia/P&O Cruises Australia, HA Group is providing these services under the terms of a Services Agreement between HA Group and Carnival Australia.



Alcohol & Marijuana Control Office 550 W 7<sup>th</sup> Ave, Suite 1600 Anchorage, AK 99501

December 22, 2020

#### Dear Control Office Staff:

Enclosed please find the notarized renewal liquor license applications and tourism statements for those requiring them for the following license numbers:

Credit card payment information forms have also been included for each of the renewal applications.

Due to COVID-19 the majority of our locations did not operate and so notarized Waiver of Operation forms have been included for all of the impacted licenses.

If you have any questions or require further information on the enclosed renewal applications, please feel free to contact me directly at (206) 336-6105. I may also be reached via e-mail at <a href="mailto:mpipkin@hagroup.com">mpipkin@hagroup.com</a>.

Thank you for your kind consideration in this matter.

Sincerely

AMCO

DEC 2 4 2020

Michelle Pipki

Manager, Financial Systems

**Enclosures** 

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

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

# **ENTITY DETAILS**

# Name(s)

Type

Name

Legal Name

ALASKA HOTEL PROPERTIES, LLC

Entity Type: Limited Liability Company

Entity #: 70654F

Status: Good Standing

AK Formed Date: 8/18/2000

**Duration/Expiration: Perpetual** 

Home State: DELAWARE

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: ATTN: MICHELLE PIPKIN, 450 3RD AVE W, SEATTLE, WA 98119-4002

Entity Physical Address: 450 3RD AVE W, SEATTLE, WA 98119-4002

# **Registered Agent**

Agent Name: C T Corporation System

Registered Mailing Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

Registered Physical Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

## **Officials**

□Show Former

AK Entity # Name Titles

Owned Member 100.00

WESTMARK HOTELS, INC

# **Filed Documents**

Division of Corporations	, Business and	Professional	Licensine
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https://www.commerce.alaska.gov/cbp/main/Search/EntityDetail/...

		nttps.//www.commer	ce.aiaska.gov/cbp/main/S
Date Filed	Туре	Filing	Certificate
8/18/2000	Creation Filling	Click to View	ocitineate
8/18/2000	Merger	Click to View	
8/18/2000	Creation Filing	Click to View	
12/24/2001	Biennial Report	Click to View	
1/02/2004	Biennial Report	Click to View	
12/21/2005	Biennial Report	Click to View	
12/19/2007	Biennial Report	Click to View	
12/31/2009	Biennial Report	Click to View	
1/09/2012	Biennial Report	Click to View	
1/03/2014	Biennial Report	Click to View	
12/16/2015	Biennial Report	Click to View	
12/15/2017	Biennial Report	Click to View	
12/13/2019	Biennial Report	Click to View	
		- HOW TO VICAV	

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