

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

Tourism Statement Form

- A new, transfer, or renewal application for a Tourism Site License must be accompanied by this form which
 explains how the establishment satisfies the requirements listed under AS 04.11.400 (d), 3 AAC 304.325.
 - You must provide complete responses to all questions or your application will be returned and will not be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff.
- All questions must be answered on this form. Do not attach other documents, or they will be returned.
- Do not provide documents and/or statements not requested.

Mandatory Points to be included

1. Explain how issuance of a liquor license at your establishment has/will keep encouraging tourism:

As a full service Hotel/Restaurant our tourism quests expect a range of refreshments from sodas and milkshaus to Aloskan Beers and fine wines. We have had the hosts from the tv program Top Chef dine with us and enjoy a alcoholic beverge. As well as National Geographic video staff and writers relax in our waterview lounge after a hard days work. Many independent towersts also stay with as and all comment on how nice it is to not have to leave the property to enjoy food and drinks. They share there experience with friends to family and encourage fatera travelers.

2. Explain how the facility was or will be improved in accordance with this application: (this includes planned renovations, repairs, updates to the facility/grounds)

We continually invest in maintaining and updating the Kitchen, diving room and lowings in order to stay competitive. This includes aguipment, furnishings, menus, paint, flooring etc. This employs local trades people and incresses local business revolve. This maintenance, updating and our liquor locanse laws us competitive in a highly competitive market.



Tourism Statement Form

3.	Who operates the Liquor License?
	Juneau Hospitality LLC was originated 12 years ago by Doug Andrew and Sod Sins. We have operated the
	business year round since then typically employing
	business year round since then typically employing between 30-15 employees depending on the season
	and demand.
4.	Do you offer room rentals to the traveling public? Yes \(\square\) No \(\square\) (if no, skip to question 5)
	a. If so, how many of these rooms are available?
	62
	b. Do any of the rental rooms have kitchen facilities (such as: a separate sink for food preparation and refrigeration/cooking appliance devices, including a microwave)? Yes No
	i. If yes, how many of the rental rooms have kitchen facilities that meet this definition?
	c. Do you stock alcoholic beverages in guest rooms? Yes No
5.	Is your facility located within an airport terminal? Yes No
6.	Does your establishment include a dining facility? Yes No
7.	Are additional amenities available to your guests through your establishment? Yes No
	a. If Yes, list your available amenities that directly pertain to this license type:
	We work with local town operators assisting guests with booking fortastic town. We contract with
	Several Small ship operators hosting their suests
	boarding and to overnishting in Juneau We're
٠	next door to the State hibrary and Musicum and
	across the street from the Convertion Center - many
	of our suests utilize these Juneau destination / sites.

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD LICENSE NUMBER FORM CONTROL 313 XXXX LIQUOR LICENSE **ISSUED** 2021 - 2022 LICENSE RENEWAL APPLICATION DUE 2/25/2021 DECEMBER 31, 2022 (AS 04.11.270(b)) **ABC BOARD** THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW TYPE OF LICENSE: Beverage Dispen LICENSE FEE: \$2,500.00 1106 CITY / BOROUGH: Juneau Ramada by Wyndham June D/B/A: This license cannot be transferred without permission 375 Whittier Street of the Alcoholic Beverage Control Board Mail Address: Special restriction - see reverse side Juneau Hospitality, LLC ISSUED BY ORDER OF THE 375 Whittier Street ALCOHOLIC BEVERAGE CONTROL BOARD Juneau, AK 99801 DIRECTOR 04-900 (REV 9/09) THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD LICENSE NUMBER FORM CONTROL 313 XXXX

LIQUOR LICENSE ISSUED 2021 - 2022 LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b)) 2/25/2021 THIS LICENSE EXPIRES MIDNIGHT **ABC BOARD** FEBRUARY 28, 2023 UNLESS DATED BELOW TYPE OF LICENSE: Beverage Disper LICENSE FEE: \$2,500.00 CITY / BOROUGH: Juneau Juneau This license cannot be transferred without permission of the Alcoholic Beverage Control Board D/B/A: Special restriction - see reverse side Ramada by Wyndham Juneau & TK Maguires ISSUED BY ORDER OF THE 375 Whittier Street ALCOHOLIC BEVERAGE CONTROL BOARD Mailing Address: Juneau Hospitality, LLC 375 Whittier Street Juneau, AK 99801 THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

04-900 (REV 9/09)



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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Rama	ada by Wyndh	nam Juneau &	TK Maguires	License Number:	313	
License Type:	Beve	rage Dispen	sary - Tourisi	m			
Examiner:					Transaction #:	10001	1039
Document		Received	Completed	Notes			
AB-17: Renewal Applic	ation	12/14	2-25-21				
App and License Fees		12/14	2-25-21				
Supplemental Docume	ent	Received	Completed	Notes	t		
Tourism/Rec Site State	ment	12/14	2-25-21	,			
AB-25: Supplier Cert (V	VS)	90 =					
AB-29: Waiver of Oper	ation	_			÷ .	45	
AB-30: Minimum Oper	ation						
AB-33: Restaurant Affi	davit						
COI / COC / 5 Star							
FP Cards & Fees / AB-0	8a			V			
Late Fee							
Names on FP Cards:							
		. 1				Yes	No
Selling alcohol in respo	nse to v	vritten order (pa	ckage stores)?		a l		
Mailing address and co	ntact in	formation differ	ent than in databa	ase (if yes, update	e database)?		
In "Good Standing" wit	h CBPL	(skip this and ne	xt question for so	le proprietor)?			
Officers and stockholde	ers mate	ch CBPL and data	base (if "No", det	ermine if transfe	necessary)?		
LGB 1 Response:	Tune	on Berry	LGB 2 Res	ponse: 🖊	/A		
Waive	Protest	Lapsed	Wai	ve Prote	est Lapsed		



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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.

Establishment Contact Information

Licensee (Owner):				
., .,	Juneau Hospita	lity 11c	License #	": 313
License Type:	Beverage Disp	ensary - 1	Tourism	
Doing Business As:	Kamada 178	Magain	res	
Premises Address:	375 Whitti	er st.	Juneau 1	AK.
Local Governing Body:	City & Borow			
Community Council:	none	·		
If your mailing address has	changed, write the NEW addres	s below:		
Mailing Address:			,	
City:		State:	Z	IP:
inis person will be the designar	led boint of contact regarding this lic			t-a-al
must be listed on CBPL with the	same name and title. ted point of contact regarding this lic	orco unloce the Optio		
			· · · · · · · · · · · · · · · · · · ·	ted.
Contact Licensee:	Joel Sims, Me		· · · · · · · · · · · · · · · · · · ·	ited. 131-206-3554
Contact Licensee: Contact Email:		contract Contract	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Contact Email:	Joel Sims, Me	hoo. com	ect Phone: 8	31 - 206-3554
Contact Email:	Joel Sims, Me teamsims@ya	hoo. contact Licens	ect Phone: 8	31 - 206-3554
Contact Email: Optional: If you wish for AMCO s	Joel Sims, Me teamsims@ya	hoo. contact Licens	ee about your license, l	31 - 206-3554
Contact Email: Optional: If you wish for AMCO s Name of Contact:	Joel Sims, Me teamsims@ya	hoo. contact Licens	ee about your license, l	31 - 206-3554
Contact Email: Optional: If you wish for AMCO s Name of Contact:	Joel Sims, Me teamsims@ya	than the Contact Licens Contact	ee about your license, l	31 - 206-3554
Contact Email: Optional: If you wish for AMCO s Name of Contact: Contact Email:	Joel Sims, Me teamsims@ya	than the Contact Licens Contact	ee about your license, lict Phone:	31-206-3554
Contact Email: Optional: If you wish for AMCO s Name of Contact: Contact Email: Name of Contact:	Joel Sims, Me teamsims@ya	than the Contact Licens Contact Conta	ee about your license, lact Phone:	31 - 206-3554
Contact Email: Optional: If you wish for AMCO s Name of Contact: Contact Email: Name of Contact:	Joel Sims, Me teamsims@ya	than the Contact Licens Contact Conta	ee about your license, lict Phone:	31 - 206-3554



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 #.

https://www.commerce.alaska.gov/cbp/main/search/entities

	THE PARTY WWW.COTTIMECOCCUSTOSTICS OF BODY MINERAL PROPERTY OF THE PARTY OF THE PAR	
Alaska CBPL Entity #:	103899	

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 <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

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

- 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

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: % Owned: Phone: 50 Title(s): Mailing Address: ZIP: State: City: Name of Official: % Owned: Phone: 50 Title(s): Mailing Address: State: ZIP: City: Name of Official: % Owned: Phone: Title(s): Mailing Address: ZIP: State: City:



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.

	Applicant	Affillate		1			
Name:				Contact Phone:		*	
Mailing Address:							
City:			State:	-	ZIP;		
Email:	·						
nis individual is an:	Applicant	Affiliate	· · ·			37	
Name:				Contact Phone:			
Mailing Address:			• .			,	
City:			State:		ZIP:	,	
Email:							
				* · · · · · · · · · · · · · · · · · · ·			<u>/_</u>
lf your operation da	tes have change	to					
If your operation da	tes have change	d, list them below:	t of 240 total hours o	each calendar year. Vided with this form.			
If your operation date The license was only A complete AB-30: Pro The license was not a hours each year, dur	operated to mee	<i>d, list them below:</i> totethe minimum requiremen	t of 240 total hours on the proving the proving the proving the minimum request the minimum request the management of the proving the prov	vided with this form. Ulrement of 240 total Operation Application	vrated.		
If your operation date. The license was only A complete AB-30: Pro The license was not concern the license was n	operated to mee of of Minimum Operated at all or ring one or both is must be submitted.	to the minimum requirement of the minimum requirement of the care	t of 240 total hours of the minimum request the minimum request the minimum request and the minimum re	vided with this form. Uirement of 240 total Operation Application Which the license was not ope You are not required to	pay the fe	es, howeve	E er a
If your operation date. The license was only A complete AB-30: Pro The license was not concern the license was n	operated to mee of of Minimum Operated at all or ring one or both is must be submitted the minimum operated at All or ring one or both is must be submitted the minimum oplete AB-29 is	to to them below: to to et the minimum requirement of the minimum requirem	t of 240 total hours of the minimum request the minimum request the minimum request management of the calendar year during the peration in 2020, marked "OTHER"	vided with this form. Jirement of 240 total Operation Application which the license was not ope you are not required to and COVID is listed as	pay the fe		(គ្រឹង (ពេធ
If your operation day The license was only A complete AB-30: Pro The license was not of hours each year, dure and corresponding feest If you have not mean comments are any or	operated to mee of of Minimum Operated at all or ring one or both a must be submitted the minimum operated AB-29 is	to to et the minimum requirement of the minimum requirement of the minimum requirement of the mass not operated for at least calendaryears. A complete Food with this application for each of the minimum	t of 240 total hours of mentation must be provest the minimum requirem AB-29: Waiver of Calendar year during to peration in 2020, marked "OTHER"	uirement of 240 total Depration Application Which the license was not ope you are not required to and COVID is listed as convictions	pay the fe the reason.	es, howeve	Pra No

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.

provided by AMCO is Signature of licensee	e organized entity that I understand that providing a false statement on this form or any other form grounds for rejection or denial of this application or revocation of any literace issued. LUPE TOSCANO Notary Public - California Monterey County Commission # 2302340 Nay Comm. Expires Sep 17, 2073 Signature of Notary Public
Joel Sims Printed name of licensee	Notary Public in and for the State of: Caussornia.
LUPE TOSCANO Nótary Public - California Monterey County Commission # 2302340 My Comm. Expires Sep 17, 2023	My commission expires:

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

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	Application Fee:	\$ 300.00	Misc. Fee:	\$
		Total Fees Due:			\$ 2,800 -

License Detail

LICENSE DETAILS

License #: 1004771

Print Business License

Business Name: T.K. MAGUIRE'S

Status: Active

Issue Date: 04/30/2014

Expiration Date: 12/31/2022

Mailing Address: 375 WHITTIER ST

JUNEAU, AK 99801

Physical Address: 375 WHITTIER ST

JUNEAU, AK 99801

Owners

JUNEAU HOSPITALITY L.L.C.

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	722110 - FULL-SERVICE RESTAURANTS	
72 - Accommodation and Food Services	722310 - FOOD SERVICE CONTRACTORS	

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

Start Date	End Date
1/1/2021	1/13/2021

Close License Detail

Print Friendly Version

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

Juneau Hospitality L.L.C.

Entity Type: Limited Liability Company

Entity #: 103899

Status: Good Standing

AK Formed Date: 10/11/2006

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: 615 MAIN ST, KETCHIKAN, AK 99901

Entity Physical Address: 615 MAIN ST, KETCHIKAN, AK 99901

Registered Agent

Agent Name: Doug Andrew

Registered Mailing Address: 615 MAIN ST, KETCHIKAN, AK 99901

Registered Physical Address: 615 MAIN ST, KETCHIKAN, AK 99901

Officials

			□Show Former
AK Entity #	Name	Titles	Owned
	DOUG ANDREW	Member	50.00
	JOEL SIMS	Member	50.00

Filed Documents

Date Filed	Туре	Filing	Certificate
10/11/2006	Creation Filing	Click to View	
4/10/2007	Initial Report	Click to View	
9/12/2010	Biennial Report	Click to View	
9/12/2010	Biennial Report	Click to View	
1/03/2013	Biennial Report	Click to View	
4/30/2014	Biennial Report	Click to View	
7/12/2016	Biennial Report	Click to View	
8/07/2018	Biennial Report	Click to View	
10/16/2018	Agent Change	Click to View	
3/21/2020	Biennial Report	Click to View	

 ${\tt COPYRIGHT} @ {\tt STATE} \ OF \ {\tt ALASKA} \ \cdot \underline{{\tt DEPARTMENT}} \ OF \ \underline{{\tt COMMERCE}}, \ \underline{{\tt COMMUNITY}}, \ \underline{{\tt AND}} \ \underline{{\tt ECONOMIC}} \ \underline{{\tt DEVELOPMENT}} \ \cdot \underline{{\tt DEPARTMENT}} \ OF \ \underline{{\tt COMMERCE}}, \ \underline{{\tt COMMUNITY}}, \ \underline{{\tt AND}} \ \underline{{\tt ECONOMIC}} \ \underline{{\tt DEVELOPMENT}} \ \cdot \underline{{\tt COMMUNITY}} \ OF \ \underline{{\tt COMMUNITY}}, \ \underline{{\tt COMMUNITY}}$

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

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #2084706

LICENSE DETAILS

License #: 2084706

Print Business License

Business Name: Ramada by Wyndham Juneau

Status: Active

Issue Date: 03/26/2019

Expiration Date: 12/31/2022

Mailing Address: 615 Main Street

Ketchikan, AK 99901

Physical Address: 375 Whittier Street

Juneau, AK 99801

Owners

Juneau Hospitality L.L.C.

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food	721110 - HOTELS (EXCEPT CASINO HOTELS)	
Services	AND MOTELS	

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

Start Date

End Date

 Start Date
 End Date

 1/1/2021
 1/31/2021

 ${\tt COPYRIGHT} \circledcirc {\tt STATE} \ {\tt OF} \ {\tt ALASKA} + \underline{{\tt DEPARTMENT}} \ {\tt OF} \ {\tt COMMERCE}, \ {\tt COMMUNITY}, \ {\tt AND} \ {\tt ECONOMIC} \ {\tt DEVELOPMENT} + \underline{{\tt ONOMIC}} \ {\tt ONOMIC} \ {\tt DEVELOPMENT} + \underline{{\tt ONOMIC}} \ {\tt ONOMIC} \ {\tt ONO$