

# 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. 7<sup>th</sup> Ave, Suite 1600**

**Anchorage, Alaska 99501**

**[amco.enforcement@alaska.gov](mailto:amco.enforcement@alaska.gov)**

Issuing Investigator:

Received by:

SIGNATURE:

*J.R. Hamilton*

SIGNATURE:

Delivered VIA:

Date:



THE STATE

of **ALASKA**

Department of Commerce, Community, and Economic Development  
Division of Corporations, Business, and Professional Licensing  
PO Box 110806, Juneau, AK 99811-0806  
(907) 465-2550 • Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)  
Website: [Corporations.Alaska.gov](http://Corporations.Alaska.gov)

AK Entity #: 10015590  
Date Filed: 01/18/2019  
State of Alaska, DCCED

FOR DIVISION USE ONLY

## Limited Liability Company 2019 Biennial Report

For the period ending December 31, 2018

Web-1/18/2019 12:21:08 PM

- This report is due on January 02, 2019
- \$100.00 if postmarked before February 02, 2019
- \$137.50 if postmarked on or after February 02, 2019

**Entity Name:** WolfPack Ventures LLC  
**Entity Number:** 10015590  
**Home Country:** UNITED STATES

### Registered Agent

**Name:** Tracy LaBarge  
**Physical Address:** 2913 BLUEBERRY HILLS RD,  
JUNEAU, AK 99801  
**Mailing Address:** BOX 21082, JUNEAU, AK 99802

**Home State/Province:** ALASKA

**Entity Physical Address:** 200 Seward St, JUNEAU, AK 99801

**Entity Mailing Address:** PO BOX 21082, JUNEAU, AK 99801

**Please include all officials.** Check all titles that apply. Must use titles provided. Please list the names and addresses of the members of the domestic limited liability company (LLC). There must be at least one member listed. If the LLC is managed by a manager(s), there must also be at least one manager listed. Please provide the name and address of each manager of the company. You must also list the name and address of each person owning at least 5% interest in the company and the percentage of interest held by that person.

Name	Address	% Owned	Titles
Lionel Uddipa	1220 GLACIER HWY #312, JUNEAU, AK 99801	5	Member
David McGivney	2913 BLUEBERRY HILLS RD, JUNEAU, AK 99801	5	Member
Robert Hynes	6250 N. DOUGLAS HWY, JUNEAU, AK 99801	39.99	Member
Tracy LaBarge	2913 BLUEBERRY HILLS RD, JUNEAU, AK 99801	50.01	Member

**Purpose:** Restaurant / Bar

**NAICS Code:** 722110 - FULL-SERVICE RESTAURANTS

**New NAICS Code (optional):**

This form is for use by the named entity only. Only persons who are authorized by the above Official(s) of the named entity may make changes to it. If you proceed to make changes to this form or any information on it, you will be certifying under penalty of perjury that you are authorized to make those changes, and that everything on the form is true and correct. In addition, persons who file documents with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor. Continuation means you have read this and understand it.

**Name:** TRACY LABARGE



THE STATE

of **ALASKA**

Department of Commerce, Community, and Economic Development  
Division of Corporations, Business, and Professional Licensing  
PO Box 110806, Juneau, AK 99811-0806  
(907) 465-2550 • Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)  
Website: [Corporations.Alaska.gov](http://Corporations.Alaska.gov)

AK Entity #: 10015590  
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Name	Address	% Owned	Titles
Lionel Uddipa	1220 GLACIER HWY #312, JUNEAU, AK 99801	5	Member
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**Name:** TRACY LABARGE



STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

1/26/2021

ABC BOARD

# LIQUOR LICENSE

## 2021 - 2022

644

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 Dispenser

LICENSE FEE: \$2,500.00

1104

CITY / BOROUGH: Juneau  
Juneau

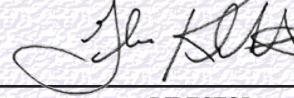
D/B/A: Salt Alaska  
200 Seward Street

Mail Address:  
Wolfpack Ventures, LLC  
PO Box 21082  
Juneau, AK 99802

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



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

XXXX

ISSUED

1/26/2021

ABC BOARD

# LIQUOR LICENSE

## 2021 - 2022

644

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 Dispenser

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Juneau  
Juneau

D/B/A: Salt Alaska  
200 Seward Street

Mailing Address:  
Wolfpack Ventures, LLC  
PO Box 21082  
Juneau, AK 99802

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

**COPY**

DIRECTOR

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

04-900 (REV 9/09)



## Alaska Alcoholic Beverage Control Board

**Master Checklist: Renewal Liquor License Application**

Doing Business As:		License Number:	
License Type:			
Examiner:		Transaction #:	

Document	Received	Completed	Notes
AB-17: Renewal Application			
App and License Fees			

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
--------------------	--

	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input type="checkbox"/>	<input type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input type="checkbox"/>

**LGB 1 Response:**☐

Waive

☐

Protest

☐

Lapsed

**LGB 2 Response:**☐

Waive

☐

Protest

☐

Lapsed





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

### Establishment Contact Information

Licensee (Owner):	Wolfpack Ventures, LLC	License #:	644
License Type:	Beverage Dispensary		
Doing Business As:	SALT Alaska		
Premises Address:	200 Seward St.		
Local Governing Body:	City and Borough of Juneau		
Community Council:			

If your mailing address has changed, write the NEW address below:

Mailing Address:					
City:		State:		ZIP:	

### Section 1 – Licensee Contact Information

**Contact Licensee:** The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	Tracy LaBarge	Contact Phone:	(907) 957 2004
Contact Email:	tracy@kingcrabshack.com		

**Optional:** If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	Dana Louwerse	Contact Phone:	(424) 236 0980
Contact Email:	dana@kingcrabshack.com		

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			



## 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>

Alaska CBPL Entity #:	10015590
-----------------------	----------

**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:
  - All shareholders who own 10% or more stock in the corporation
  - 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
  - All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list **ONLY** the following:
  - Each Partner with an interest of 10% or more
  - 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:	Tracy LaBarge				
Title(s):	Member	Phone:	(907) 723 2004	% Owned:	50.01
Mailing Address:	P.O. Box 21082				
City:	Juneau	State:	AK	ZIP:	99802

Name of Official:	Robert Hynes				
Title(s):	Member	Phone:	(907) 209 5890	% Owned:	39.99
Mailing Address:	6250 N. Douglas Hwy				
City:	Juneau	State:	AK	ZIP:	99801

Name of Official:	David McGivney				
Title(s):	Member	Phone:	(907) 723 9187	% Owned:	5
Mailing Address:	2913 Blueberry Hills Rd				
City:	Juneau	State:	AK	ZIP:	99801

CONT...



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

**Section 2 – Entity or Community Ownership Information****Sole Proprietors should skip this Section.**

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  - 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:	Lionel Uddipa				
Title(s):	Member	Phone:	(907) 500 5356	% Owned:	5
Mailing Address:	1220 Glacier Hwy #312				
City:	Juneau	State:	AK	ZIP:	99801

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

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





## 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:

- |   | 2019                                | 2020                                |
|---|-------------------------------------|-------------------------------------|
| 1. The license was regularly operated continuously throughout each year. (Year-round)   | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. The license was only operated during a specific season each year. (Seasonal)<br><i>If your operation dates have changed, list them below:</i><br>_____ to _____  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.<br><i>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 4. 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 calendar years. <i>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.</i> | <input type="checkbox"/>            | <input type="checkbox"/>            |

**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**

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?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

**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.**



# Alaska Alcoholic Beverage Control Board

## 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.

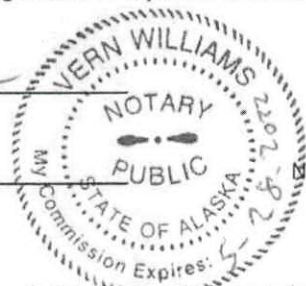
- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and potentially expired if I do 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.

Tracy LaBarge  
Signature of licensee

Tracy LaBarge

Printed name of licensee



Vern Williams  
Signature of Notary Public

Notary Public in and for the State of: Alaska

My commission expires: 5-28-2022

Subscribed and sworn to before me this 26 day of October, 2020.

**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:	\$ <u>2500</u>	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ <u>2800</u>

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	WolfPack Ventures LLC

**Entity Type:** Limited Liability Company

**Entity #:** 10015590

**Status:** Good Standing

**AK Formed Date:** 10/1/2013

**Duration/Expiration:** Perpetual

**Home State:** ALASKA

**Next Biennial Report Due:** 1/2/2021 [File Biennial Report](#)

**Entity Mailing Address:** PO BOX 21082, JUNEAU, AK 99801

**Entity Physical Address:** 200 SEWARD ST, JUNEAU, AK 99801

### Registered Agent

**Agent Name:** Tracy LaBarge

**Registered Mailing Address:** BOX 21082, JUNEAU, AK 99802

**Registered Physical Address:** 2913 BLUEBERRY HILLS RD, JUNEAU, AK 99801

### Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	David McGivney	Member	5.00
	Lionel Uddipa	Member	5.00
	Robert Hynes	Member	39.99

AK Entity #	Name	Titles	Owned
	Tracy LaBarge	Member	50.01

## Filed Documents

Date Filed	Type	Filing	Certificate
10/01/2013	Creation Filing	<a href="#">Click to View</a>	<a href="#">Click to View</a>
1/03/2014	Initial Report	<a href="#">Click to View</a>	
12/29/2014	Biennial Report	<a href="#">Click to View</a>	
12/05/2016	Biennial Report	<a href="#">Click to View</a>	
3/14/2017	Agent Change	<a href="#">Click to View</a>	
3/14/2017	Change of Officials	<a href="#">Click to View</a>	
4/19/2018	Certificate of Compliance		<a href="#">Click to View</a>
1/18/2019	Biennial Report	<a href="#">Click to View</a>	

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

Division of Corporations, Business, and Professional Licensing

PO Box 110806, Juneau, AK 99811-0806

This is to certify that

**SALT ALASKA**

PO BOX 21082, JUNEAU, AK 99802

owned by

WOLFPACK VENTURES LLC

is licensed by the department to conduct business for the period

February 2, 2020 to December 31, 2020  
for the following line(s) of business:

72 - Accommodation and Food Services



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location.  
It is not transferable or assignable.

Julie Anderson  
Commissioner



THE STATE  
of **ALASKA**  
GOVERNOR MIKE DUNLEAVY

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

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600  
Anchorage, AK 99501  
Main: 907.269.0350

January 26, 2021

Owner: Wolfpack Ventures, LLC

DBA: Salt Alaska

Via Email: [tracy@kingcrabshack.com](mailto:tracy@kingcrabshack.com) ; [dana@kingcrabshack.com](mailto:dana@kingcrabshack.com)

Re: Liquor License # 644

DBA: Salt Alaska

Dear Applicant:

I have received your application for renewal of your liquor license. Our staff has reviewed your application after receiving your application and required fees. Your renewal documents appear to be in order, and I have determined that your application is complete for purposes of AS 04.11.510, and AS 04.11.520.

Your application is now considered complete and will be sent electronically to your local governing body, your community council if your proposed premises is in Anchorage or certain locations in the Matanuska-Susitna Borough, and to any non-profit agencies who have requested notification of applications. The local governing body will have 60 days to protest the renewal of your license or waive protest.

Your application will be scheduled for the **March 30<sup>th</sup>, 2021** board meeting for Alcoholic Beverage Control Board consideration.

The Zoom link and call-in number for the meeting will be posted on our home page. The board will not grant or deny your application at the meeting unless your local government waives its right to protest per AS 04.11.480(a).

Please feel free to contact us via email at [alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov) if you have any questions.

Sincerely,

*Nathanael D. Hall*

Nathanael Hall  
Occupational Licensing Examiner