



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

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.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Doing Business As:	Aramark Sports and Entertainment Services, LLC McKinley Village Lodge - Lucky Miss Saloon	License #:	5209
License Type:	Beverage Dispensary - Tourism Seasonal		

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

The central focus of the business plan for the Lucky Miss Saloon involves catering to out of town tourists, local and regional guests. The licensee will continue to run advertising in travel/tourism publications and directories as well as through electronic methods, including an online presence via property specific website and other relevant platforms.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

Lucky Miss Saloon has annual upgrades to smallware, drinkware, interior carpet replacement, and some furniture.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES
☒

NO
☐

2.4 If "no" who operates the tourism facility?



Alaska Alcoholic Beverage Control Board
Tourism Statement

2.5 Do you offer room rentals to the traveling public?

YES

☒

NO

☐

If "yes" answer the following questions:

How many rooms are available?

1 main room for dining

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

We do not have any rooms available to rent with kitchens.

Do you stock or plan to stock alcoholic beverages in guest rooms?

YES

☐

NO

☒

If "no" is your facility located within an airport terminal?

YES

☐

NO

☒

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

Lucky Miss Saloon offers breakfast, lunch, dinner and snacks daily in a comfortable setting.

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

Lucky Miss Saloon does not provide any additional tourist type amenities to its guest. We do recommend tours and have a list on our website of close by tours, trips and rentals for our guests. Lucky Miss Saloon will continue to operate the facility as a tourist facility. In short, all of those things, which are routinely done by businesses in Alaska to encourage tourism, will continue to be done by the operators of the facility.

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

4/07/2021

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 Dispenser

05/01 - 10/31

LICENSE FEE: \$1,250.00

1103

CITY / BOROUGH: Outside City Limits
Denali Borough

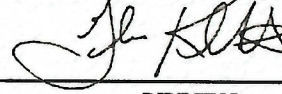
D/B/A: McKinley Village Lodge - Lu
Mile 231.1 Parks Highway

Mail Address:
ARAMARK Sports and Entertainment Services,
Flaherty & Ohara, P.C. 610 Smithfield St Ste
Pittsburgh, PA 15222

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

4/07/2021

ABC BOARD

LIQUOR LICENSE
2021 - 2022

LICENSE RENEWAL APPLICATION DUE
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D/B/A: McKinley Village Lodge - Lucky Miss Saloon
Mile 231.1 Parks Highway

Mailing Address:
ARAMARK Sports and Entertainment Services,
Flaherty & Ohara, P.C. 610 Smithfield St Ste
Pittsburgh, PA 15222

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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)



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

Master Checklist: Renewal Liquor License Application

Doing Business As:	McKinley Village Lodge - Lucky Miss Saloon	License Number:	5209
License Type:	Beverage Dispensary - <i>Tourism Seasonal</i>		
Examiner:	<i>Kris / Carrie</i>	Transaction #:	100012421

Document	Received	Completed	Notes
AB-17: Renewal Application	12/15	<i>3-17-21</i>	
App and License Fees	12/15	<i>3-17-21</i>	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement	12/15	<i>3-17-21</i>	
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 checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

LGB 1 Response: *Denali Borough* LGB 2 Response: *N/A*

☐ Waive ☐ Protest ☐ Lapsed ☐ Waive ☐ Protest ☐ Lapsed



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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.

Establishment Contact Information

Licensee (Owner):	Aramark Sports and Entertainment Services, LLC	License #:	5209
License Type:	Beverage Dispensary - Tourism Seasonal		
Doing Business As:	McKinley Village Lodge - Lucky Miss Saloon		
Premises Address:	Mile 231.1 Parks Highway		
Local Governing Body:	Denali Borough		
Community Council:	None		

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

Mailing Address:	Flaherty & O'Hara, P.C., 610 Smithfield Street				
City:	Pittsburgh	State:	PA	ZIP:	15222

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:		Contact Phone:	
Contact Email:			

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:	Marc Bodell	Contact Phone:	412-456-2125
Contact Email:	marc@flaherty-ohara.com		

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			



Alaska Alcoholic Beverage Control Board

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 #:	40869F
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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:	Bruce Fears				
Title(s):	Manager	Phone:	800-999-8989	% Owned:	0%
Mailing Address:	439 245th Avenue, S.E.				
City:	Sammamish	State:	WA	ZIP:	98074

Name of Official:	Patricia Rapone				
Title(s):	Manager	Phone:	800-999-8989	% Owned:	0%
Mailing Address:	2341A Wallace Street				
City:	Philadelphia	State:	PA	ZIP:	19130

Name of Official:	Aramark/HMS, LLC				
Title(s):	Member	Phone:	800-999-8989	% Owned:	100%
Mailing Address:	2400 Market Street				
City:	Philadelphia	State:	PA	ZIP:	19103



Alaska Alcoholic Beverage Control Board

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 type="checkbox"/> | <input type="checkbox"/> |
| 2. The license was only operated during a specific season each year. (Seasonal)
<i>If your operation dates have changed, list them below:</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| _____ 05/01/2019 _____ to _____ 10/31/2019 _____ | | |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.
<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 checked="" 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 ☒

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.

AMCO



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.

By:

Signature of licensee

Patricia Rapone, Vice President
Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of: Pennsylvania

My commission expires: 10/21/22

Subscribed and sworn to before me this 10 day of December, 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

Commonwealth of Pennsylvania - Notary Seal
Steven W. Everett, Notary Public
Allegany County
My commission expires October 21, 2022
Commission number 1194054
Member, Pennsylvania Association of Notaries

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:	\$ 1,250.00	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ 1,550.00

Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	ARAMARK SPORTS AND ENTERTAINMENT SERVICES, LLC
Previous Legal Name	ARAMARK LEISURE SERVICES, INC.
Previous Legal Name	ARAMARK SPORTS AND ENTERTAINMENT SERVICES, INC.

Entity Type: Limited Liability Company

Entity #: 40869F

Status: Good Standing

AK Formed Date: 9/18/1987

Duration/Expiration: Perpetual

Home State: DELAWARE

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 5880 NOLENSVILLE PIKE, NASHVILLE, TN 37211

Entity Physical Address: 5880 NOLENSVILLE PIKE, NASHVILLE, TN 37211

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
4771F	Aramark Services, Inc.	Member	100.00

Filed Documents

Date Filed	Type	Filing	Certificate
9/18/1987	Creation Filing	Click to View	
1/30/1989	Biennial Report		
1/22/1991	Biennial Report		
2/29/1992	Biennial Report		
1/04/1993	Biennial Report	Click to View	
2/08/1994	Agent Change	Click to View	
10/28/1994	Amendment	Click to View	
1/03/1995	Biennial Report	Click to View	
12/16/1996	Amendment	Click to View	
1/06/1997	Biennial Report	Click to View	
4/24/2007	Biennial Report	Click to View	
4/24/2007	Biennial Report	Click to View	

Date Filed	Type	Filing	Certificate
4/24/2007	Biennial Report	Click to View	
4/24/2007	Biennial Report	Click to View	
4/24/2007	Biennial Report	Click to View	
4/24/2007	Conversion	Click to View	Click to View
1/12/2009	Biennial Report	Click to View	
1/02/2011	Biennial Report	Click to View	
12/31/2012	Biennial Report	Click to View	
10/28/2014	Biennial Report	Click to View	
11/16/2016	Biennial Report	Click to View	
11/15/2017	Change of Officials	Click to View	
6/03/2019	Biennial Report	Click to View	
1/05/2021	Biennial Report	Click to View	

[Close Details](#)[Print Friendly Version](#)

EXHIBIT A

Aramark Sports and Entertainment Services, LLC

FEIN No. 23-1664232

Principal Officers

President

Bruce Fears

439 245th Avenue, S.E.

Sammamish, WA 98074

Phone: 800-999-8989

Ownership: 0%

Vice President

Patricia Rapone

2341A Wallace Street

Philadelphia, PA 19130

Phone: 800-999-8989

Ownership: 0%



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

September 9, 2020

Aramark Sports and Entertainment Services, LLC
Flaherty & Ohara, P.C.
610 Smithfield St.
Ste 300
Pittsburgh, PA 15222

Re: McKinley Village Lodge – Lucky Miss Saloon, License #5209

Dear Aramark Sports and Entertainment Services, LLC:

On November 13, 2017 the Alcoholic Beverage Control Board delegated the authority to approve first and second requests to waive the statutory minimum operating requirements to the Director.

Please consider this notice that I have approved your waiver of operation for the 2020 calendar year.

Please ensure that if you are operating solely to meet minimum operating requirements in the future, you address the items required in 3 AAC 304.170(j) to prove your operations to the board.

Please contact alcohol.licensing@alaska.gov with any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Carrie Craig".

Carrie Craig
Records and Licensing Supervisor

cc: License File

AMCO

DEC 15 2020



Pittsburgh Office:
610 Smithfield Street 412-456-2001
Suite 300 FAX: 412-456-2019
Pittsburgh, PA 15222 www.flaherty-ohara.com

Marc Bodell
Direct Dial: 412-456-2125
E-Mail Address: marc@flaherty-ohara.com

Toll Free: 1-866-4BEVLAW
File No.: 80202.419 - SR

December 14, 2020

VIA: FEDERAL EXPRESS

Alaska Alcoholic Beverage Control Board
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
ATTENTION: CARRIE CRAIG, LICENSE RENEWALS

**RE: Aramark Sports and Entertainment Services, LLC
McKinley Village Lodge – Lucky Miss Saloon
Denali, AK 99755
2020-2021 State Liquor License Renewal No. 5209**

Dear Carrie:

Enclosed please find the following regarding the state license renewal for the above-referenced location:

- 1. Liquor License Renewal and related documents and**
- 2. Check in the amount of \$1,550.00 payable to "Alaska Alcoholic Beverage Control Board" for the fees specified on renewal application.**

Please send the renewed license to my attention upon issuance

Thanks very much and please feel free to contact me directly if you have any questions or require anything further. Happy Holidays!

Sincerely,

Marc Bodell, Assistant to
KAITLYND KRUGER, ESQUIRE

Enclosures

cc: Ms. Jennifer Shelton (w/encls., via e-mail)
Mr. Anthony Beckerley (w/encls., via e-mail)

AMCO
DEC 15 2020

{F2439912.1}

* * * Communication Result Report (Mar. 11. 2021 5:26PM) * * *

1) carousel childcare
2)

Date/Time: Mar. 11. 2021 4:56PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
6784 Memory TX	19074652974	P. 4	E-1) 1) 1) 1) 2)	P. 3-4

Reason for error

E. 1) Hang up or line fail

E. 3) No answer

E. 5) Exceeded max. E-mail size

E. 2) Busy

E. 4) No facsimile connection

E. 6) Destination does not support IP-Fax



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

Corporations Section
State Office Building, 333 Willoughby Avenue, 9th Floor
PO Box 110604, Juneau, AK 99811-0604
Phone: (907) 465-2550 Fax: (907) 465-3934
Email: corp@alaska.gov
Website: Corporations.Alaska.gov

COR

Notice of Change of Officials**Foreign Limited Liability Company (AS 10.50)**

- This Notice of Change of Officials form is only for Foreign Limited Liability Companies and is used to report changes between biennial reporting periods in: members, managers, and percentage of interest held.
- 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 10.50.765
Each Foreign Limited Liability Company is required to notify this office when there is a change of officials. — AS 10.50.765	
Failure to meet this requirement may result in revocation of the entity's authority to transact business in the State of Alaska.	
The Foreign Limited Liability Company is to keep and make available the records of the official(s) changes. — AS 10.50.850, 870	
2. Fee:	<input checked="" type="checkbox"/> \$25 Nonrefundable Filing Fee (CORP) 3 AAC 18.055(b)
Attach this form and the non-refundable \$25 filing fee in U.S. dollars to the information 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 10.50.765
Entity Name: Ammark Sports and Entertainment Services, LLC	
Alaska Entity Number: 40888F	

08-003 Rev 07/25/17 F-LLC Change of Officials 1 of 2



THE STATE
of **ALASKA**

Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing

COR

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](http://Corporations.Alaska.Gov)

Notice of Change of Officials

Foreign Limited Liability Company (AS 10.50)

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1. Important:	AS 10.50.765
<p>Each Foreign Limited Liability Company is required to notify this office when there is a change of officials. — AS 10.50.765</p> <p>Failure to meet this requirement may result in revocation of the entity's authority to transact business in the State of Alaska.</p> <p>The Foreign Limited Liability Company is to keep and make available the records of the official(s) changes. — AS 10.50.860-.870</p>	
2. Fee:	<input checked="" type="checkbox"/> \$25 Nonrefundable Filing Fee (CORF) 3 AAC 16.065(b)
<p>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.</p>	
3. Entity Information:	AS 10.50.765
<p>Entity Name: Aramark Sports and Entertainment Services, LLC</p> <p>Alaska Entity Number: 40869F</p>	

4. REMOVE from Record:

AS 10.50.765(b)

The following officials (members and, if applicable, managers) will be completely removed from the record as a result of this filing

Name: Aramark Services, Inc.

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 10.50.765(b)

The following is a complete list of ALL remaining and new officials who will be on record as a result of this filing.

- An LLC must have at least one member who owns a % of the LLC. — AS 10.50.155(b)
- Must provide all members who own 5% or more of the LLC. — AS 10.50.765 (b)
- Members must own a % of the LLC. A member may be a manager if the LLC is manager managed.
- An LLC may be managed by a manager if provided in Registration of Foreign LLC. A manager may be a member if the manager also owns a % of the LLC. — AS 10.50.615(a)(7)
- List ALL officials and their current information to be on record. USE ONLY TITLES PROVIDED
- **BOLD** fields are required.

FULL LEGAL NAME	COMPLETE MAILING ADDRESS	% OWNED	MEMBER	Manager
Aramark/HMS, LLC	2400 Market Street, Philadelphia, PA 19103	100	x	x
Bruce Fears	2400 Market Street, Philadelphia, PA 19103			x
Patricia Rapone	2400 Market Street, Philadelphia, PA 19103			x

→ If necessary, use the following supplement page and include all information required above in Item #5.

6. Required Signature:

AS 10.50.840

The Notice of Change of Officials must be signed by: a member (AS 10.50.840(a)(2)); or a manager if manager managed (AS 10.50.840(a)(1)); or an attorney-in-fact (AS 10.50.840(c)). 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

By:



Date:

03/11/2021

Printed Name: Patricia Rapone

Title of Authorized Signer:

☐

Member

☒

Manager

☐

Attorney-in-fact

if signing on behalf of a member or manager which is an entity, then identify the signer's relationship and signing authority with the member entity. For example: John Smith, President of XYZ Inc, the sole member of ABC LLC



THE STATE
of **ALASKA**

Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing

COR

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

Contact Information

- Return this form with your filing
- This information may be used by the Division to assist with processing your attached filings
- This form will not be filed for record, or appear online

Entity Information		Enter your entity information as it appears on this filing
Entity Name:	Aramark Sports and Entertainment Services, LLC	
AK Entity #:	40869F	

Contact Person		Whom may we contact with any questions or problems with this filing?	
Company:	Aramark		
Contact:	Vickie Potter		
Mailing Address:	5880 Nolensville Pike		
	Nashville	TN	37211
Phone:	615-761-0332		
Email:	potter-vickie@aramark.com		

Document Return Address		Provide an address for the return of your filed documents.	
<input checked="" type="checkbox"/>	Return my filings to the address provided ABOVE		
<input type="checkbox"/>	Return my filings to this address provided BELOW		
Company:			
Contact:			
Mailing Address:	5880 Nolensville Pike		
	Nashville	TN	37211

From: [Amanda Shawcross](#)
To: [Marc Bodell](#)
Cc: [Alcohol Licensing, CED ABC \(CED sponsored\)](#); [Kaitlynd Kruger](#); [Chris OHara](#); [Sherman Ernouf](#)
Subject: Re: Aramark/Denali River Cabins, McKinley Village Lodge, Glacier Bay Lodge - AK - State Renewal
Date: Friday, March 12, 2021 10:18:47 AM
Attachments: [IMG_20210312_0002.pdf](#)
Importance: High

Good Morning Carrie,

Per Marc's email below attached is the courier slip stamped by Corporations and signed by an individual with Corporations to confirm the filing of the Change of Officials form.

Let me know if you need anything else or have any questions and or concerns relating to this.

Thank you
Amanda

Amanda Shawcross
Office Manager & Book Keeper
Law Offices of Ernouf & Coffey, P.C.
PO Box 212314
Anchorage, Alaska 99521-2314
Phone: (907) 274-3385
Fax: (907) 274-4258
ashawcross@eclawfirm.org

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On Mar 12, 2021, at 9:22 AM, Marc Bodell <marc@flaherty-ohara.com> wrote:

Good Morning Carrie,

Attached please find copies of the revised Aramark renewal applications and Tourism Statements, as you requested.

Also attached are copies of the Notice of Change of Officials, that Amanda Shawcross, with our local counsel's office, has been trying to fax for the past 24 hours. As she has been unsuccessful, she is arranging for a courier deliver the forms to the ABC today. She will provide us with a receipt, so you will have evidence that the package was



Elite Courier Services

907-569-4440

CHARGE TO:
Ernouf & Coffey, P.C.

190608

Rush 2

PICKUP AT Ernouf & Coffey, P.C.	CONTACT Amanda
ADDRESS 1542 northview drive	PHONE 907-274-3385
CITY Anchorage	ZIP CODE 99504
DELIVER TO corporation section	CONTACT
ADDRESS 550 w 7th ave 1500	PHONE
CITY anchorage	ZIP CODE 99501
SIGNATURE (PLEASE PRINT) X <i>[Signature]</i> Marie Dagon	

DATE 3/12/21	# PIECES 1
SPECIAL INSTRUCTIONS Please return a stamped courier slip confirming filing asap. Thank you!	
ROUND TRIP Yes	TOTAL WEIGHT 1 lbs.
READY TIME 3/12/21 9:17 AM	
SERVICE TYPE Rush	PACKAGE TYPE Filing
DRIVER # PICK / 9563/12P	REFERENCE Aramark

RECEIVED
Anchorage
MAR 12 2021
CBPL