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.

<table>
<thead>
<tr>
<th>Doing Business As:</th>
<th>License Type:</th>
<th>License #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aramark Sports and Entertainment Services, LLC</td>
<td>Beverage Dispensary - Tourism Seasonal</td>
<td>5489</td>
</tr>
<tr>
<td>Burger Shack</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 Burger Shack 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):

The Burger Shack has annual upgrades around the grounds with landscaping, outdoor entertainment, and other upgrades to kitchen equipment and smallware/drinkware’s.

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

[ 

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?

If "yes" answer the following questions:

How many rooms are available?
One main room for Burger Shack 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?

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

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

The Burger Shack 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".

The Burger Shack does not provide any additional tourist type amenities to its guests. We do recommend tours and have a list on our website of close by tours, trips and rentals for our guests. The Burger Shack 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.
1. Explain how the issuance of a liquor license at your establishment has/will encourage tourism.

The central focus of the business plan for the Burger Shack 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.

Explain how the facility was/will be constructed or improved in accordance with this application.

This facility is located at Mile Post 231.1 Parks Hwy. in Denali. As such it is ideal for travelers who want an overnight stay in a beautiful location conveniently located in Denali.

2. Who operates the facility for which a liquor license is being applied?

Aramark Sports & Entertainment Services, LLC operates the liquor license. Bruce Fears, Patricia Rapone are Managers of the entity, and Aramark/HMS, LLC is the Member of the entity.

3. Do you offer room rentals to the traveling public? Yes.

4. If so, how many of these rooms are available? Do any of the rental rooms have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)? If yes, how many of the rental rooms have kitchen facilities that meet this definition? Do you stock alcoholic beverages in guest rooms?

There are _______ rooms for rent at the Burger Shack. None of the rooms are equipped with kitchen facilities. No we do not stock alcoholic beverages in the rooms.
5. Does your establishment include a dining facility?

Yes. The Burger Shack offers breakfast, lunch, dinner, and snacks daily in a comfortable setting.

6. Are additional amenities available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists)?

No, the Burger Shack does not provide any additional tourist type amenities to its guests. We do recommend tours, and have a list on our website of close by tours, trips, and rentals, for our guests. The Burger Shack 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

FORM CONTROL

XXXX

LIQUOR LICENSE

2021 - 2022

ISSUED

4/07/2021

ABC BOARD

LICENSE NUMBER

5489

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

05/01 - 10/31

TYPE OF LICENSE: Beverage Dispens

LICENSE FEE: $1,250.00

1103

D/B/A: Burger Shack
Mile Post 231.1 Parks Hwy.

Mail Address:
ARAMARK Sports and Entertainment Services,
Flaherty & Ohara, P.C. 610 Smithfield St Ste 300
Pittsburgh, PA 15222

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

DIRECTOR

04-900 (REV 9/09)

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

FORM CONTROL

XXXX

LIQUOR LICENSE

2021 - 2022

ISSUED

4/07/2021

ABC BOARD

LICENSE NUMBER

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Flaherty & Ohara, P.C. 610 Smithfield St Ste 300
Pittsburgh, PA 15222

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

COPY
DIRECTOR

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

04-900 (REV 9/09)
# Master Checklist: Renewal Liquor License Application

**Doing Business As:** Burger Shack  
**License Number:** 5489  
**License Type:** Beverage Dispensary - Tourism - Seasonal  
**Examiner:** Kris / Carrie  
**Transaction #:** 100012427

<table>
<thead>
<tr>
<th>Document</th>
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<th>Completed</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td>AB-17: Renewal Application</td>
<td>12/15</td>
<td>3-17-21</td>
<td></td>
</tr>
<tr>
<td>App and License Fees</td>
<td>12/15</td>
<td>3-17-21</td>
<td></td>
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<tr>
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<th>Received</th>
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<tbody>
<tr>
<td>Tourism/Rec Site Statement</td>
<td>12/15</td>
<td>3-17-21</td>
<td></td>
</tr>
<tr>
<td>AB-25: Supplier Cert (WS)</td>
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<tr>
<td>AB-29: Waiver of Operation</td>
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<td></td>
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<tr>
<td>AB-30: Minimum Operation</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>AB-33: Restaurant Affidavit</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>COI / COC / 5 Star</td>
<td></td>
<td></td>
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<tr>
<td>FP Cards &amp; Fees / AB-08a</td>
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<tr>
<td>Late Fee</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Names on FP Cards:**

---

**Selling alcohol in response to written order (package stores)?**  
[ ] Yes  
[ ] No

**Mailing address and contact information different than in database (if yes, update database)?**  
[ ] Yes  
[ ] No

**In “Good Standing” with CBPL (skip this and next question for sole proprietor)?**  
[ ] Yes  
[ ] No

**Officers and stockholders match CBPL and database (if “No”, determine if transfer necessary)?**  
[ ] Yes  
[ ] No

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

[Master Checklist: Renewal] (rev 09/20/2018)
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 #: | 5489 |
|-------------------------|-----------------------------------------------|------------|
| License Type:           | Beverage Dispensary - Tourism Seasonal         |            |
| Doing Business As:      | Burger Shack                                   |            |
| Premises Address:       | Mile Post 231.1 Parks Highway                  |            |
| Local Governing Body:   | Denali Borough                                 |            |
| Community Council:      | None                                           |            |

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

<table>
<thead>
<tr>
<th>Mailing Address:</th>
<th>Flaherty &amp; O'Hara, P.C., 610 Smithfield Street, Suite 300</th>
</tr>
</thead>
<tbody>
<tr>
<td>City:</td>
<td>Pittsburgh</td>
</tr>
<tr>
<td>State:</td>
<td>PA</td>
</tr>
<tr>
<td>ZIP:</td>
<td>15222</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Contact Licensee:</th>
<th>Contact Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Contact Email:

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

<table>
<thead>
<tr>
<th>Name of Contact:</th>
<th>Contact Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marc Bodell</td>
<td>412-456-2125</td>
</tr>
<tr>
<td>Contact Email:</td>
<td><a href="mailto:marco@flaherty-ohara.com">marco@flaherty-ohara.com</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Contact:</th>
<th>Contact Phone:</th>
</tr>
</thead>
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<tr>
<th>Name of Contact:</th>
<th>Contact Phone:</th>
</tr>
</thead>
</table>

[Form AB-17] (rev09/23/2010)
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

| Name of Official: | Bruce Fears |
| Title(s): | Manager |
| Phone: | 800-999-8989 |
| % Owned: | 0% |
| Mailing Address: | 439 245th Avenue, S.E. |
| City: | Sammimish |
| 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 |
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 30 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:
Mailing Address:
City: [ ] State: [ ] ZIP:
Email:

This individual is an: [ ] Applicant [ ] Affiliate

Name:
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:
   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.
   A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.

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. 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

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] (rev09/23/2020)
Section 1 - 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 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

Notary Public in and for the State of: Pennsylvania  
My commission expires: 10/21/2023

Subscribed and sworn to before me this 10th 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

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 |

[Form AB-17] rev09/23/2020

AMCO
DEC 15 2020

Page 4 of 4
Details

**ENTITY DETAILS**

### Name(s)

<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Name</td>
<td>ARAMARK SPORTS AND ENTERTAINMENT SERVICES, LLC</td>
</tr>
<tr>
<td>Previous Legal Name</td>
<td>ARAMARK LEISURE SERVICES, INC.</td>
</tr>
<tr>
<td>Previous Legal Name</td>
<td>ARAMARK SPORTS AND ENTERTAINMENT SERVICES, INC.</td>
</tr>
</tbody>
</table>

**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

<table>
<thead>
<tr>
<th>AK Entity #</th>
<th>Name</th>
<th>Titles</th>
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<tbody>
<tr>
<td>4771F</td>
<td>Aramark Services, Inc.</td>
<td>Member</td>
<td>100.00</td>
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### Filed Documents

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<thead>
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<tr>
<td>1/30/1989</td>
<td>Biennial Report</td>
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<tr>
<td>1/22/1991</td>
<td>Biennial Report</td>
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<td>Agent Change</td>
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<td>Amendment</td>
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<td>1/03/1995</td>
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<td></td>
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<td>Amendment</td>
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<td>1/06/1997</td>
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<td>6/03/2019</td>
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<tr>
<td>1/05/2021</td>
<td>Biennial Report</td>
<td>Click to View</td>
<td></td>
</tr>
</tbody>
</table>
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%
September 9, 2020

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

Re: Burger Shack, License #5489

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,

Carrie Craig
Records and Licensing Supervisor

cc: License File
<table>
<thead>
<tr>
<th>Reason for error</th>
<th>E. 1) Hang up or line fail</th>
<th>E. 2) Busy</th>
<th>E. 3) No answer</th>
<th>E. 4) No facsimile connection</th>
<th>E. 5) Exceeded max. E-mail size</th>
<th>E. 6) Destination does not support IP-Fax</th>
</tr>
</thead>
</table>

### Notices of Change of Officials

**Foreign Limited Liability Company (AS 18.39)**

- This Notice of Change of Officials has been submitted by [Company Name], a Foreign Limited Liability Company located in [State].
- The Notice is required by law to inform the public of the change of officials.
- The Notice is signed by [Name], [Title] of [Company Name].
- The Notice is effective as of [Date].

**Important Information**

- **AS 18.39.120**
  - Each Foreign Limited Liability Company is required to file a Notice of Change of Officials.
- **AS 18.39.105**
  - The Notice is required by law to inform the public of the change of officials.
- **AS 18.39.905**
  - The Notice is required by law to inform the public of the change of officials.

**Notices of Change of Officials 1 of 2**

- Date: [Date]
- Time: [Time]
- File No.: [File No.]
- Mode: [Mode]
- Destination: [Destination]
- Page: [Page]
- Result: [Result]
- Not Sent: [Not Sent]
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:

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 10.50.860-870

2. Fee:

☒ $25 Nonrefundable Filing Fee (CORF) 3 AAC 16.065(h)

Mail this form and the non-refundable $25 filing fee in U.S. dollars to the letterhead address. Make the check or money order payable to the State of Alaska, or use the attached credit card payment form.

3. Entity Information:

Entity Name: Aramark Sports and Entertainment Services, LLC

Alaska Entity Number: 40869F

08-503 Rev 07/25/17 F-LLC Change of Officials 1 of 2
4. REMOVE from Record: AS 10.50.765(b)

The following officials (members and/or 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 managed by a manager.
- 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 10.50.815(a)(7)

List: ALL officials and their current information to be on record. USE ONLY TITLES PROVIDED

FULL LEGAL NAME COMPLETE MAILING ADDRESS % OWNED MEMBER NUMBER

Aramark/HMS, LLC 2400 Market Street, Philadelphia, PA 19103 100

Bruce Fears 2400 Market Street, Philadelphia, PA 19103

Patricia Rapone 2400 Market Street, Philadelphia, PA 19103

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: Patricia Rapone Date: 03/11/2021

Printed Name: Patricia Rapone

Title of Authorized Signer: [ ] Member [X] 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.
**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

<table>
<thead>
<tr>
<th>Entity Information</th>
<th>Entity Name: Aramark Sports and Entertainment Services, LLC</th>
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<tbody>
<tr>
<td>AK Entity #:</td>
<td>40869F</td>
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<tr>
<th>Contact Person</th>
<th>Whom may we contact with any questions or problems with this filing?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company:</td>
<td>Aramark</td>
</tr>
<tr>
<td>Contact:</td>
<td>Vickie Potter</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>5880 Nolensville Pike, Nashville, TN 37211</td>
</tr>
<tr>
<td>Phone:</td>
<td>615-761-0332</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:potter-vickie@aramark.com">potter-vickie@aramark.com</a></td>
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<th>Document Return Address</th>
<th>Provide an address for the return of your filed documents</th>
</tr>
</thead>
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<tr>
<td>☑ Return my filings to the address provided ABOVE</td>
<td></td>
</tr>
<tr>
<td>☐ Return my filings to this address provided BELOW</td>
<td></td>
</tr>
<tr>
<td>Company:</td>
<td></td>
</tr>
<tr>
<td>Contact:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>5880 Nolensville Pike, Nashville, TN 37211</td>
</tr>
</tbody>
</table>

08-561 Rev 7/14/16 Contact Information
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
<table>
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<tr>
<th>PICKUP AT</th>
<th>CONTACT</th>
<th>ADDRESS</th>
<th>PHONE</th>
<th>ZIP CODE</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE</th>
<th>ZIP CODE</th>
<th>CITY</th>
<th>DELIVER TO</th>
<th>CONTACT</th>
<th>ADDRESS</th>
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<th>CITY</th>
<th>DRIVER # PICK #</th>
<th>REFERENCE</th>
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<th>ROUND TRIP</th>
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<tr>
<td>Elite Courier Services</td>
<td>Amanda</td>
<td>Ernouf &amp; Coffey, P.C.</td>
<td>907-274-3385</td>
<td>99504</td>
<td>Anchorage</td>
<td>1542 northview drive</td>
<td>907-569-4440</td>
<td>99501</td>
<td>99501</td>
<td>Anchorage</td>
<td>corporation section</td>
<td>550 w 7th ave 1500</td>
<td>907-569-4440</td>
<td>99501</td>
<td>99501</td>
<td>99501</td>
<td>956-312-8</td>
<td>Aramark</td>
<td>Lunch</td>
<td>3/12/21</td>
<td>9:17 AM</td>
<td>Rush</td>
<td>Filing</td>
</tr>
</tbody>
</table>

**SIGNATURE (PLEASE PRINT):** [Signature]

**RECEIVED Anchor:** MAR 1 2 2021

**AMCO Received 3/12/2021**