

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: 5/22/19

Licensee: Flying Fish LLC

DBA: Wasabi

License #/Type: 753

Beverage Dispensary

Address: 59217 East End Road, Homer, AK

AMCO Case #: 19-0847

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.

On 5-16-19, an inspection was conducted at Wasabi. Licensee Colt A. Belmonte was asked to provide proof of current alcohol server education. Belmonte provided Inv. Hamilton TAP card #144529 which had expired on 5-10-19.

Your attention is directed to AS 04.21.025: Alcohol server education, AS 04.21.030: Responsibility of licensees, agents and employees and AS 04.16.150: Licensee responsible for violations

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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hamilton

SIGNATURE:

J.R. Hamilton

Delivered VIA: Mail

Received by:

Colt Belmonte
Colt Belmonte

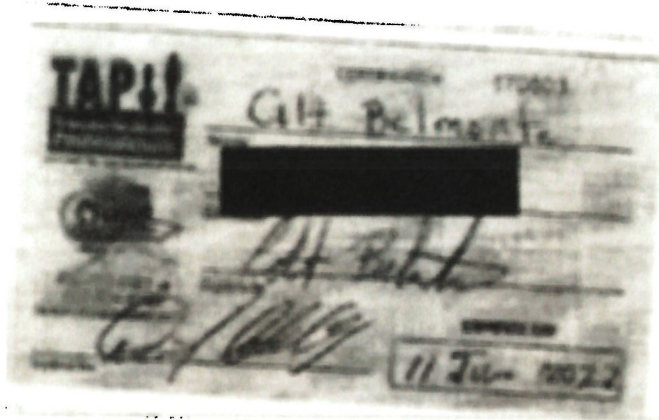
SIGNATURE:

Colt Belmonte

Date:

6-12-19

Colt BELMONTE - License 753
AMCO CASE #1 19-0847



STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

3/22/2021

ABC BOARD

LIQUOR LICENSE
2021 - 2022

753

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: Kachemak
Kenai Peninsula Borough

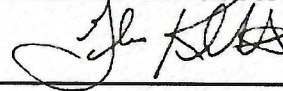
D/B/A: Wasabi
59217 East End Rd

Mail Address:
Flying Fish LLC
59217 East End Road
Homer, AK 99603

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

3/22/2021

ABC BOARD

LIQUOR LICENSE
2021 - 2022

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Kenai Peninsula Borough

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ISSUED BY ORDER OF THE
ALCOHOLIC BEVERAGE CONTROL BOARD

COPY

DIRECTOR

D/B/A: Wasabi
59217 East End Rd
Mailing Address:
Flying Fish LLC
59217 East End Road
Homer, AK 99603

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:	Wasabi	License Number:	753
License Type:	Beverage Dispensary		
Examiner:	Kristina S.	Transaction #:	100024929

Document	Received	Completed	Notes
AB-17: Renewal Application	12/18	3-22-21	
App and License Fees	12/18	3-22-21	

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:	
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	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 checked="" type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response: City of Kachemak LGB 2 Response: KPB

<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed	<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed
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*NOV



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):	Flying Fish, LLC	License #:	753
License Type:	Beverage Dispensary		
Doing Business As:	Wasabi		
Premises Address:	59217 East End Rd		
Local Governing Body:	City of Kachemak (Kenai Peninsula Borough)		
Community Council:	None		

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:	Idalia Frazier	Contact Phone:	907-299-0886
Contact Email:	wasabisak@gmail.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:	John Kelly	Contact Phone:	907-235-9700
Contact Email:	wasabis@homerbiz.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 #:	103812
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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:	Idalia Frazier				
Title(s):	Member	Phone:	907-299-0886	% Owned:	51%
Mailing Address:	59217 East End Rd.				
City:	Homer	State:	AK	ZIP:	99603

Name of Official:	Colt Belmonte				
Title(s):	Member	Phone:	907-299-1205	% Owned:	49%
Mailing Address:	59217 East End Rd.				
City:	Homer	State:	AK	ZIP:	99603

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

AMCO

**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:	<input type="checkbox"/> Applicant	<input type="checkbox"/> Affiliate
Name:	Contact Phone:	
Mailing Address:		
City:	State:	ZIP:
Email:		

This individual is an:	<input type="checkbox"/> Applicant	<input type="checkbox"/> 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)
<i>If your operation dates have changed, list them below:</i>
_____ 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.
<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 ☐

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

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



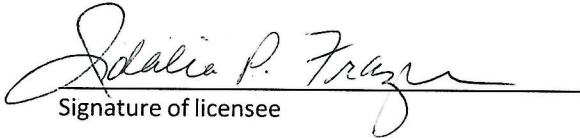
Form AB-17: 2021/2022 License Renewal Application

Section 6 – Certifications

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

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

I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.


Signature of licensee

Idalia P. Frazier

Printed name of licensee

See attached addendum


Signature of Notary Public

Notary Public in and for the State of: _____

My commission expires: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

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:					\$ 2800

AMCO

DEC 18 2020

State of Alaska

3rd Judicial District

This is to certify that on the 10th day of December, of 2020
(date) (month) (year)

Idalia Frazier, known to me to be the individual or
(name of individual)

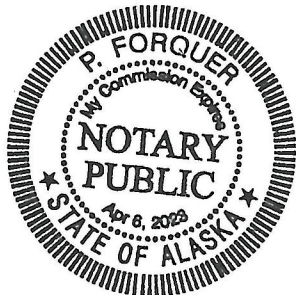
individuals named by the within Form AB-17: 2021/2022 License
Renewal Application (document description)

personally appeared before me and acknowledged that (she/he/they) signed said document freely and voluntarily for the uses and purposes stated within.

Given under my hand and official seal:

Dated: December 10, 2020

[Signature]
(Signature of Notary)



Notary Public for the State of Alaska

My Commission Expires: April 6, 2023

AMCO
DEC 18 2020

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

Wasabi

59217 East End Rd., Homer, AK 99603

owned by

Flying Fish, LLC

is licensed by the department to conduct business for the period

March 19, 2021 to December 31, 2022
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

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

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ENTITY DETAILS

Name(s)

Type	Name
Legal Name	Flying Fish, LLC

Entity Type: Limited Liability Company

Entity #: 103812

Status: Good Standing

AK Formed Date: 10/5/2006

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: 59217 EAST END RD, HOMER, AK 99603

Entity Physical Address: 59217 EAST END RD, HOMER, AK 99603

Registered Agent

Agent Name: Idalia P. Frazier

Registered Mailing Address: 59217 East End Rd., Homer, AK 99603

Registered Physical Address: 59217 East End Rd., Homer, AK 99603

Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	Colt Belmonte	Member	49.00
	Idalia Frazier	Member	51.00

Filed Documents

Date Filed	Type	Filing	Certificate
10/05/2006	Creation Filing	Click to View	
11/13/2006	Initial Report	Click to View	
3/22/2010	Biennial Report	Click to View	
7/05/2010	Biennial Report	Click to View	
7/08/2010	Agent Change	Click to View	
7/18/2012	Biennial Report	Click to View	
10/14/2013	Biennial Report	Click to View	
12/16/2015	Biennial Report	Click to View	
11/16/2017	Biennial Report	Click to View	
12/18/2019	Biennial Report	Click to View	

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