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>SUSITNA BAR and GRILL</th>
<th>License #:</th>
<th>4526</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>BEVERAGE DISPENSARY-TOURISM</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.

This location has had a tourism license for many years. It is located just off the Parks Highway, the only road system that runs to Talkeetna, Alaska, Fairbanks, Alaska and Denali and the associated parks along the highway. Continuing to provide the Motel/Restaurant/Bar with a license will continue to encourage tourism by being even a stronger draw to tourist and tour companies to stop into the location.

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

Since occupying the property in October 2017, the Zavackys have remodeled the kitchen area, including upgrading the appliances. They replaced the heating for the facility, replaced most of the electrical in the structure, painted and cleaned. They are currently completing the remodeling the bar area. Additionally, they have recently finished a large outside deck/eating area. Part of the structure recently sustained fire damage and the owners anticipate upgraded, improved amenities or log outbuildings.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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?

10

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)?

None currently

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

No

If “no” is your facility located within an airport terminal?

Yes

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

Full service restaurant

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”.

None
# Alaska Alcoholic Beverage Control Board

## Master Checklist: Renewal Liquor License Application

<table>
<thead>
<tr>
<th>Doing Business As:</th>
<th>Susitna Bar and Grill</th>
<th>License Number:</th>
<th>4526</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>Beverage Dispensary - Tourism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Examiner:</td>
<td>Kristina S</td>
<td>Transaction #:</td>
<td>100029981</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Document</th>
<th>Received</th>
<th>Completed</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB-17: Renewal Application</td>
<td>12/30</td>
<td>S-3-2021</td>
<td></td>
</tr>
<tr>
<td>App and License Fees</td>
<td>12/30</td>
<td>S-3-2021</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supplemental Document</th>
<th>Received</th>
<th>Completed</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tourism/Rec Site Statement</td>
<td>12/30</td>
<td>S-3-2021</td>
<td></td>
</tr>
<tr>
<td>AB-25: Supplier Cert (WS)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AB-29: Waiver of Operation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AB-30: Minimum Operation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AB-33: Restaurant Affidavit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COI / COC / 5 Star</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FP Cards &amp; Fees / AB-08a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Late Fee</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Names on FP Cards:

<table>
<thead>
<tr>
<th>Selling alcohol in response to written order (package stores)?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing address and contact information different than in database (if yes, update database)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In “Good Standing” with CBPL (skip this and next question for sole proprietor)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Officers and stockholders match CBPL and database (if “No”, determine if transfer necessary)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**LGB 1 Response:** City of Houston  **LGB 2 Response:** Mat-Su Borough

Yes No

Waive  Protest  Lapsed  Waive  Protest  Lapsed

[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

<table>
<thead>
<tr>
<th>Licensee (Owner):</th>
<th>JAZCO INVESTMENT, LLC</th>
<th>License #:</th>
<th>4526</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>BEVERAGE DISPENSARY-TOURISM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doing Business As:</td>
<td>SUSITNA BAR and GRILL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premises Address:</td>
<td>20333 W. PARKS HWY, HOUSTON, AK 99694</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Governing Body:</td>
<td>HOUSTON</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Council:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Mailing Address:</th>
<th>1151 E 76TH AVENUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>City:</td>
<td>ANCHORAGE</td>
</tr>
<tr>
<td>State:</td>
<td>AK</td>
</tr>
<tr>
<td>ZIP:</td>
<td>99518</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>JOHN ZAVACKY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Phone:</td>
<td>(907) 744-3624</td>
</tr>
<tr>
<td>Contact Email:</td>
<td><a href="mailto:jzavackymirage@yahoo.com">jzavackymirage@yahoo.com</a></td>
</tr>
</tbody>
</table>

**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>DARRYL L. THOMPSON</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Phone:</td>
<td>(907) 272-9322</td>
</tr>
<tr>
<td>Contact Email:</td>
<td><a href="mailto:darryl@akdlitlaw.com">darryl@akdlitlaw.com</a></td>
</tr>
</tbody>
</table>

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

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

[Form AB-17] (rev09/23/2020)
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 # | 10109114 |

**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.

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>JOHN ZAVACKY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s):</td>
<td>MEMBER</td>
</tr>
<tr>
<td>Phone:</td>
<td>(907) 744-3624</td>
</tr>
<tr>
<td>% Owned:</td>
<td>50</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>1151 E 76TH AVENUE</td>
</tr>
<tr>
<td>City:</td>
<td>ANCHORAGE</td>
</tr>
<tr>
<td>State:</td>
<td>AK</td>
</tr>
<tr>
<td>ZIP:</td>
<td>99518</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>INTHIRA ZAVACKY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s):</td>
<td>MEMBER</td>
</tr>
<tr>
<td>Phone:</td>
<td>(907) 802-9011</td>
</tr>
<tr>
<td>% Owned:</td>
<td>50</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>1151 E 76TH AVENUE</td>
</tr>
<tr>
<td>City:</td>
<td>ANCHORAGE</td>
</tr>
<tr>
<td>State:</td>
<td>AK</td>
</tr>
<tr>
<td>ZIP:</td>
<td>99518</td>
</tr>
</tbody>
</table>

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

AMCO Received 4/28/2021
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:  
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:  
   _______________ to _______________
   A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.

3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

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?

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 Received 4/28/2021
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: John Zavacky
Printed name of licensee:

Signature of Notary Public:
Notary Public in and for the State of: Alaska
My commission expires: 10/23/2023
Subscribed and sworn to before me this 29 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

<table>
<thead>
<tr>
<th>License Fee:</th>
<th>$2500</th>
<th>Application Fee:</th>
<th>$300.00</th>
<th>Misc. Fee:</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Fees Due:</td>
<td>$2800</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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.

Signature of licensee

Inthira Zavacky

Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of: Alaska

My commission expires: 10/23/2023

Subscribed and sworn to before me this 29 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

<table>
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<tr>
<th>License Fee:</th>
<th>$</th>
<th>Application Fee:</th>
<th>$ 300.00</th>
<th>Misc. Fee:</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Fees Due:</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[Form AB-17] (rev09/23/2020)
December 29, 2020

Via USPS:

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501

Re: Beverage Dispensary-Tourism License # 4526
Restaurant/Eating Place License # 4380

To whom it may concern:

Please see included with this letter the following renewal documents for Susitna Bar and Grill:

- License Renewal Application for Restaurant/Eating Place License # 4380;
- Restaurant Receipt Affidavit;
- License Renewal Application for Beverage Dispensary-Tourism License # 4526;
- Tourism Statement;
- Check # 1010 in the amount of $3,700.00 ($2,500 for beverage dispensary plus $300 application fee; $600 for the restaurant license plus $300 application fee.);

If you have any questions, please do not hesitate to contact our office.

Sincerely,

[Signature]
Pennelope Lawson, Legal Assistant

cc: File

880 N Street, Suite 101
Anchorage, AK 99501
*Licensed in AK & WA

Office: 907-272-9322
Fax: 907-277-1373
www.akdlitlaw.com
Hello,

I have attached the corrected AB-17, I am in the process of getting Inthira's name fixed with the corporations division and will forward you proof of that change once I have received it. We are also getting the business license renewed, thank you for pointing that out.

Thanks!

Pennelope Lawson, Legal Assistant
Thompson Law Group
880 N STREET, SUITE 101, ANCHORAGE, ALASKA 99501
T: 907-272-9322 | F: 907-277-1373

Begin forwarded message:

From: "Alcohol Licensing, CED ABC (CED sponsored)" <alcohol.licensing@alaska.gov>
Date: April 27, 2021 at 5:39:15 PM GMT-6
To: jzavackymirage@yahoo.com, Darryl Thompson <DarrylThompson@akdltlaw.com>
Cc: "Alcohol Licensing, CED ABC (CED sponsored)" <alcohol.licensing@alaska.gov>
Subject: #4380 and #4526 dba Susitna Bar and Grill Incomplete Renewal

Good afternoon,

I have reviewed the renewal applications for licenses #4380 and #4526 submitted 12/30/2020. At this time, the applications are considered incomplete. Please review the following for instructions on how to complete your application.

For both #4380 and #4256:

AB-17 Section 2 Entity Information:

* For each listed official correct the title to “Member” only. Both AMCO records and the records of Corporations, Business and Professional Licensing (CBPL) list the titles as “Member” only. Use the following link to confirm your information:
https://www.commerce.alaska.gov/cbp/main/search/entities
AB-17 Section 4 License Operation:

* Check only one box each for calendar year 2019 and 2020. You have selected two boxes each and so this must be corrected.

Verify Name:

* AMCO records show that “Inthira” is the correct spelling of the first name for Inthira Zavackyy. However, CBPL lists the name “Ithiea” Zavackyy. Contact CBPL and correct the name spelling for Inthira Zavackyy and provide our office with proof that you have done so with a date stamped change document for example. CBPL entity details are attached for your review.

Just an FYI (this is not a requirement) it is noted that your business license is expired. A copy of the license detail for Susitna Bar and Grill #2089676 is attached for your information.

Please make the necessary corrections on the attached documents and return to this email no later than close of business May 10, 2021. Completed documents (with the exception of fingerprint cards or payments) may be scanned and emailed, and questions or concerns may be sent to alcohol.licensing@alaska.gov.<mailto:alcohol.licensing@alaska.gov>

Thank you for your immediate diligence toward completing your application.

Kristina Sarezhenkov
Licensing Examiner
Alcohol and Marijuana Control Office
550 West 7th Avenue, Suite 1600
Anchorage, Alaska 99501
**Name(s)**

<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Name</td>
<td>JAZCO INVESTMENT, LLC</td>
</tr>
</tbody>
</table>

**Entity Details**

- **Entity Type**: Limited Liability Company
- **Entity #**: 10109114
- **Status**: Good Standing
- **AK Formed Date**: 7/6/2019
- **Duration/Expiration**: Perpetual
- **Home State**: ALASKA
- **Next Biennial Report Due**: 1/2/2023
- **Entity Mailing Address**: 7100 LAKE OTIS PKWY SPC 38, ANCHORAGE, AK 99507
- **Entity Physical Address**: 880 N STREET SUITE 101, ANCHORAGE, AK 99501

**Registered Agent**

- **Agent Name**: Darryl Thompson
- **Registered Mailing Address**: 880 N STREET, SUITE 101, ANCHORAGE, AK 99501
- **Registered Physical Address**: 880 N STREET, SUITE 101, ANCHORAGE, AK 99501

**Officials**

<table>
<thead>
<tr>
<th>AK Entity #</th>
<th>Name</th>
<th>Titles</th>
<th>Owned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ithiea Zavacky</td>
<td>Member</td>
<td>50.00</td>
</tr>
<tr>
<td></td>
<td>John Zavacky</td>
<td>Member</td>
<td>50.00</td>
</tr>
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</table>
### Filed Documents

<table>
<thead>
<tr>
<th>Date Filed</th>
<th>Type</th>
<th>Filing</th>
<th>Certificate</th>
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</thead>
<tbody>
<tr>
<td>7/06/2019</td>
<td>Creation Filing</td>
<td>Click to View</td>
<td>Click to View</td>
</tr>
<tr>
<td>7/26/2019</td>
<td>Initial Report</td>
<td>Click to View</td>
<td>Click to View</td>
</tr>
<tr>
<td>10/08/2020</td>
<td>Biennial Report</td>
<td>Click to View</td>
<td>Click to View</td>
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</tbody>
</table>

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LICENSE DETAILS

License #: 2089676

Business Name: Susitna Bar and Grill

Status: Expired

Issue Date: 07/06/2019

Expiration Date: 12/31/2019

Mailing Address: 20333 W. Parks Hwy
Houston, AK 99694

Physical Address: 20333 W. Parks Hwy
Houston, AK 99694

Owners

JAZCO INVESTMENT, LLC

Activities

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>NAICS</th>
<th>Professional License #</th>
</tr>
</thead>
<tbody>
<tr>
<td>72 - Accommodation and Food Services</td>
<td>722110 - FULL-SERVICE RESTAURANTS</td>
<td></td>
</tr>
</tbody>
</table>

Endorsements

No Endorsements Found

License Lapse(s)

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

No Lapses on record for the last 4 years.