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 completed and 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.

<table>
<thead>
<tr>
<th>Doing Business As:</th>
<th>Sunrise Inn</th>
<th>License #:</th>
<th>1096</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.

The Sunrise Inn is a historical building built in 1958. Tourists come in to see the rustic woodwork, the Kenai River that is painted on the floor complete with salmon and trout. The walls have painted maps of the river showing all fishing holes. My financier is painted on the wall catching a rainbow trout on the floor. We also have beer from local Alaskan breweries.

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

Since purchase in 2015, I have replaced the flooring, replaced a rotted wall, painted all of the walls and decorated with Alaskan animal mounts. I have added window trim, painted the floor and fixed all doors.

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?


[Tourism Statement] (rev 9/22/2021)
2.5 Do you offer room rentals to the traveling public?

If "yes" answer the following questions:

How many rooms are available?

10 motel rooms and a two bedroom house. Plus 17 RV spots and 5 tents spaces

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)?

Only the house has kitchen facilities.

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 restaurant has 10 tables and 9 seats at the counter. There is a deck for summer use only with 6 tables. There is one main entrance with 4 doors total. We are open 9-8 in the Winter and 8-9 in the Summer.

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".

Gift store and gasoline sales.
STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

FORM CONTROL

LIQUOR LICENSE
2022 - 2023
TEMPORARY

LICENSE NUMBER
1096

LICENSE RENEWAL APPLICATION DUE
DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT
FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispenser

LICENSE FEE: $2,500.00

1106

D/B/A: Sunrise Inn
21849 Sterling Highway (Coop.)

Mail Address:
Sunrise Holdings, LLC
PO Box 529
Cooper Landing, AK 99572

CITY / BOROUGH: Outside City Limits
Kenai Peninsula 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 7/21)

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

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COPY

DIRECTOR

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

04-900 (REV 7/21)
Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2022 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 02/28/2022 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.

<table>
<thead>
<tr>
<th>Establishment Contact Information</th>
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<tbody>
<tr>
<td>Licensee (Owner): Sunrise Holdings, LLC</td>
</tr>
<tr>
<td>License Type: Beverage Dispensary -Tourism</td>
</tr>
<tr>
<td>Doing Business As: Sunrise Inn</td>
</tr>
<tr>
<td>Premises Address: 21849 Sterling Highway (Cooper Landing)</td>
</tr>
<tr>
<td>Local Governing Body: Kenai Peninsula Borough</td>
</tr>
<tr>
<td>Community Council: None</td>
</tr>
</tbody>
</table>

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

| Mailing Address: PO Box 529 |
| City: Cooper Landing | State: Alaska | ZIP: 99572 |

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 CBPI 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: Arden Rankins | Contact Phone: 907-529-7985 |
| Contact Email: ardenrankins@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: |
Contact Phone: |
Contact Email: |

Name of Contact: |
Contact Phone: |
Contact Email: |

Name of Contact: |
Contact Phone: |
Contact Email: |
Section 2 – Entity or Community Ownership Information

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are corporations or LLCs must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below is neither your EIN/tax ID number, nor your business license number. You may view your entity’s status or find your CBPL entity number by visiting the following site: https://www.commerce.alaska.gov/cbp/main/search/entities

| Alaska CBPL Entity #: | 10031353 |

You must ensure that you are able to certify the following statement before signing your initials in the box to the right:  

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL.

This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- If the applicant is a corporation, the following information must be completed for each shareholder who owns 10% or more of the stock in the corporation, and for each president, vice-president, secretary, and managing officer.
- If the applicant is a limited liability organization, the following information must be completed for each member with an ownership interest of 30% or more, and for each manager.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each partner with an interest of 10% or more, and for each general partner.

**Important Note:** The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application. You must list **ALL** of your qualifying officials, additional copies of this page or a separate sheet of paper may be submitted if necessary.

<table>
<thead>
<tr>
<th>Name of Official:</th>
<th>Arden Rankins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s):</td>
<td>member/manager</td>
</tr>
<tr>
<td>Phone:</td>
<td>9075297985</td>
</tr>
<tr>
<td>% Owned:</td>
<td>100</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>P.O. Box 529</td>
</tr>
<tr>
<td>City:</td>
<td>Cooper Landing</td>
</tr>
<tr>
<td>State:</td>
<td>Alaska</td>
</tr>
<tr>
<td>ZIP:</td>
<td>99572</td>
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[Form AB-17d] (rev 09/17/2019)
License # 1096 DBA Sunrise Inn

AMCO Rvvd 1/28/2022
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

<table>
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<th>Name:</th>
<th>Contact Phone:</th>
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<td></td>
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<td></td>
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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) ☑ 2020 ☑ 2021

2. The license was only operated during a specific season each year. (Seasonal)
   If your operation dates have changed, list them below:
   ________________________________ to ________________________________
   ☐ 2020 ☐ 2021

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.
   ☐ 2020 ☐ 2021

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 and/or 2021, 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.
   ☐ 2020 ☐ 2021

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 2020 or 2021?

☐ 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: 2022/2023 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]
Arden Rankins
Printed name of licensee

[Signature]
Devin Gonzalez / Postmaster
Notary Public in and for the State of: Alaska

My commission expires: with office

Subscribed and sworn to before me this 1 day of December, 2021.

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
Common Carrier applications must include a current safety inspection certificate

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>$ 2800</th>
</tr>
</thead>
</table>

[Form AB-17] (rev09/21/2021)