



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 305 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, 3 AAC 305.045 and 3 AAC 305.060.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and documents before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	Robert Alexander	License #:	4531		
License Type:	Beverage Dispensary	Statutory Reference:	AS 04.09.200		
Doing Business As:	Tri-Grill				
Premises Address:	901 W 6th Ave				
City:	Anchorage	State:	AK	ZIP:	99501
Local Governing Body/Bodies:	Municipality of Anchorage				

Transfer Type:

- ☒ Regular transfer
- ☐ Transfer with security interest
- ☐ Involuntary retransfer
- ☐ Controlling interest transfer
- ☐ Location transfer

RECEIVED

JUN 10 9 2025

Dept. of Commerce
AMCO

OFFICE USE ONLY			
Complete Date:		Transaction #:	
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	BK LLC				
Doing Business As:	G Building				
Premises Address:	440 W 3rd Ave				
City:	Anchorage	State:	AK	ZIP:	99511
Community Council, (if applicable):	Downtown				
Mailing Address:	PO Box 111846				
City:	Anchorage	State:	AK	ZIP:	99511
Email:	gallostrke@gmail.com	Phone:	907-771-6060		
Designated Licensee:	Abraham Gallo				
Contact Phone:	907-444-4929	Business Phone:	907-771-6060		
Contact Email:	gallostrke@gmail.com				

Seasonal License? ☒ Yes ☐ No If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

Premises to be licensed is:

☒ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer (Must be in feet).

233 feet from Step Up School Program

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer (Must be in feet.)

2,112 feet from Holy Family Catholic Church

RECEIVED

JUN 09 2025



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
If more space is needed, please attach a separate sheet with the required information.
The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.
If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the application shall be executed by an authorized officer of the Corporation. Information must be completed below for each **stockholder 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, whether manager managed or member managed, the following information must be completed for each **member with an ownership interest of 10% or more** and for each **manager regardless of ownership share**.
- 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**.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

RECEIVED

JUN 09 2025

Dept. of Commerce
AMCO

Entity Official:	Abraham Galle				
Title(s):	Mgr. Member	Phone:	907-771-6060	% Owned:	100
Address:	PO Box 111846				
City:	Anchorage	State:	AK	ZIP:	99511
Email:	Gallostke@gmail.com	Phone:	907-771-6060		



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	
Email:		Phone:			

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	
Email:		Phone:			

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	
Email:		Phone:			

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC). The registered agent is either an individual resident of the state or domestic corporation authorized to transact business in the state and whose business office is the same as the registered office.

CBPL Entity #:	10120491	AK Formed Date:	12/27/2019	Home State:	AK
Registered Agent:	Abraham Gello	Agent's Phone:	907-771-6060		
Agent's Mailing Address:	PO BOX 111846				
City:	Anch	State:	AK	ZIP:	99511
Email:	gallostrk@gmail.com	Phone:	907-771-6060		

Residency of Agent:

RECEIVED

Yes No

Does your registered agent satisfy the requirement of AS 04.11.430?

☒ ☐

JUN 09 2025

Dept. of Commerce
AMCO



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

☒ ☐

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

5 Beverage Dispensaries #2833, #3572, #4314, #814, #4109
1 Package Store #4919

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

☒ ☐

If "Yes", disclose the name of the individual and the reason for this authorization:

Renee Johnston - Office staff for Mr Gallo
Alonso Romo -

RECEIVED

JUN 09 2025

Dept. of Commerce
AMCO



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Robert Alexander
Signature of transferor

Robert Alexander
Printed name of transferor

Subscribed and sworn to before me this 17th day of April, 2025.



Monique Johnston
Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: June 17, 2027

Signature of transferor

Printed name of transferor

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

Signature of Notary Public

RECEIVED

Notary Public in and for the State of _____

My commission expires: _____

JUN 09 2025

Dept. of Commerce
AMCO



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

I certify 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.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 305.700.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

I certify that I and any individual identified in the business entity ownership section of this application, has, or will read AS 04 and its implementing regulations.

Signature of Transferee

Abraham Gallo

Printed name

JUN 09 2025

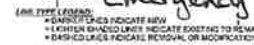
Dept. of Commerce
AMCO

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: June 17, 2027

Subscribed and sworn to before me this 17TH day of April, 2025.

[illegible]

The "G" Building - Renovation
420 W. 3rd Avenue, Anchorage, Alaska

SCB NO	2
CATE	1115
CRAND	A
ALPHABET	

PROJECT TITLE:
FIRST FLOOR PLANS

SHEET NO.

A1.0

CONSTRUCTION DOCUMENTS
IF THIS SHEET IS LESS THAN: 22"x34" IT IS A REDUCED PRINT
- DO NOT SCALE DIMENSIONS FROM BLUEPRINTS -



440 W 3rd Ave

Building

- 📍

Directions
- 🔖

Save
- 📍

Nearby
- 📱

Send to phone
- 🔗

Share

- 📍

440 W 3rd Ave, Anchorage, AK 99501
- ✎

Suggest an edit on 440 W 3rd Ave
- 📍

Add a missing place
- 🏢

Add your business

Photos



🍴 Restaurants

🏨 Hotels

📷 Things to do

🚇 Transit

🅇 Parking

🏪 Pharmacies

🏧 ATM

Alaskas Finest Tours & Adventures

Hilton Anchorage
315 (2433)
4-star hotel

F Street Station
Grill

Historic Anchorage Hotel
43 (248)
3-star hotel

Kumagoro
Japanese

Peratrovich Park/Old City Hall Park

Segway Tours of Anchorage

Tequila 61

Midnight Market |
Vape And Smoke Shop...
Vaporizer store

Sunshine Plaza

Biscuitclub
Brunch

Downtown Bicycle
Rental, Sales & Repair

Balto's Statue

Whisky & Ramen
Ramen

Google Maps

W 3rd Ave

W 3rd Ave

W 3rd Ave

W 3rd Ave

W 4th Ave

W 4th Ave

W 4th Ave

W 4th Ave

E St

E St

E St

D St

Layers

3D

📏 50 ft