

Document reference ID: 3411

## Licensing Application Summary

Application ID:

3411

**Applicant Name:** 

Lindblad Expeditions, Llc

License Type applied for:

Common Carrier Dispensary License (CCDL) (AS

04.09.260)

**Application Status:** 

In Review

**Application Submitted On:** 

02/14/2025 12:12 PM

## **Entity Information**

**Business Structure:** 

Limited liability company

Alaska Entity Number (CBPL):

10056733

## **Entity Contact Information**

**Entity Address:** 

2505 Second Avenue Suite 300, Seattle, WA, 98121, USA

## **Initial Application Information**

**Authority Type:** 

I am authorized by the licensee w/o binding authority

Prefix:

Ms

**Legal First Name:** 

Brenda

Legal Last Name:

Metz

**Email Address:** 

BrendaM@Expeditions.com

**Phone Number:** 

206-661-7383

#### Additional Authorized Users

**Legal Name** 

**Relation with Applicant** 

Frederick Goldberg

**Executive Management** 

## Ownership / Principal Party Details

Principal Parent Entity Principal Party Role %Ownership

Lindblad Expeditions, Llc Lindblad Expeditions Holdings, Inc. Member 100

Lindblad Expeditions, Llc Frederick Goldberg Affiliate

#### **Premises Address**

Address: Alaskan Waters, Alaska, AK, USA

Mailing Address: Alaskan Waters, Alaska, AK, USA

Does the proposed site include a

valid street address?

Yes

#### **Basic Business information**

Business/Trade Name: M/V National Geographic Resolution

What is your primary business at this

location?

Other

What is your premises type? Alaskan Waters

Coast Guard Inspection Document NG RESOLUTION USCG CERTIFICATE OF

COMPLIANCE (EXPIRES 14 AUGUST 2024).pdf

#### **Premises Contact Details**

Address: Alaskan Waters, Alaska, AK, USA

## Local Government and Community Council Details

City/Municipality

Alaskan Waters

**Borough** 

Other (Common Carrier)

## **Property Ownership**

Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed

location?

Yes

**Property Utilization Status** 

An Existing Facility

**Property Ownership Deed** 

RS Federal Maritime Commission.pdf

## **Premises Diagram**

Will the license or permit embrace the entire

premises address?

Yes

**Premises Diagram** 

RS Deckplan.pdf

#### **Seasonal Information**

Are you conducting seasonal

Yes

business?

Please Provide your six-month

operating period

08/13-08/20/2/5

Operation Period Details The NG Resolution will be in Alaskan Waters from 08/13 -

20

Then returning Aug of 2025

#### Other licenses involvement

5808 Seabird, 5809 Sealion, 5810 Quest, 5811, Venture, 5812 Orion

#### Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

I hereby certify that any ownership change shall be reported to the board as required under AS 04.11.040, AS 04.11.045, AS 04.11.050, and AS 04.11.055.

# Public Notice Posting Attestation and Publishers Affidavit

Have you posted your application at both required locations for Yes

ten consecutive days?

What was the other conspicuous location of your post? (Please

Include the full address)

Port Office in Nome. 307

**Belmont Street** 

What was the first day you posted your application?

11/24/2024

I attest that I have met the public posting notice requirement set forth under AS 04.11.310 by posting a copy of my application for the 10-day period at the location of the proposed licensed premises and at another conspicuous location in the area of the proposed premises as listed in this application.

I hereby attest 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 of 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.

#### **Attestations**

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

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 of 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 all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

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

This application was digitally signed by : Brenda K Metz on 11/24/2024 12:02:38 PM

## Payment Info

Payment Type : Check

Check Number: 100832644

Payment Date: 8/13/2024 12:00:00 PM

### **Documents**

#	File Name	Туре	Added On
1	NG RESOLUTION USCG CERTIFICATE OF COMPLIANCE (EXPIRES 14 AUGUST 2024).pdf	Coast Guard Inspection Document	07/30/2024 06:19 AM
2	RS Federal Maritime Commission.pdf	License property ownership document	07/31/2024 03:54 AM

3	RS Deckplan.pdf	License Location Diagram  Document	08/01/2024 06:11 AM
4	Lindblad_License_8.22-29 9.5.2024_2cx2.25.pdf	Publishers Affidavit	11/24/2024 12:17 PM
5	Nome Nugget for RS Affidavit.pdf	Publishers Affidavit	02/14/2025 12:10 PM
6	AB-07 Revised w locations.pdf	License Paper Form Application Document	02/14/2025 12:10 PM



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

alcohol.licensing@alaska.gov

Phone: 907.269.0350

https://www.commerce.alaska.gov/web/amco

Alaska Alcoholic Beverage Control Board

#### Form AB-00: New License Application

#### Why is this form needed?

This application for a license is required for all individuals or entities seeking to apply for a new alcoholic beverage 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 and 3 AAC 305.045.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and fees before any license application will be considered complete and placed in the queue for a licensing examiner review.

30	ection 1 – Esta	Diisnmen	t and	a Co	ntact Into	rmation		
Enter information for the bus	siness seeking to be lice	ensed.						
Applicant:	Lindblad Expeditions, LLC							
License Type:	Common Carrier Dispensary				Statutory Reference:		04.09.260	
Doing Business As:								
Doing Business As: MV National Geographic Resolution  Premises Address: Plaskan Waters								
City:	Nome		State	e:	AK		ZIP:	99762
Local Governing Body/Bodies:	Alaskan Waters							
Community Council, (If applicable):								
Mailing Address:	Mailing Address: 2505 2nd Ave Suite 300							
City:	Seattle		State	ite: WA			ZIP:	98121
Designated Individual with Binding Authority to apply for this License:	Frederick	Goldbe	rg					
Contact Phone:	781-724-9	785	Busir	usiness Phone:			ب	)
Contact Email: Rick ge expeditions.com								
Yes No  If "Yes", write your operating period not exceeding  Six months each year: Aug 13 - 20, 202€								
		OFFICE U	USE ONL	Y				
Complete Date:		License Years:				License	#:	
Board Meeting Date:				Transo	action #:			
Issue Date:				Exami	ner:			

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## Form AB-00: New License Application

Section 2 – Premises Information									
Premises to be licensed									
an existing facility a new building a proposed building									
The next two questions must be completed by an applicant for a <u>beverage dispensary or beverage dispensary tourism license</u> and <u>package store</u> applicant 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.									
In Alaskan Water	In Alaskan Waters so distance changes								
	What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the bublic entrance of the nearest church building? Include the unit of measurement in your answer.								
In Alaskan Wate	ers so distance changes								
If more space is needed, ple The following information mu									
Address:									
City:	Si	tate:		ZIP:					
Email:	P	hone Nun	nber:						
This individual is an: applicant affiliate									
Name:									
Address:									
City:	City: State: ZIP:								
Email:		Phone N	lumber:						

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#### Form AB-00: New License Application

#### Section 4 - Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, 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 <u>limited liability organization</u>, 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 <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each *partner* with an interest of 10% or more, and for each *general partner*.
- For <u>any entity</u>, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	Frederick Goldberg	1
Title(s):	14	hone: 781-724-9785 % Owned: O
Address:	Officer 96 Morton St 9th Floor	
City:	I to IV To III	tate: NY 71P: 10014
Email:	RickG@Expeditions.com	,
Entity Official:		
Title(s):	Ph	hone: % Owned:
Address:	-	
City:	St	tate: ZIP:
Email:		
Entity Official:		
Title(s):	Ph	hone: % Owned:
Address:		
City:	St	tate: ZIP:
Entity Official:		
Entity Official.		
Title(s):	Ph	hone: % Owned:
Address:		
City:	Sta	rate: ZIP:

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#### **Alaska Alcoholic Beverage Control Board**

## Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC or who has registered as a business entity with the Division of Corporations, Business, and Professional Licensing (CBPL). Any entity registered or required to be registered with CBPL must be in good standing and have a registered agent as defined at AS 04.11.430.

		77							
CBPL Entity #:	10056733	AK Formed Date:		4/7/2017	Home State:	AK			
Registered Agent:	Daniel G. Bruce			Agent's Phone:	907-304-1420				
Agent's Mailing Address:									
City:	Juneau	State: AK ZIP: 996							
Email:	DBruce@BBSLawyer.com								
Does your registered agent satisfy the requirement of AS 04.11.430?									
	Sect	tion 5 – Ot	her L	icenses					
Ownership and financial intere	est in other alcoholic b	everage busine	sses.			Yes No			
Does any representative or owner named 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?  f "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):									
	Sec	tion 6 – A	utho	rization					
Communication with AMCO s	taff:					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 for this authorization:	the individual and con	tact information f	or the in	dividual, including phon	e number and email	, and the authori			
Michael Jones MikeJ@Expeditions.com P: 206-499-1154									



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#### Alaska Alcoholic Beverage Control Board

#### Form AB-00: New License Application

#### **Section 7 – Attestations**

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

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

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 I know the full content thereof. I declare that all of 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 all proposed licensees have been listed with Division of Corporation, Business and Professional Licensing.

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.

Brenda Metz Digitally signed by Brenda Metz Date: 2024.08.06 17:17:49

Printed name of licensee

Signature of licensee













#### NATIONAL GEOGRAPHIC ENDURANCE / RESOLUTION



