



Document reference ID : 5774

Licensing Application Summary

Transfer of Ownership

License ID: 15098
Application ID: 5774
Applicant Name: Ag Industries Llc
License Type applied for: Brewery Retail License (BRL) (AS 04.09.320)
Application Status: In Review
Application Submitted On: 07/24/2025 12:20 PM AKDT

Entity Information

Business Structure: Limited liability company
FEIN/SSN Number: [REDACTED]
Member Managed or Manager Managed: Member Managed
Alaska Entity Number (CBPL): 2211610
Alaska Entity Formed Date: 02/21/2025
Home State: AK

Entity Contact Information

Mailing Address: 144 E Potter Dr, UNIT E, Anchorage, AK, 99518, USA

Designated Licensee Information

Authority Type: I am authorized user by the designated licensee with binding authority
Legal First Name: Aaron
Legal Last Name: Hershberger
Email Address: aershberger@cynosure.beer
Phone Number: 330-447-4670

Additional Authorized Users

Legal Name	Relation with Applicant
Galen Eggleston	Executive Management

Registered Agent Information

Name	Aaron Hershberger
Agent's Phone Number	330-447-4670
Agent's Email	ahershberger@cynosure.beer
Address	7051 Serenity Cir, Anchorage, AK, 99502, USA

The registered agent is either an individual resident of the state or a domestic corporation authorized to transact business in the state and whose business office is the same as the registered office?

Yes

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Ag Industries Llc	Aaron Hershberger	Manager, Member	50
Ag Industries Llc	Galen Eggleston	Manager, Member	50

Premises Address

Address:	144 E. Potter Drive Unit E, Anchorage, AK, 99518, USA
Mailing Address:	144 Potter Dr, Anchorage, AK, 99518, USA
Does the proposed site include a valid street address?	Yes

Primary license number

Primary License Information	Application ID - 5706 - License Transfer Application - In Review
I have read AS 04.09.050. The annual production of the Manufacturer license this retail license attaches to falls under:	04.09.050(a)

Basic Business information

Business/Trade Name:	Cynosure Brewing
What is your primary business at this location?	Manufacturer

Premises Contact Details

Contact Person Name	Aaron Hershberger
----------------------------	-------------------

Business Phone Number	330-447-4670
Email Address	ahershberger@cynosure.beer
Address:	144 Potter Dr, Anchorage, AK, 99518, USA

Local Government and Community Council Details

City/Municipality	Anchorage (Municipality of)
Borough	None
Community Council Name	Taku Campbell

Property Ownership

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

No

Property Utilization Status

An Existing Facility

Are you operating under?

Service or management agreement

Add Copy of Lease\Sublease document

[Management Agreement.pdf](#)

Premises Diagram

Will the license or permit embrace the entire premises address?

Yes

Premises Diagram

- [Premises Within Building.pdf](#)
- [Premises Diagram Small.pdf](#)
- [Retail License app-diagram.pdf](#)

Security Plan

- [Security Plan-Outdoor area.pdf](#)
- [Security Plan-Outdoor area.pdf](#)

Other Licenses Involvement

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?

No

Individual Certification and 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 ten consecutive days?	Yes
What was the other conspicuous location of your post? (Please include the full address)	Fred Meyer - 2300 Abbott Rd, Anchorage, AK 99507
What was the first day you posted your application?	07/14/2025
If the newspaper advertisement was published did you advertise once a week for three consecutive weeks or if by radio twice week for three successive weeks?	Yes
What was the final date your advertisement was published/broadcasted?	05/25/2025

Newspaper/Publishers Affidavit

[Campaign 50014 signed.pdf](#)

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 : Aaron Hershberger on 07/14/2025 02:39 PM AKDT

Payment Info

Payment Type : CC

Payment Id: 2ded03cc-8963-43d7-9b52-5c98b48dd8e7

Receipt Number: 101087412

Payment Date: 07/24/2025 12:28 PM AKDT

Documents

#	File Name	Type	Added On
1	Management Agreement.pdf	License Lease\Sublease document	07/14/2025 02:34 PM AKDT
2	Premises Within Building.pdf	License Location Diagram Document	07/14/2025 02:35 PM AKDT
3	Premises Diagram Small.pdf	License Location Diagram Document	07/14/2025 02:35 PM AKDT
4	Retail License app-diagram.pdf	License Location Diagram Document	12/26/2023 07:09 PM AKST
5	Security Plan-Outdoor area.pdf	License Location Diagram Security Plan Document	07/14/2025 02:35 PM AKDT
6	Security Plan-Outdoor area.pdf	License Location Diagram Security Plan Document	12/26/2023 07:09 PM AKST
7	AB-11 Creditors Affidavit-Brewery Retail.pdf	Signed Creditors Affidavit	07/14/2025 02:38 PM AKDT
8	AB-11 Creditors Affidavit-Brewery Retail.pdf	Signed Creditors Affidavit	07/14/2025 02:38 PM AKDT
9	Campaign 50014 signed.pdf	Publishers Affidavit	07/24/2025 12:25 PM AKDT
10	AB-01.pdf	Transferee and Transferor Certifications Form	07/24/2025 12:25 PM AKDT

[Download](#)



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:	CLAPP LIQUID INDUSTRIES LLC		License #:	15098	
License Type:	BREWERY RETAIL		Statutory Reference:	04.09.320	
Doing Business As:	CYNOSURE BREWING				
Premises Address:	144 EAST POTTER DRIVE UNIT E				
City:	ANCHORAGE	State:	AK	ZIP:	99518
Local Governing Body/Bodies:	MUNICIPALITY OF ANCHORAGE				

Transfer Type:

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

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:	AG INDUSTRIES LLC				
Doing Business As:	CYNOSURE BREWING				
Premises Address:	144 EAST POTTER DRIVE UNIT E				
City:	ANCHORAGE	State:	AK	ZIP:	99518
Community Council, (If applicable):					

Mailing Address:	7051 SERENITY CIRCLE				
City:	ANCHORAGE	State:	AK	ZIP:	99502
Email:	AHERSHBERGER@CYNOSURE.BEER	Phone:	330-447-4670		

Designated Licensee:	AARON HERSHBERGER				
Contact Phone:	330-447-4670	Business Phone:	330-447-4670		
Contact Email:	AHERSHBERGER@CYNOSURE.BEER				

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 buildingThe 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).

3,700 ft.

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.)

2,100 ft.



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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

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.

Entity Official:	AARON HERSHBERGER				
Title(s):	MANAGING MEMBER	Phone:	330-447-4670	% Owned:	50
Address:	7051 SERENITY CIRCLE				
City:	ANCHORAGE	State:	AK	ZIP:	99502
Email:	AHERSHBERGER@CYNOSURE.BEER	Phone:	330-447-4670		



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	GALEN EGGLESTON				
Title(s):	MANAGING MEMBER	Phone:	607-229-8055	% Owned:	50
Address:	5305 DORBRANDT STREET UNIT 2				
City:	ANCHORAGE	State:	AK	ZIP:	99518
Email:	GEGGLESTON@CYNOSURE.BEER	Phone:	607-229-8055		

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 #:	10288684	AK Formed Date:	10/18/ 2024	Home State:	AK
Registered Agent:	AARON HERSHBERGER		Agent's Phone:	330-447-4670	
Agent's Mailing Address:	7051 SERENITY CIRCLE				
City:	ANCHORAGE	State:	AK	ZIP:	99502
Email:	AHERSHBERGER@CYNOSURE.BEER		Phone:	330-447-4670	

Residency of Agent:

Yes No

Does your registered agent satisfy the requirement of AS 04.11.430?



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Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

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):

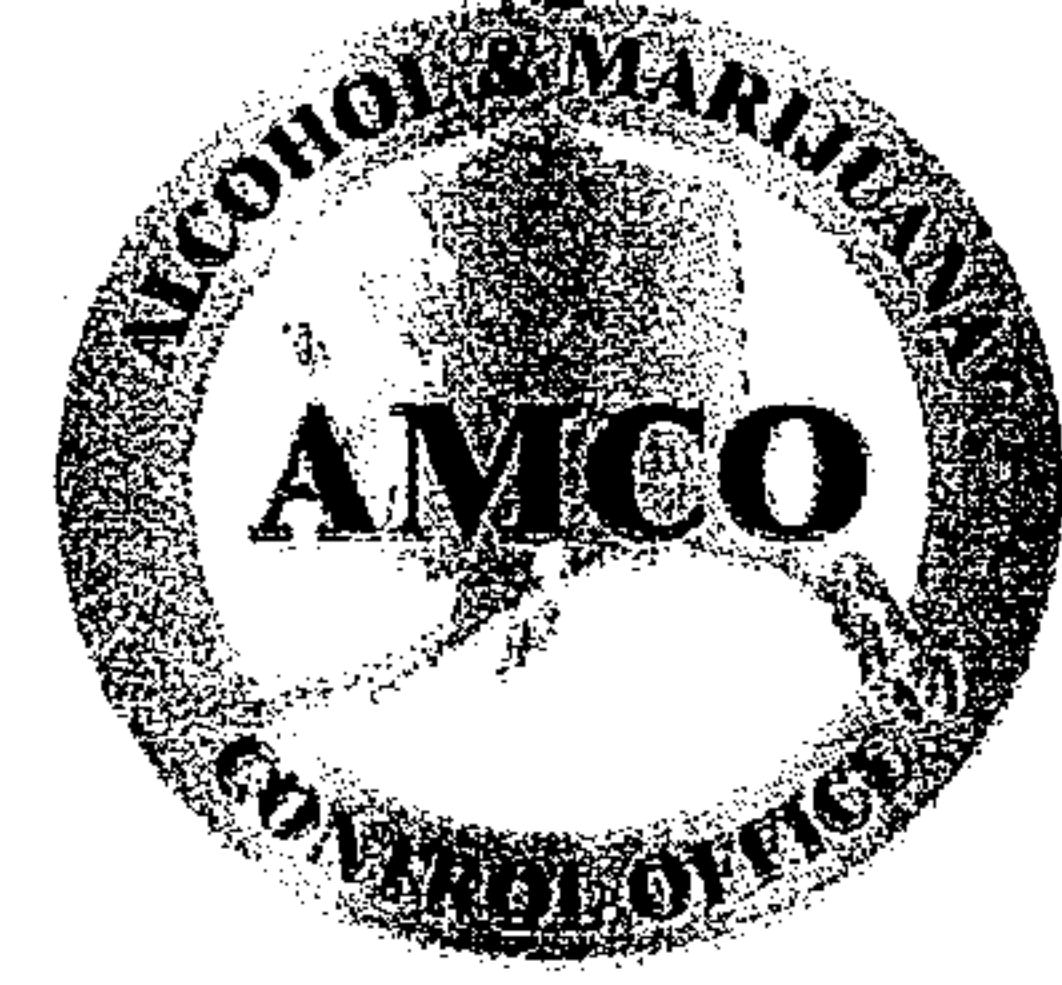
Section 7 – Authorization

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:



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Phone: 907.269.0350

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.

Signature of transferor

Clarke A. Peitz

Printed name of transferor

Subscribed and sworn to before me this 4th day of JUNE, 2025.

ALEXANDER S. HANSEN
Notary Public
State of Alaska
My Commission Expires Aug 1, 2027

Signature of Notary Public

Notary Public in and for the State of ALASKA.

My commission expires: AUG 4st 2027

Signature of transferor

Printed name of transferor

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

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Alcohol and Marijuana Control Office
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Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

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.

AH

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

AH

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.

AH

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.

AH

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

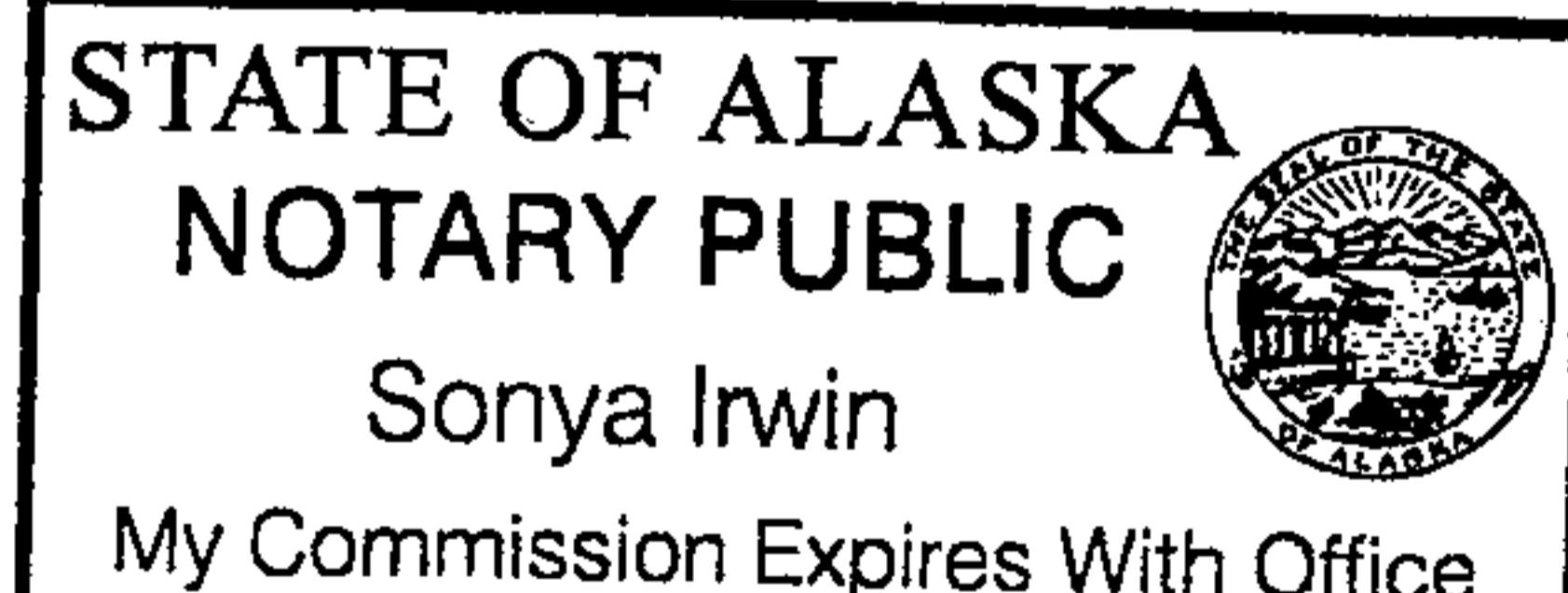
AH

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.

AH

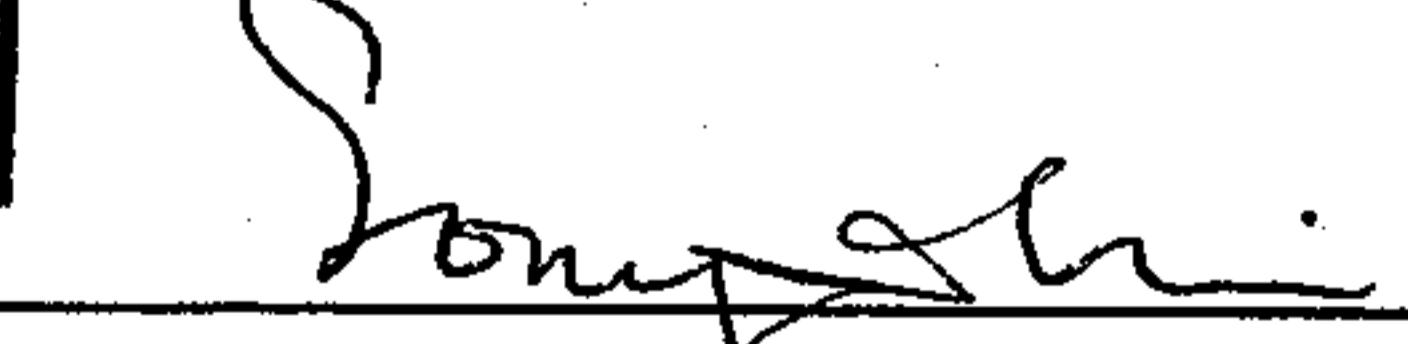
I certify that I and any individual identified in the business entity ownership section of this application, has, or will read AS 04 and its implementing regulations.

AH




Signature of transferee

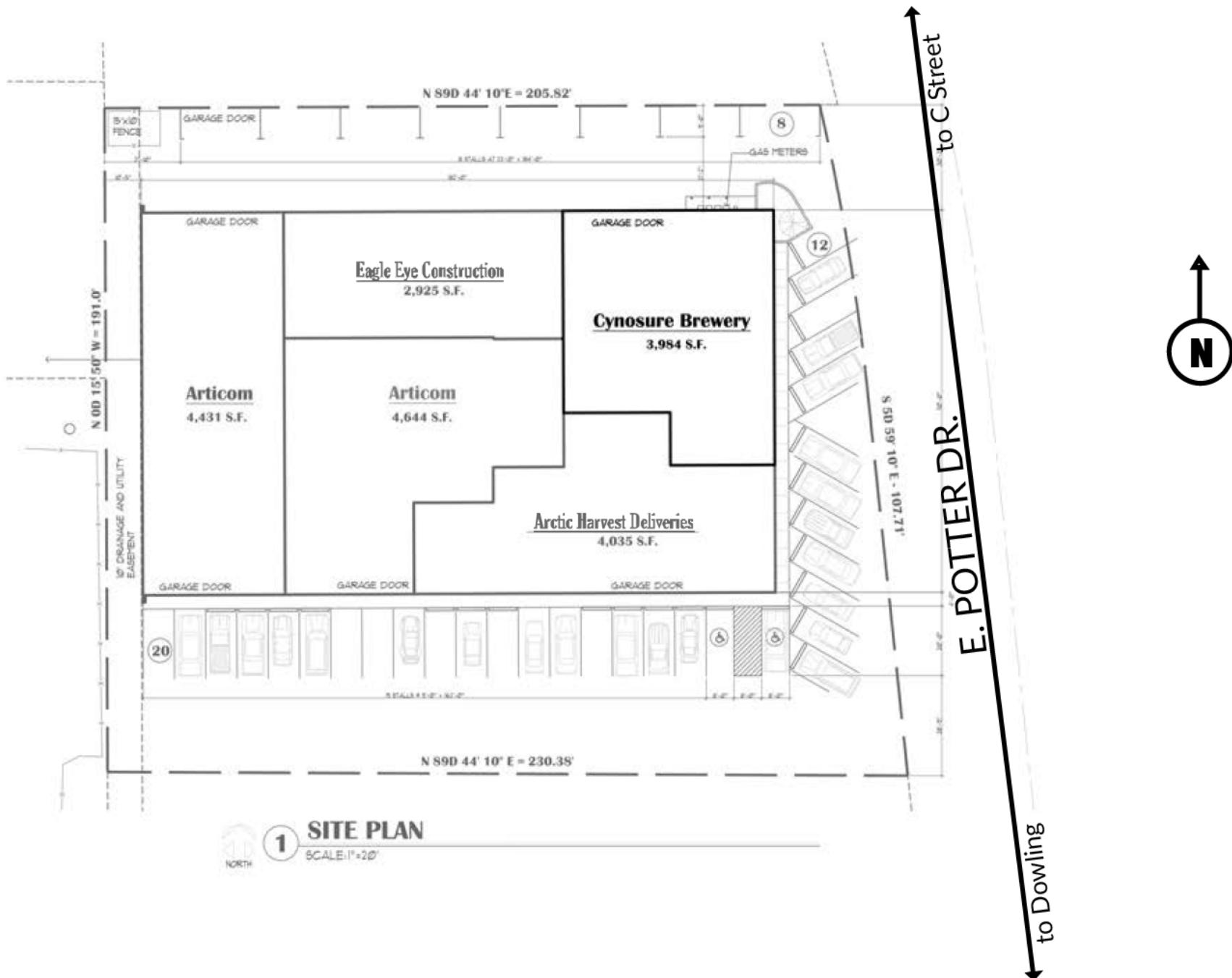

Printed name


Signature of Notary Public

Notary Public in and for the State of Alaska
My commission expires: With office

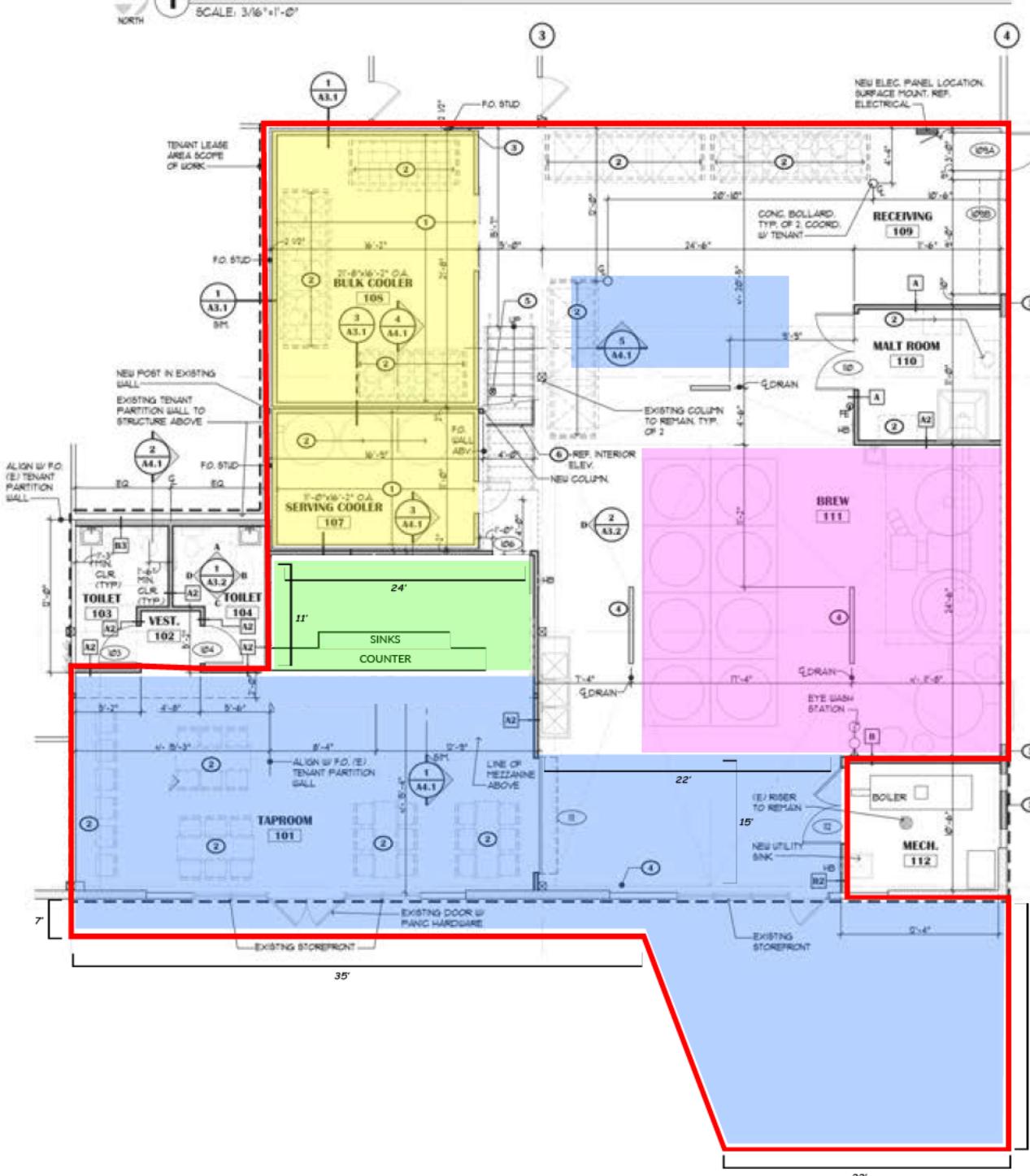
Subscribed and sworn to before me this 5 day of June, 2025.

Premises Within Building



1 ENLARGED FLOOR PLAN

SCALE: 3/16"=1'-0"



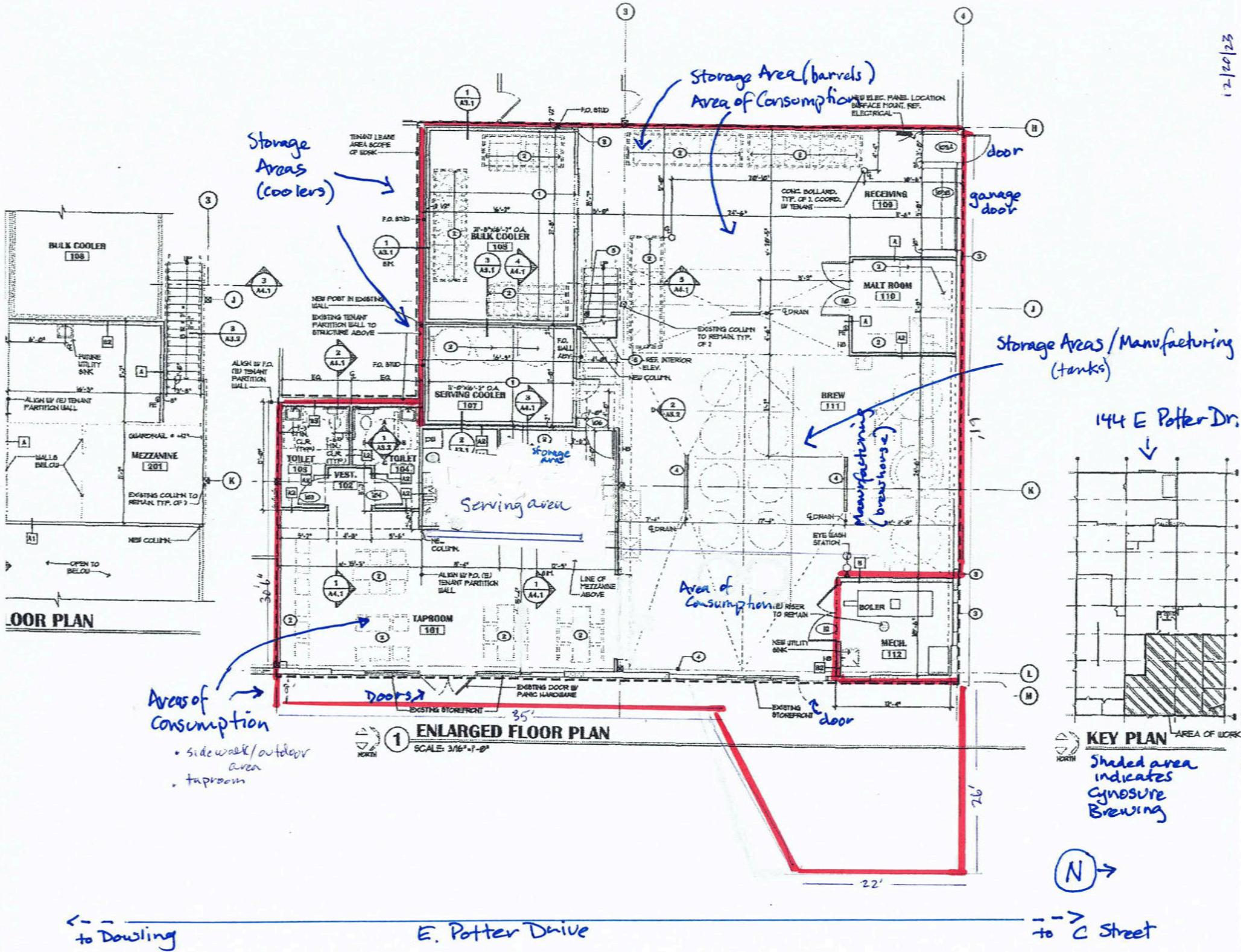
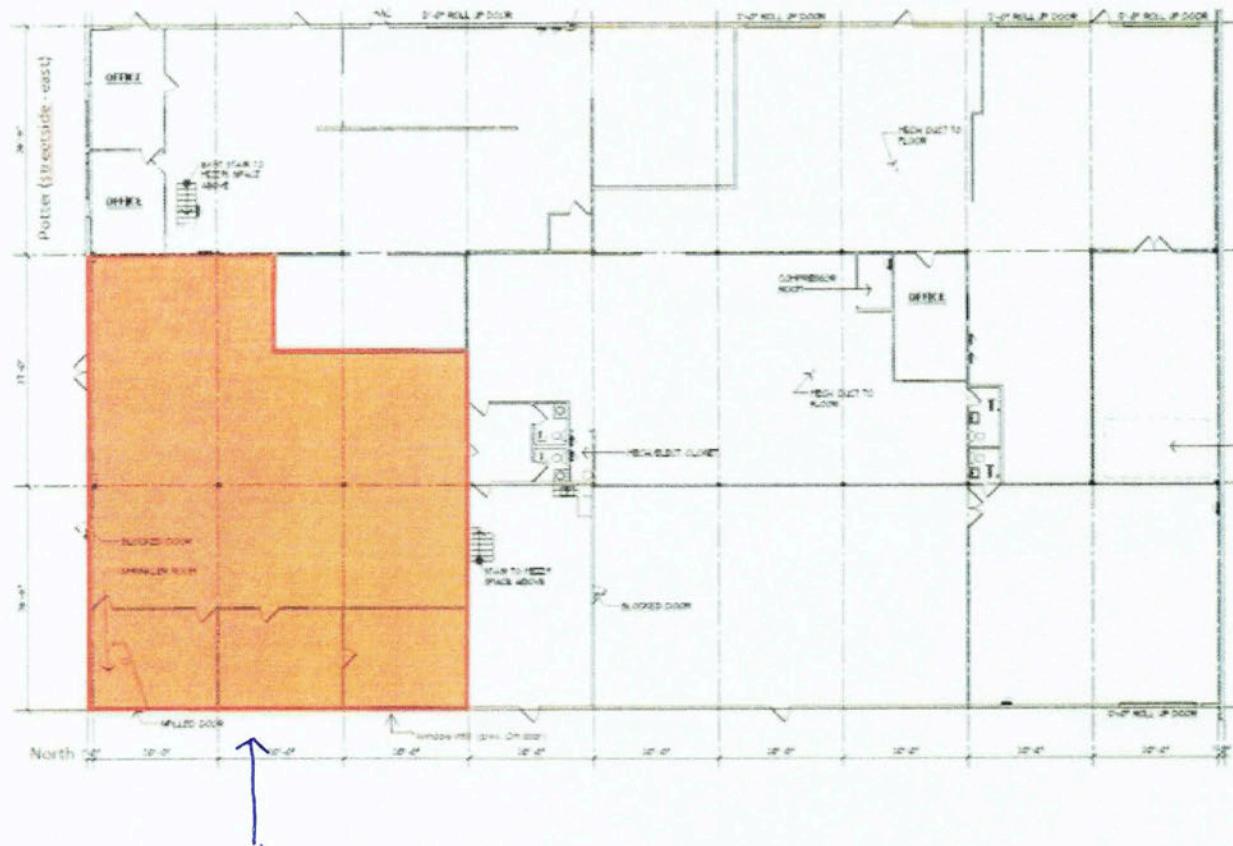


EXHIBIT A
PREMISES
144 E. Potter Drive



Cynosure Brewing premises
Unit E

Other tenants at 144 E. Potter Drive:

Arctic Harvest Deliveries - Unit A

Arcticom - Unit C

Iyabak Construction (storage only) ?

AG INDUSTRIES (dba) CYNOSURE BREWING

Outdoor Seating Security Plan

Physical Restrictions

The outdoor seating area will be entirely contained by a rope barrier. Entry to the outdoor seating area is restricted to two access points which are visible to the taproom staff at all times. The first access point to the outdoor seating area is located immediately north of the main taproom doors, on the West wall of the building. The second access point to the outdoor seating area is through the North taproom doors on the West wall of the building. Taproom staff have a clear and unobstructed view to both access points at all times.

The height of the rope barrier will not interfere with visual access to the fire standpipe, nor will it prevent emergency access to it.

Signage

Signs on the north door and the main entrance will state that beer may not be consumed outside except in the designated outdoor seating area. There will also be signs at each access point to the outdoor seating area stating that all beer must remain in and be consumed in the roped outdoor seating area.

Staff Training

Staff will be trained to treat the access points to the outdoor seating area as they do the entrances to the indoor taproom area. Training will include the importance of ensuring unaccompanied minors do not enter the outdoor seating area via either access point. Training will also include ensuring that beer does not leave nor is consumed outside of the roped outdoor seating area.

There are large windows that face directly onto the outdoor seating area. Staff will be trained to make frequent visual observations of the area and to enter the area on a regular basis to monitor activity.

All staff will be TAP certified and trained in the outdoor seating area security plan. Training will emphasize the importance of ensuring that alcohol does not leave the outdoor seating area and that minors do not have access to alcohol in the outdoor seating area. Staff will be trained in how to correct any security concerns that may arise in the outdoor seating area.