License Number: 10112
License Status: Active-Operating
License Type: Standard Marijuana Cultivation Facility
Doing Business As: GREAT ALASKAN BUD COMPANY
Business License Number: 1031886
Designated Licensee: Shawn Coyle
Email Address: Shawn@greatalaskanbudcompany.com
Local Government: Fairbanks (City of)
Local Government 2: Fairbanks North Star Borough
Community Council:
Latitude, Longitude: 64.504900, -147.453700
Physical Address: 1905 Livengood Ave.
Fairbanks, AK 99701
UNITED STATES

Licensee #1

Type: Entity
Alaska Entity Number: 10030501
Alaska Entity Name: SP&C Enterprises LLC
Phone Number: 907-460-4383
Email Address: Shawn@greatalaskanbudcompany.com
Mailing Address: 1905 Livengood Ave.
Fairbanks, AK 99701
UNITED STATES

Entity Official #1

Type: Individual
Name: Shawn Coyle
[redacted]
Phone Number: 907-460-4383
Email Address: Shawn@greatalaskanbudcompany.com
Mailing Address: 1905 Livengood Ave.
Fairbanks
UNITED STATES MINOR OUTLYING ISLANDS

Entity Official #2

Type: Individual
Name: Veronica Coyle
[redacted]
Phone Number: 907-687-9162
Email Address: veronica@gabco.xyz
Mailing Address: 1905 Livengood Ave
Fairbanks, AK 99701
UNITED STATES

Entity Official #3

Type: Individual
Name: Veronica Belanger
[redacted]
Phone Number: 907-358-6464
Email Address: veronicapaige@gabco.xyz
Mailing Address: 1905 Livengood Ave
Fairbanks, AK 99701
UNITED STATES

Entity Official #4

Type: Entity
Alaska Entity Number: 10174269
Alaska Entity Name: V&V Enterprises LLC
Phone Number: 907-479-4420
Email Address: veronica@gabco.xyz
Mailing Address: 1905 Livengood Ave
Fairbanks, AK 99701
UNITED STATES

Note: *No affiliates entered for this license.*

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
https://www.commerce.alaska.gov/web/amco
Phone: 907.269.0350

Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	SP&C Enterprises LLC	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	GREAT ALASKAN BUD COMPANY				
Physical Address:	1905 Livengood Ave.				
City:	Fairbanks	**State:**	AK	**Zip Code:**	99701
Designated Licensee:	Shawn Coyle				
Email Address:	Shawn@greatalaskanbudcompany.com				

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	
	1-MJ20 2-MJ20a

OFFICE USE ONLY					
Received Date:		Payment Submitted Y/N:		Transaction #:	

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
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Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-20: 2025-2026 Renewal Application Certifications

Why is this form needed?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's Anchorage office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Shawn Coyle	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Ave.				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Shawn Coyle
Title:	Owner

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements: Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years. SC

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years. SC

I certify that a notice of violation has **not** been issued for this license between July 1, 2024, and June 30, 2025. SC

Sign your initials to the following statement only if you are unable to certify one or more of the above statements: Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).

Alaska Marijuana Control Board

Form MJ-20: 2025-2026 Renewal Application Certifications

Section 5 – Certifications

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

	Initials
I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.	SC
I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.	SC
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	SC
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.	SC
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.	SC
I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.	SC
Initial this box if you are submitting an original fingerprint card and the applicable fees to AMCO for AMCO to obtain criminal justice information and a national criminal history record required by AS 17.38.200 and 3 AAC 306.035(d). If I have multiple marijuana licenses being renewed, I understand one fingerprint card and fee will suffice for all marijuana licenses being renewed.	

If multiple licenses are held, list all license numbers below:

10112
10113

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. SC

Shawn Coyle

Printed name of licensee

Signature of licensee

License #_____

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

Alaska Marijuana Control Board

Form MJ-20a: 2025-2026 Residency Exception

Why is this form needed?

Per 3 AAC 306.035(h), this residency exception may be submitted with a marijuana establishment renewal application for each licensee whose residency status has changed so that the licensee is no longer considered a resident of the state as defined at 3 AAC 306.015(f)(2).

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Shawn Coyle	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Ave				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Shawn Coyle
Title:	Owner

Section 3 – Changes to Residency

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

I certify that **my primary residence is in Alaska.** SC

I certify that **I have good cause**, as stated below, **for not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015(f)(2).

I certify that **the cause of not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015.(f)(2) **is temporary.**

I anticipate being able to meet the requirements to be a resident of the state as defined at 3 AAC 306.015(f)(2) at the following time:

Form MJ-20a: 2025-2026 Residency Exception

Section 4 – Certifications

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

Initials

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.

SC

Shawn Coyle

Printed name of licensee

Signature of licensee

License #_____

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marijuana.licensing@alaska.gov
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Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-20: 2025-2026 Renewal Application Certifications

Why is this form needed?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's Anchorage office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Veronica Belanger	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Avenue				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Veronica Belanger
Title:	Owner

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements: Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years. VB

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years. VB

I certify that a notice of violation has **not** been issued for this license between July 1, 2024, and June 30, 2025. VB

Sign your initials to the following statement only if you are unable to certify one or more of the above statements: Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b). VB

Alaska Marijuana Control Board

Form MJ-20: 2025-2026 Renewal Application Certifications

Section 5 – Certifications

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

	Initials
I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.	VB
I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.	VB
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	VB
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.	VB
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.	vb
I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.	VB
Initial this box if you are submitting an original fingerprint card and the applicable fees to AMCO for AMCO to obtain criminal justice information and a national criminal history record required by AS 17.38.200 and 3 AAC 306.035(d). If I have multiple marijuana licenses being renewed, I understand one fingerprint card and fee will suffice for all marijuana licenses being renewed.	

If multiple licenses are held, list all license numbers below:

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. VB

Veronica Belanger

Printed name of licensee

Signature of licensee

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Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-20a: 2025-2026 Residency Exception

Why is this form needed?

Per 3 AAC 306.035(h), this residency exception may be submitted with a marijuana establishment renewal application for each licensee whose residency status has changed so that the licensee is no longer considered a resident of the state as defined at 3 AAC 306.015(f)(2).

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Veronica Belanger	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Avenue				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Veronica Belanger
Title:	Owner

Section 3 – Changes to Residency

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

I certify that **my primary residence is in Alaska.** VB

I certify that **I have good cause**, as stated below, **for not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015(f)(2).

I certify that **the cause of not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015.(f)(2) **is temporary.**

I anticipate being able to meet the requirements to be a resident of the state as defined at 3 AAC 306.015(f)(2) at the following time:

Form MJ-20a: 2025-2026 Residency Exception

Section 4 – Certifications

Read the statement below, and then sign your initials in the box to the right: Initials

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. VB

Veronica Belanger
Printed name of licensee

VBelanger
Signature of licensee

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Alaska Marijuana Control Board

Form MJ-20: 2025-2026 Renewal Application Certifications

Why is this form needed?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's Anchorage office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Veronica Coyle	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Avenue				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Veronica Coyle
Title:	Owner

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements: Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years. VC

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years. VC

I certify that a notice of violation has **not** been issued for this license between July 1, 2024, and June 30, 2025. VC

Sign your initials to the following statement only if you are unable to certify one or more of the above statements: Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b). VC

Form MJ-20: 2025-2026 Renewal Application Certifications

Section 5 – Certifications

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

I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued. VC

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application. VC

I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state. VC

I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board. VC

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. VC

I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. VC

Initial this box if you are submitting an original fingerprint card and the applicable fees to AMCO for AMCO to obtain criminal justice information and a national criminal history record required by AS 17.38.200 and 3 AAC 306.035(d). If I have multiple marijuana licenses being renewed, I understand one fingerprint card and fee will suffice for all marijuana licenses being renewed. ☐

If multiple licenses are held, list all license numbers below:

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. VC

Veronica Coyle
Printed name of licensee

Veronica Coyle
Signature of licensee

License #_____

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Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-20a: 2025-2026 Residency Exception

Why is this form needed?

Per 3 AAC 306.035(h), this residency exception may be submitted with a marijuana establishment renewal application for each licensee whose residency status has changed so that the licensee is no longer considered a resident of the state as defined at 3 AAC 306.015(f)(2).

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Veronica Coyle	**License Number:**	10112		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Great Alaskan Bud Company				
Premises Address:	1905 Livengood Avenue				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Veronica Coyle
Title:	Owner

Section 3 – Changes to Residency

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

I certify that **my primary residence is in Alaska.** VC

I certify that **I have good cause**, as stated below, **for not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015(f)(2).

I certify that **the cause of not meeting the requirements to be a resident of the state** as defined at 3 AAC 306.015.(f)(2) **is temporary**.

I anticipate being able to meet the requirements to be a resident of the state as defined at 3 AAC 306.015(f)(2) at the following time:

Form MJ-20a: 2025-2026 Residency Exception

Section 4 – Certifications

Read the statement below, and then sign your initials in the box to the right: Initials

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. VC

Veronica Coyle

Printed name of licensee

Veronica . Coyle

Signature of licensee