STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 01/13/2023 ABC BOARD LIQUOR LICENSE 2023 - 2024

2787

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2024 (AS 04.11.270(b))

TEMPORARY THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2025 UNLESS DATED BELOW

TYPE OF LICENSE: Package Store

LICENSE FEE: \$1,500.00

1150

Olsen's Liquor Store D/B/A:

1.25 Mile Willow Lane

Mail Address:

Kvichak Pacific LLC PO Box 91006

Anchorage, AK 99509

CITY / BOROUGH: Dillingham

Unorganized 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

our M. Wilson

04-900 (REV 10/20/22

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

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ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 5/9/22)

D/B/A:

Olsen's Liquor Store 1.25 Mile Willow Lane

Mailing Address:

Kvichak Pacific LLC

PO Box 91006

Anchorage, AK 99509

Alaska Alcoholic Beverage Control Board

ONTROL OFFI

1 AB-17: 2023/2024 License Renewal Application Phol and Marijuana Control Office

550 W 7 Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2023/2024 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 application for renewal or any fees for renewal that have not been postmarked by 2/28/2023 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.

Licensee (Owner):	Kvichak Pacific LLC		License #:	2787
License Type:	Package Store			
Doing Business As:	Olsen's Liquor Store	100.0		
Local Governing Body:	Dillingham			
Community Council:		73.04.0	2000	
your mailing address has c	hanged, write the NEW address below:			
Mailing Address:				
City:	State:		ZIP:	
vill be the designated point of	Section 2 – Licensee Contactual listed below must be part of the ownership structur contact regarding this license, unless the Optional contact	e of the licensee listed act is completed.	in Section 1. Tl	
	lual listed below must be part of the ownership structur contact regarding this license, unless the Optional contact.	e of the licensee listed act is completed.	in Section 1. Tl	
vill be the designated point of	lual listed below must be part of the ownership structur contact regarding this license, unless the Optional contact.	e of the licensee listed act is completed.	in Section 1. Tl	nis person 2 29 40 (
Contact Licensee: Contact Email: Optional: If you wish for AMC	lual listed below must be part of the ownership structur	contact Phone	in Section 1. The	229 400
Contact Licensee: Contact Email: Optional: If you wish for AMC	Michael J. Keenan Michael J. Keenan Michael J. Keenan	contact Phone	in Section 1. The sec	229 400
Contact Licensee: Contact Email: Optional: If you wish for AMCO ist their information below:	Michael J. Keenan Michael J. Keenan Michael J. Keenan	Contact Phone mol Contact as	in Section 1. The sec	229 400
contact Licensee: Contact Email: Optional: If you wish for AMCO st their information below: Name of Contact:	Michael J. Keenan Michael J. Keenan Michael J. Keenan	Contact Phone mol Contact as	in Section 1. The sec	229 400
Contact Licensee: Contact Email: Optional: If you wish for AMCO st their information below: Name of Contact: Contact Email:	Michael J. Keenan Michael J. Keenan Michael J. Keenan	Contact Phone Contact Phone Contact Phone Contact Licensee (such as	in Section 1. The sec	about your license

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[Form AB-17] (rev 9/27/2022)



Alaska Alcoholic Beverage Control Board

Form AB-17: 2023/2024 License Renewal Application

Section 4 - Ownership Structure Certification

	YES NO		
Did	the ownership structure of the licensed business change in 2021/2022?		
If Ye	es, and you have NOT notified AMCO, list the updated information on form AB-39: Change of Officers and submit with you	r renewa	application
If N	o, certify the statement below by initialing the box to the right of the statement.		
I ce	rtify that the ownership structure of the business who owns this alcohol license did not change in any way during calendar years 2021 or 2022.	W	114
	Section 5 – License Operation		
Che	ck ONEBOX for EACH CALENDAR YEAR that best describes how this liquor license was operated:	2021	2022
1.	The license was operated for more than 240 hours throughout each year. (Year-round)		Z.
2.	The license was only operated during a specified time each year. (Not to exceed 6 months per year)		
	If your operation dates have changed, list them below:		-
	to		,
3.	The license was only operated to meet the minimum requirement of 240 total hours each calendar year. <u>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</u>		
	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. <u>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</u>	X	
	operated. If you have not met the minimum number of hours of operation in 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.	•	
	Section 6 - Violations and Convictions		
		YES	NO
Hav	ve ANY Notices of Violation been issued for this license?		M
Has	ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance opted under AS 04.21.010 in 2021 or 2022?		M
	ou checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)	·	 -
ע ניי	ou are unsure if you have received any Notices of Violation, contact the office before submitting this form.		
	Section 7 - Certifications		
Δ	As an applicant for a liquor license renowal. I declare under novelto of a still the state of	H. 104 JOY 1647 IS	

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 the license being potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that in accordance with AS 04.11.450, no one other than the licensee(s), as defined in AS 04.11.260, 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 I have provided AMCO with all required changes of the ownership structure of the
 business license, and have provided all required documents for any new or changes of officers.

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Alaska Alcoholic Beverage Control Board

Form AB-17: 2023/2024 License Renewal Application

 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 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.

and the factor of the factor o				
Muraul V. Keenan Signature of licensee MICHAEL J. KEENAN Printed name of licensee	Notary Public in an	Signature of No		
		My commission	expires:	
		•		
Subscribed and sworn to	before me this	day of		_ 20
Restaurant and Eating Place applications must Recreational Site applications must include Tourism applications must include Wholesale applications must include Common Carrier applications must All renewal and supplem https://www.commerce.alaska.gov	de a completed AB-3: de a completed AB-3: de a completed AB-2: include a current safo nental forms are avai	6: Recreational S 7: Tourism State 5: Supplier Certi ety inspection ce lable online:	ite Statement ment fication ertificate	
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is a and not the truthfulness, accuracy, or velicity of that document State of California, County of	JOSE FRA COMM NOTARY PU SAN DIE	AGOZA RIBERA M. #2416150 IBLIC-CALIFORNIA TE EGO COUNTY		
FOR OFFICE USE ONLY	My Comm. Expl	ires September 15, 2026		
License Fee: \$ \\$ 0000 Application Fee:	\$ 300.00	Misc. Fee:		
	To	tal Fees Due:	\$ 1800,00	

100492342 \$ 100523144

AMCO NOV 1 7 2022 Details

ENTITY DETAILS

Name(s)

 Type
 Name

 Legal Name
 KVICHAK PACIFIC, LLC

Entity Type: Limited Liability Company

Entity #: 129993

Status: Good Standing

AK Formed Date: 8/3/2010

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2024

Entity Mailing Address: P.O. BOX 91006, ANCHORAGE, AK 99509-1006

Entity Physical Address: 2210 FOREST PK DR, ANCHORAGE, AK 99517

Registered Agent

Agent Name: MICHAEL J KEENAN

Registered Mailing Address: PO BOX 91006, ANCHORAGE, AK 99509

Registered Physical Address: 513 WOOD RIVER RD, DILLINGHAM, AK 99576

Officials

			Show Former
AK Entity #	Name	Titles	Owned
	MICHAEL J. KEENAN	Manager, Member	100.00

Filed Documents

Date Filed	Туре	Filing	Certificate
8/03/2010	Creation Filing	Click to View	
5/01/2012	Biennial Report	Click to View	
3/24/2014	Biennial Report	Click to View	
9/08/2015	Agent Change	Click to View	
3/12/2016	Biennial Report	Click to View	
1/28/2018	Biennial Report	Click to View	
12/13/2019	Biennial Report	Click to View	
11/01/2021	Biennial Report	Click to View	

Close Details

Print Friendly Version

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing PO Box 110806, Juneau, AK 99811-0806

This is to certify that

OLSEN'S LIQUOR STORE

PO BOX 91006, ANCHORAGE, AK 99510

owned by

KVICHAK PACIFIC, LLC

is licensed by the department to conduct business for the period

November 1, 2021 to December 31, 2023 for the following line(s) of business:

42 - Trade



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

Julie Anderson Commissioner License Detail

LICENSE DETAILS

License #: 973778

Print Business License

Business Name: OLSEN'S LIQUOR STORE

Status: Active

Issue Date: 05/07/2012

Expiration Date: 12/31/2023

Mailing Address: PO BOX 91006

ANCHORAGE, AK 99510

Physical Address: 513 Wood River Rd

Dillingham, AK 99576

Owners

KVICHAK PACIFIC, LLC

Activities

Line of Business

NAICS

Professional License #

42 - Trade

445310 - BEER, WINE, AND LIQUOR STORES

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

No Lapses on record for the last 4 years.

Close License Detail

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