

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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-01: Transfer License Application

### Why is this form needed?

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 304** 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, and 3 AAC 304.105.

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

Licensee:	Silversea Provisioning LLC	License #	License #:	
License Type:	COMMON CARRIER DISPENSAL	RY Statutory	Statutory Reference:	
Doing Business As:	Silver Muse			
Premises Address:	Alaskan Waters			
City:	Stat	e:	ZIP:	
Local Governing Body:	N/A			•
ansfer Type:  Regular transfer  Transfer with securi  Involuntary retransl				
	OFFICE USE ONL	Υ		
	0			

License Years:

Examiner:

**Board Meeting Date:** 

Issue Date:



MAR 06 2024

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# Form AB-01: Transfer License Application

# Section 2 – Transferee Information nt and/or location seeking to be licensed.

Licensee:	Royal Alaska Beverage (	Cruise S	ales LLC		
Doing Business As:	Silver Muse				
Premises Address:	Alaskan Waters	v.			
City:		State:		ZIP:	
Community Council:	N/A				
Mailing Address:	1050 Caribbean Way				
City:				33132	
Designated Licensee:	Henry Pujol	r	4.	17	
Contact Phone:	305-539-6245 Business Phone: 305-539-6245			45	
Contact Email:	hpujol@rccl.com				
	If "Yes", write your s				
Premises to be licensed is:					
an existing facility	a new building	a propos	ed building		
The next two questions mu	st be completed by beverage dispensa	ry (including	; tourism) and <u>pa</u>	ickage store applic	ants only:
	the shortest pedestrian route from the				
	the nearest school grounds? Include to				
What is the distance of	the shortest pedestrian route from the	public entra	ance of the build	ing of your propos	ed premises to
the public entrance of the	ne nearest church building? Include the	unit of me	asurement in you	ır answer.	





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Alaska Alcoholic Beverage Control Board ALASKA

# Form AB-01: Transfer License Application

### Section 4 – Sole Proprietor Ownership Information

This section must be comple If more space is needed, plea The following information ma	ase attach a separate sheet	with the required informa		n 5.
This individual is an:	applicant affiliat	e		
Name:				
Address:				
City:		State:	ZIP:	
This individual is an:	applicant affiliat	e		
Name:				
Address:				
City:		State:	ZIP:	

### 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 following information must be completed 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, the following information must be completed for each member with an ownership interest of 10% or more, and for each manager.
- 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.

Entity Official:	Henry Pujol					
Title(s):	President	Phone:	305-539-6245	% Owned:		0
Address:	1050 Caribbean Way					
City:	Miami	State:	FL	ZIP:	33	132

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# Form AB-01: Transfer License Application

Entity Official:	Michael Goldne	er						
Title(s):	Manager		Phone	: 305-539-4	271	% Owr	ned:	0
Address:	1050 Caribbear	n Way						
City:	Miami		State:	FL		ZIP:	331	32
Entity Official:	Royal Caribbea	n Cruises I	Ltd.					
Title(s):			% Owned:		100			
Address:	1050 Caribbear	n Way						
City:	Miami		State:	FL		ZIP:	331	32
Entity Official:								
Title(s):			Phone	:		% Own	ned:	
Address:								
City:			State:			ZIP:		
his subsection must be complanding with the Alaska Divisionska.  DOC Entity #:	sion of Corporations (E		ration or register	ed agent who is an 04/27/2017	Home :	re require resident State:	of the	
his subsection must be complanding with the Alaska Divisionska.  DOC Entity #:  Registered Agent:	10057402 Brian Stibitz	AK Formed I	ration or register	ed agent who is an	individual	re require resident State:	of the	
his subsection must be complanding with the Alaska Divisionska.  DOC Entity #:  Registered Agent:  Agent's Mailing Address:	10057402 Brian Stibitz 500 L. St., Ste	AK Formed I	ration or register Date:	ed agent who is an 04/27/2017 Agent's Phone:	Home:	re require resident State:	FL 02	state (
nis subsection must be companding with the Alaska Divisions.  DOC Entity #:  Registered Agent:	10057402 Brian Stibitz	AK Formed I	ration or register Date:	ed agent who is an 04/27/2017	Home :	re require resident State:	of the	state (
his subsection must be complanding with the Alaska Divisionska.  DOC Entity #:  Registered Agent:  Agent's Mailing Address:	10057402 Brian Stibitz 500 L. St., Ste	AK Formed I	ration or register Date:	ed agent who is an 04/27/2017 Agent's Phone:	Home:	re require resident State:	FL 02	state (



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# Section 6 - Other Licenses Yes No Ownership and financial interest in other alcoholic beverage businesses: 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): Royal Caribbean Cruises Ltd., as owner of Applicant, holds an interest in the following Alaska common carrier (seasonal) liquor licenses: Radiance (5576), Quantum (6059), Ovation (5776), Brilliance (6131), Serenade (5920), Eclipse (5778), Millennium (5655), Solstice (5577), Muse (5626), Shadow (4960), Wind (6093), Whisper (6132). 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: Brian Stibitz, registered agent and Alaska counsel, 907-222-7102 Blythe Daly, Director, Senior Associate Counsel (RCCL), 305-747-4439 or liquor@rccl.com

DocuSign Envelope ID: D4E30292-3EBC-43C7-BAD4-9448222DD653



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# 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.

Huny Pujol	Notary Public State of Florida  Luz Maria Fewster
Signature of transferor	My Commission HH 395154 Expires 5/7/2027
Henry Pujol	
Printed name of transferor	Subscribed and sworn to before me this
	Notary Public in and for the State of Florical
	My commission expires:
Signature of transferor	
Printed name of transferor	Subscribed and sworn to before me this day of, 20
	Signature of Notary Pub
	Notary Public in and for the State of
	My commission expires:



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# 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.	HP
I certify that all proposed licensees have been listed with the Division of Corporations.	HP
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.	HP
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 304.465.	HP
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	HP
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.  Notary Public State of Flo Luz Maria Fewster My Commission HH 395	D
tenry Pyd	_1
Signature of Notary Public	
C) /	
Printed name  Notary Public in and for the State of     Condended   Condended	
My commission expires: 5 7 7	027
Subscribed and sworn to before me this day of	, 20 <u>24</u> .



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Alaska Alcoholic Beverage Control Board

# Form AB-02: Premises Diagram

### Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

### The diagram MUST include:

- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
  - o The red outline is required to follow a physical barrier (wall, fence and even across doorways).
  - There should be <u>no red lines within the perimeter</u>
- Each area should be clearly labeled in any color other than red where alcohol is:
  - o Stored
  - Served/Sold
  - o Manufactured
  - Consumed
- All diagrams must include:
  - o Dimensions (AMCO does not accept diagrams drawn to scale)
  - Cross streets
  - Points of reference, such as a compass rose indicating True North
  - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
  - o You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.
- Any license applications that include outdoor space are required to submit a security plan that includes information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

### **Section 1 - Establishment Information**

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

Licensee:	Royal Alaska Beverage Cruise Sales LLC License Number: 5626		
License Type:	Common Carrier Dispensary		
Doing Business As:	M/V Silver Muse		
Premises Address:	Alaskan Waters		
City:		State:	ZIP:

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# Form AB-02: Premises Diagram

# Section 2 - Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.

See attached.

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# SILVER MUSE – Deck Plans

