



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

Enter information for the *current* licensee and licensed establishment.

Licensee:	Laura's Liquor Shoppe, LLC	License #:	911
License Type:	Package Store	Statutory Reference:	04.09.230
Doing Business As:	Laura's Liquor Shoppe		
Premises Address:	608 First Street		
City:	Cordova	State:	Alaska
		ZIP:	99574
Local Governing Body:	Cordova City Council		

Transfer Type:

- Regular transfer
- Transfer with security interest
- Involuntary retransfer

OFFICE USE ONLY

Complete Date:		Transaction #:	100816303
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	

RECEIVED

JUL 01 2024



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:	Osborn, LLC				
Doing Business As:	Laura's				
Premises Address:	608 First Street				
City:	Cordova	State:	Alaska	ZIP:	99574
Community Council:	Cordova City Council				

Mailing Address:	PO Box 1793				
City:	Cordova	State:	Alaska	ZIP:	99574

Designated Licensee:	Osborn, LLC				
Contact Phone:	907-424-3144	Business Phone:	907-424-3144		
Contact Email:	lauras@laurascordova.com				

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 building

The 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.

800 feet

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.

500 feet

RECEIVED

JUL 0 1 2024



Alaska Alcoholic Beverage Control Board
Form AB-01: Transfer License Application

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:	

This individual is an: applicant affiliate

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:	Alexis Osborn				
Title(s):	Member	Phone:	907-227-1408	% Owned:	50
Address:	PO Box 93				
City:	Cordova	State:	Alaska	ZIP:	99574

RECEIVED
JUL 01 2024



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	William Osborn				
Title(s):	Member	Phone:	907-429-3144	% Owned:	50
Address:	PO Box 93				
City:	Cordova	State:	Alaska	ZIP:	99574

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

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) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10212003	AK Formed Date:	11/07/2022	Home State:	Alaska
Registered Agent:	K, H & G SERVICE COMPANY, INCORPORATED		Agent's Phone:	907-277-1604	
Agent's Mailing Address:	255 East Fireweed Lane, Suite 200				
City:	Anchorage	State:	Alaska	ZIP:	99503

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

RECEIVED
 JUL 01 2024



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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:

RECEIVED
JUL 01 2024



Alaska Alcoholic Beverage Control Board

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.

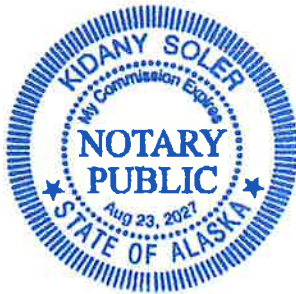
Mary Barrow Little

Signature of transferor

MBO ~~Mary Little~~ *Mary Barrow Little*

Printed name of transferor

Subscribed and sworn to before me this 15th day of September, 2023.



Kidany Soler

Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 08/23/2027

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: _____

RECEIVED
JUL 01 2024



Alaska Alcoholic Beverage Control Board
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.

WO

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

WO

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.

WO

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.

WO

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

WO

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.

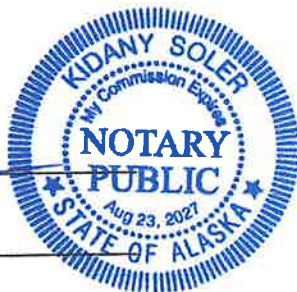
WO

William Osborn

Signature of transferee

William Osborn

Printed name



Kidany Soler

Signature of Notary Public

Notary Public in and for the State of

Alaska

My commission expires:

8/23/2027

Subscribed and sworn to before me this *15th* day of *September*, 20*23*.

RECEIVED

JUL 0 1 2024



Alaska Alcoholic Beverage Control Board 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.

WO

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

WO

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.

WO

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.

WO

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

WO

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.

WO

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.

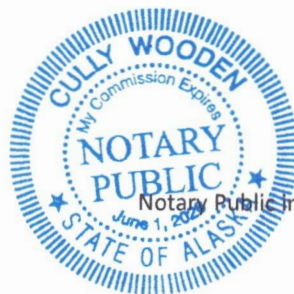
WO

WAS OSW

Signature of transferee

Alexis Osborn

Printed name



Cully Wooden

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 6/1/2024

Subscribed and sworn to before me this 9th day of January, 2024



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 liquor license applications, per AS 04.11.260 and 3 AAC 304.185. 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. 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.

The **second page of this form may not be required**. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete.

Yes No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.

Section 1 – Establishment Information

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

Licensee:	Osborn, LLC	License Number:	911		
License Type:	Package Store				
Doing Business As:	Laura's				
Premises Address:	6008 1st St				
City:	CORDOVA	State:	AK	ZIP:	99574



Alaska Alcoholic Beverage Control Board

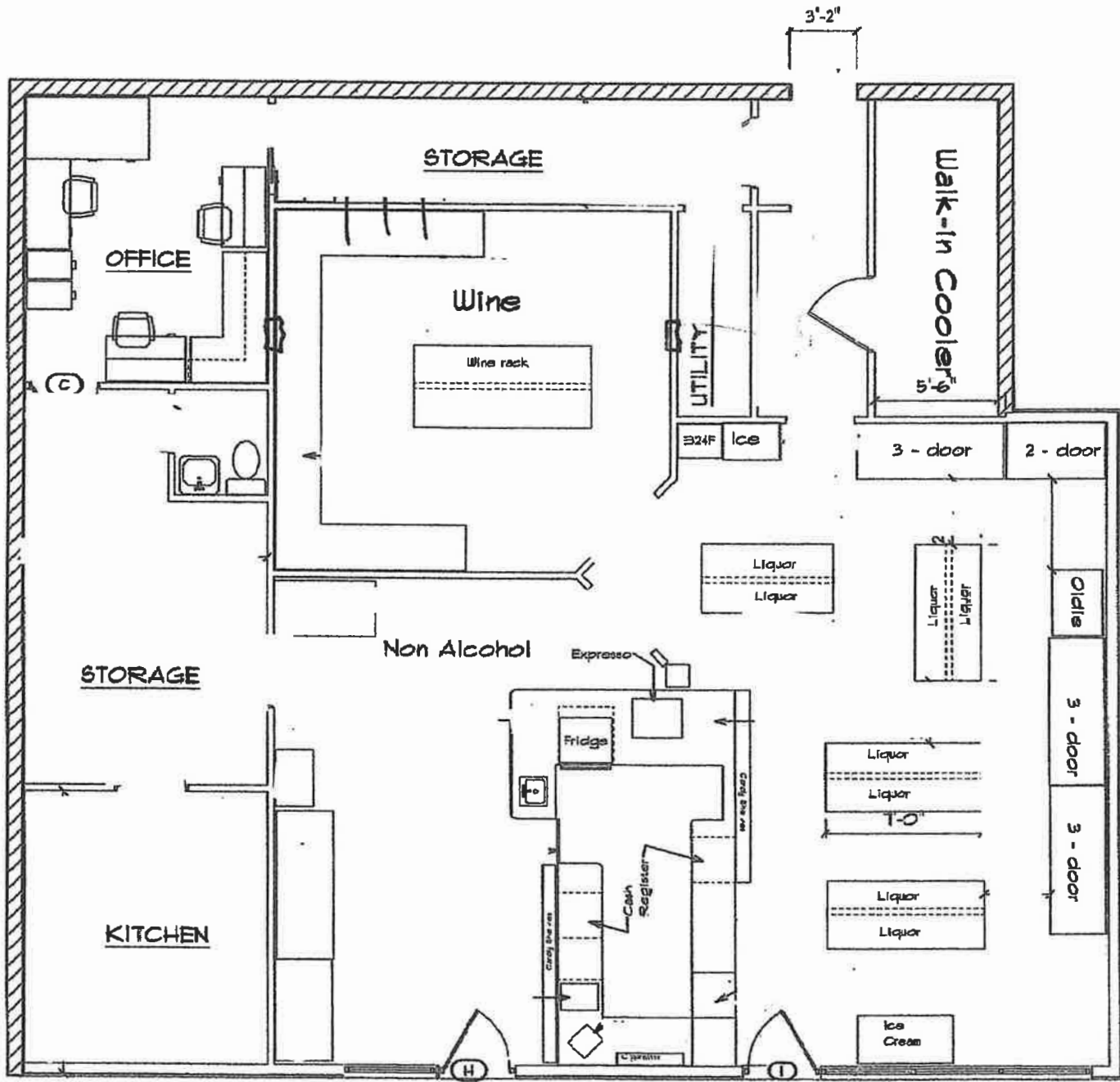
Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.

Attached diagram of currently licensed location
we are purchasing and will be operating out of.

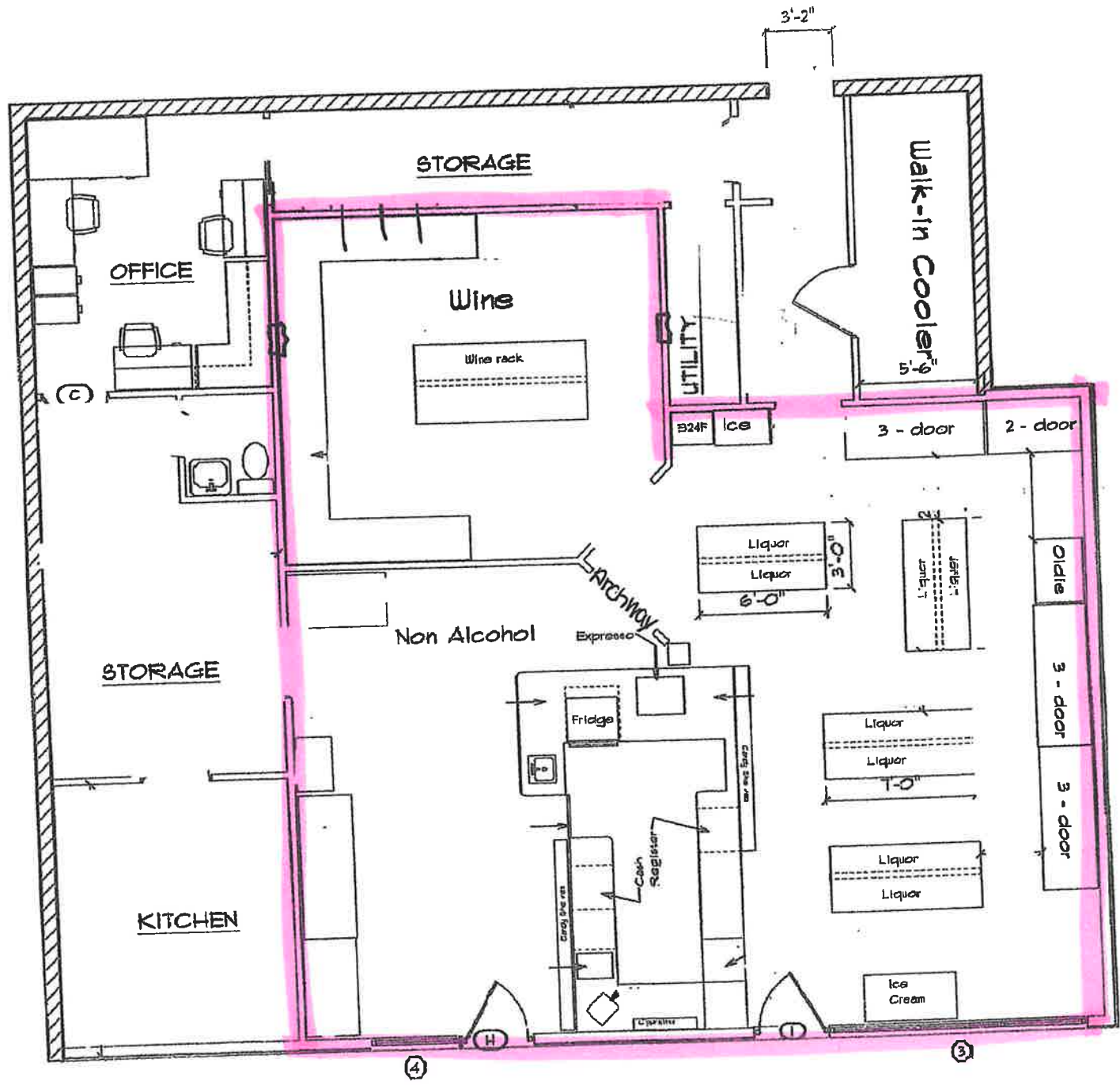
Working



Retail Finish Layout

RECEIVED
JUL 01 2024

looking



RECEIVED
JUL 01 2024

Retail Finish Layout

2:14

97

Search

Witch Kitchen

Alaskan Hotel

Cordova Center - Upper

Cordova Wireless Communications

Laura's

O K Restaurant

Mt. Eccles Elementary School

3 min

ADAMS AVE

47°
AQI 24

Cordova

Directions



Laura's

Mt. Eccles Elementary School

Walk

Avoid

3 min

800 ft · Gently uphill

GO

RECEIVED

JUL 0 1 2024

2:16

96

Cordova Wireless Communications

Laura's

O K Restaurant

SECOND ST

3 min

Mt Ele Sc

ADAM ST

The Net Loft

Cordova Community Baptist Church

47°
AQI 24

Directions

Laura's

Cordova Community Baptist Church

Walk

Avoid

3 min

500 ft · Mostly flat

GO

RECEIVED

JUL 01 2024