

Document reference ID: 4983

Licensing Application Summary

Transfer of Location

License ID: 1494

Application ID: 4983

Applicant Name: Thirty-Five Plus Singles Club, Inc.

License Type applied for: Club License (CL) (AS 04.09.220)

Application Status: In Review

Application Submitted On: 01/06/2025 03:03 PM

Entity Information

Business Structure: Non Profit

FEIN/SSN Number: 920071828

Alaska Entity Number (CBPL): 17133D

Entity Contact Information

Entity Address: 407 Denali Street, Anchorage, AK, 99502, USA

Initial Application Information

Authority Type: I am authorized user by the designated licensee with

binding authority

Legal First Name: Pamela

Legal Last Name: O'Brien

Email Address: mobkr502@gmail.com

Phone Number: 907-350-7575

Registered Agent Information

Name Pamela O'Brien

Agent's Phone Number 907-350-7575

Agent's Email mubkr502@gmail.com

Address 10290 Arborvitae Dr, Anchorage, AK, 99507,

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
Thirty-Five Plus Singles Club, Inc.	Kim Matherne	Vice President	
Thirty-Five Plus Singles Club, Inc.	Pamela O'Brien	President	
Thirty-Five Plus Singles Club, Inc.	Susan Lindquist	Secretary	

Premises Address

Address: 549 W International Airport Rd, B 8 and 10, Anchorage, AK,

99518-1182, USA

Does the proposed site include a

valid street address?

Yes

Basic Business information

Business/Trade Name: Anchorage Social Dance Club, Inc.

Premises Contact Details

Contact Person Name Pamela Lynn O'Brien

Business Phone Number 907-350-7575

Email Address mobkr502@gmail.com

Local Government and Community Council Details

City/Municipality Anchorage (Municipality of)

Borough None

Community Council Name Sand Lake

Property Ownership

Do you, the applicant, own the land, building, No

and/or warehouse at this proposed licensed

location?

Property Utilization Status An Existing Facility

Are you operating under?

Lease

Add Copy of Lease\Sublease document Lease.pdf

Premises Diagram

Will the license or permit embrace the entire Yes premises address?

Premises Diagram

• 1494 AB-02 Premises Diagram.pdf

Public Notice Posting Attestation and Publishers Affidavit

Have you posted your application at both required locations for ten consecutive days?

What was the other conspicuous location of your post? (Please Include the full address)

Fred Meyer 2000 W. Dimond, Anchorage AK

What was the first day you posted your application?

07/27/2024

Yes

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.

I certify that in accordance with AS 04.09.220(c) the club, fraternal organization, patriotic organization, or social organization listed as the licensee in this application has been chartered by a state or national organization for a period of 10 consecutive years before the application for a license, or has been chartered by a national organization that has maintained a chartered club or organization in the state for a period of at least 20 years.

Signature

Electronic Signature not collected; application submitted based on paper form.

Payment Info

Payment Type : Check

Check Number: 100833689

Payment Date: 8/16/2024 12:00:00 AM

Documents

#	File Name	Туре	Added On
1	Lease.pdf	License Lease\Sublease document	01/06/2025 02:49 PM
2	1494 AB-02 Premises Diagram.pdf	License Location Diagram Document	01/06/2025 02:50 PM
3	1494 AB-11.pdf	Misc. documents to support the transfer application	01/06/2025 02:51 PM
4	1494 Publishers Affidavit.pdf	Publishers Affidavit	01/06/2025 03:02 PM
5	1494 AB-01.pdf	License Paper Form Application Document	01/06/2025 03:02 PM

6



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

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.

Licensee:	Thirty-Five Plus Sing	les Club, Inc	License #: /4	194	1444
License Type:	Club		Statutory Referen	nce:	04.09.22
Doing Business As:	Anchorage Social Dar	nce Club, I	nc		
Premises Address:	407 Denali.	Street		4	
City:	Anchorage	State:	AK	ZIP:	99502
Local Governing Body/Bodies:	Municipality .	of Ano	horage		
ansfer Type:					
Regular transfer					
Transfer with securi	ty interest				
Involuntary retrans	fer				
Controlling interest	transfer				
Location transfer			RE	GEIVE	ס
			6.1.	3 F 3 W	
			ч соны у	MEG 4LASKA	OFFICE
				C	
	OFF	CE LISE ONLY			
	UFFI	CE USE ONLY		1	

License Years:

Examiner:

Board Meeting Date:

Issue Date:



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

Enter information for the new	Section 2 - Trans v applicant and/or location seeking to b		ormation	1000		
Licensee:	Thirty-Five Plus Sin		1 Tac			
Doing Business As:	Anchorage Social:			5301		
Premises Address:	549 W) Toternation	al Ro	HB81	1,0		
City:	549 W Internation Anchorage	State:	AK		ZIP:	99518
Community Council, (If applicable):	Sand Lake					
Mailing Address:	3705 Arctic Blud	#695				
City:	Anchorage	State:	Alasha		ZIP:	99503
Email:	Anchorage mobkr502@ gmail.com	Phone:	907-350-		-	
Designated Licensee:				_		
Contact Phone:	Pamela Lynn O'Br 907-350-7575	Business I	Phone:	907-3	350 - 7	575
Contact Email:	mobkr502@gm			l.		
Seasonal License?	No If "Yes", write your s Section 3 – Prem			l:		CENVED
Premises to be licensed is:					-	CITA
an existing facility	a new building	a proposed	d building			
The next two questions must	be completed by beverage dispensary	— Į (including to	ourism) and pac		(17)	RBUARA COLTROL OFFIC ALASKA Es only
	e shortest pedestrian route from the he nearest school grounds? Include t				-	-
	e shortest pedestrian route from the e nearest church building? Include the				-	-
			•			
1				263		



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

This section must be completed for more space is needed, please the following information must	attach a separate sheet	with the required info	rmation.	0 11 3	A GUNTROL OFFICE ALASKA
his individual is an: app	icant affiliate	!	1		
Name:					
Address:			v		
City:		State:		ZIP:	
Email:		Phone:	4	ia	
his individual is an: app	icant affiliate				
Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			
this section must be completed eartnership, that is applying for more space is needed, please of the applicant is a corporate must be completed below for president, vice-president, so the applicant is a limited limited information must be completed belowed information must be completed information must be	r a license. Sole proprieto attach a separate sheet wation, the application shall for each stockholder who ecretary, and managing of iability organization, whe eted for each member with are. ship, including a limited paranore, and for each general	ors should skip to Sectivith the required informable executed by an authowns 10% or more of the ficer. Ither manager managed the an ownership interestip, the following partner.	on 6. nation. horized officer of the C the stock in the corpora d or member managed est of 10% or more and	corporation. In ation, and for I, the following I for each <i>ma</i>	nformation each g nager
Entity Official:	Panela Lyn.	n O'Brien			
	President - Bo		907-350-7575	% Own	ed: NA
0 dalara es	0290 Arborvit			1	
City:	1 /	State:	AK	ZIP:	99507

Phone:

907-350-7575

Email:



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

Entity Official:	Vicy-Prasi	ogatalo	Kim	T. Matl	nerne			
	Vice-President		Phone:		-4569	% Owr	ned:	NA
Address:	200 W 34	th Ave	#503					
City:	Anchorage		State:	AK		ZIP:	995	03
Email:	Ktmatherne	57250	Phone:	907-22	3-456	9		
		5m	ril.com					
Entity Official:	Susan Li	ndquist	-					
Title(s):	Secretari		Phone:	907-33	0-756	z % Owr	ned:	NA
Address:	11947 R	ain bow	Ave	NI CO				
City:	Anchorage Susan lindquist		State:	AK		ZIP:	995	16
Email:	susan lindquist	r ll@gmail.	Phone:	907-330.	-7563	•		
Entity Official:								
Title(s):			Phone:			% Owr	ned:	
Address:					د -			
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 #:	17133D	AK Formed	Date:	6/27/1977	Home	State:	Ala	isha
Registered Agent:	Pa mela 1			Agent's Phone:	907-	350-	1575	
Agent's Mailing Address:	1	borvitae						
City:	Anchorage	State: 🛕	K		ZIP:99	507		
Email:	moblesoz e	es gmail.c	ow	Phone: 907 -			<u> </u>	
Residency of Agent: Alas				RECE	VED		Yes	No
Does your registered ag	₽.	ment of AS 04.	11.430?	ALCOHOL MARIJUANA STATE OF A		FICE	X	



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

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 Ala license number(s) and license type(s):	ska, whic	:h
**		
Section 7 – Authorization		I II
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?		\times
If "Yes", disclose the name of the individual and the reason for this authorization:		1
6		
		1





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

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. Printed name of transferor Subscribed and sworn to before me this 6th day of Augus STATE OF ALASKA NOTARY PUBLIC Aloisa Myra Tomas My Commission Expires Sep 15, 2027 Notary Public in and for the State of ___ My commission expires: $\underline{09.15} \cdot 2027$ Signature of transferor Printed name of transferor Subscribed and sworn to before me this day of ___ Signature of Notary Public



Notary Public in and for the State of ______.

My commission expires: ______.



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

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.



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



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 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 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 of transferee

Printed name

Notary Public in and for the State of Alaska

My commission expires: 09.15 · 2027

STATE OF ALASKA NOTARY PUBLIC

Subscribed and sworn to before me this 6th day of August

Aloisa Myra Tomas My Commission Expires Sep 15, 2027



alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

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:
 - Stored
 - Served/Sold
 - Manufactured
 - Consumed
- All diagrams must include:
 - 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:	Thirty-Five Plus Singles Club, Inc.	License I	Number:	14	94
License Type:	Club				
Doing Business As:	Anchorage Social Dance	Club,	Inc		
Premises Address:	549 W International Rd #,	, ,			A
City:	Anchorage ARPW	State:	AK	ZIP:	99518

ALCOHOL MARICUANA CONTROL OFFICE

alcohol.licensing@alaska.gov

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

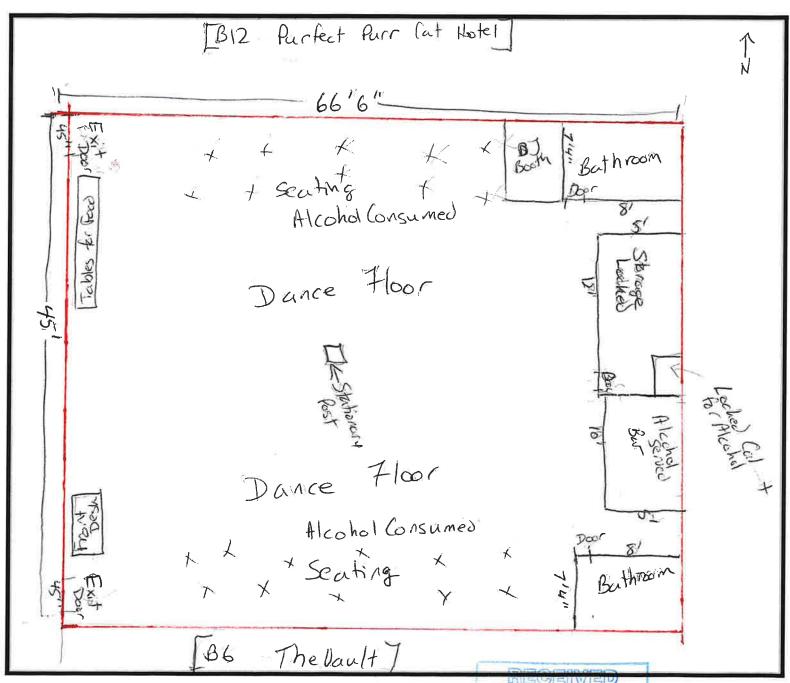
Phone: 907.269.0350

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. See above for detailed instructions.



1

+)FFICE
	100	KA KA
	scr	A COM
TO THE PROPERTY OF THE PROPERT		MA LUCE
TOTAL STATE OF	orașe e a a	HOLIV SHOLIV
		ALCOH

Alaska Aquatis K9.	
Fat Bike AK	
1	
AAK BUTINESS En ovran ments 63	
Ware house	HMEY
Store	
(A1) Giadihn Phoand Vietnamese Cuisine	
	Fat Bille Ak: BILL FOR BILLIANS Enouronments BISTORE Store

Dar King

Arctic

549 W. International Rd