



Document reference ID : 4985

Licensing Application Summary

Transfer of Controlling Interest

License ID:	4346
Application ID:	4985
Applicant Name:	Bernie's Bar Llc
License Type applied for:	Beverage Dispensary License(BDL) (AS 04.09.200)
Application Status:	In Review
Application Submitted On:	01/06/2025 03:57 PM

Entity Information

Business Structure:	Limited liability company
FEIN/SSN Number:	882941535
Alaska Entity Number (CBPL):	10199114

Entity Contact Information

Entity Address:	P.O. Box 1529, Kodiak, AK, 99615, USA
------------------------	---------------------------------------

Initial Application Information

Authority Type:	I am authorized user by the designated licensee with binding authority
Legal First Name:	Anabel
Legal Last Name:	Ballao

Email Address: aballao@yahoo.com

Phone Number: 907-654-4202

Additional Authorized Users

Legal Name	Relation with Applicant
Kiana Isabel Ballao	Family Member

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Bernie's Bar Llc	Anabel A Ballao	Member	100

Premises Address

Address: 320 Center Street, Kodiak, AK, 99615, USA

Does the proposed site include a valid street address? Yes

Basic Business information

Business/Trade Name: Bernie's Bar

Local Government and Community Council Details

City/Municipality Kodiak (City of)

Borough Kodiak Island Borough

Property Ownership

Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed location?	No
Property Utilization Status	An Existing Facility
Are you operating under?	Lease
Add Copy of Lease\Sublease document	4346 Lease Agreement.pdf

Premises Diagram

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

Premises Diagram

- [4346 AB-02 Premises Diagram.pdf](#)

Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

I hereby certify that any ownership change shall be reported to the board as required under AS 04.11.040, AS 04.11.045, AS 04.11.050, and AS 04.11.055.

Public Notice Posting Attestation and Publishers Affidavit

Have you posted your application at both required locations for ten consecutive days?	Yes
What was the other conspicuous location of your post? (Please Include the full address)	City Hall, #710 Mill Bay Road, Kodiak Alaska
What was the first day you posted your application?	08/05/2024

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.

Signature

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

Payment Info

Payment Type : Check

Check Number: 100837416

Payment Date: 9/5/2024 12:00:00 AM

Documents

#	File Name	Type	Added On
1	4346 Lease Agreement.pdf	License Lease\Sublease document	01/06/2025 03:49 PM
2	4346 AB-02 Premises Diagram.pdf	License Location Diagram Document	01/06/2025 03:49 PM
3	4346 AB-09.pdf	Signed Creditors Affidavit	01/06/2025 03:51 PM
4	Bernies Bar personal representative will_Redacted.pdf	Misc. documents to support the transfer application	01/06/2025 03:51 PM
5	4346 Publishers Affidavit.pdf	Publishers Affidavit	01/06/2025 03:56 PM
6	4346 AB-01.pdf	License Paper Form Application Document	01/06/2025 03:56 PM
7	Transferee and Transferor Certifications Form-4985.pdf	Transferee and Transferor Certifications Form	01/06/2025 03:56 PM



Alcoholic Beverage Control Office

Public Notice

Application for Transfer of Controlling Interest

Application ID: 4985
License Type: Beverage Dispensary License(BDL) AS
04.09.200
License Number: 4346
Seasonal: Year around

From Transferor:

Doing Business As: Bernie's Bar LLC
Premises Address: 320 Center Street, Kodiak, AK, 99615,
USA
City/Municipality: Kodiak (City of)
Borough: Kodiak Island Borough

Licensee

Licensee Name: Bernie's Bar Llc
Type: Limited liability company
Licensee Mailing Address: P.O. Box 1529, Kodiak, AK, 99615, USA

Entity Officer, Stockholder/Shareholder

Entity Member #1

Type: Person
Name: Bernie V Ballao
Title: Member
Percentage of Ownership: 50%

Entity Member #2

Type: Person
Name: Anabel A Ballao
Title: Member
Percentage of Ownership: 50%

To Transferee:

Doing Business As: Bernie's Bar

Licensee

Licensee Name: Bernie's Bar Llc

Type: Limited liability company

Licensee Mailing Address: P.O. Box 1529, Kodiak, AK, 99615, USA

Entity Officer, Stockholder/Shareholder

Entity Member #1

Type: Person

Name: Anabel A Ballao

Title: Member

Percentage of Ownership: 100%

Interested persons may object to the application by submitting a written statement of reasons for the objection to their local government, the applicant, and the Alcohol & Marijuana Control Office (AMCO). Written comments should be sent to AMCO at alcohol.licensing@alaska.gov or to 550 W 7th Ave. Suite 1600, Anchorage, AK 99501.

Posting Date:



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.

Section 1 – Transferor Information

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

Licensee:	Bernie's Bar LLC	License #:	4346		
License Type:	Beverage Dispensary	Statutory Reference:	AS 04.09.200		
Doing Business As:	Bernie's Bar LLC				
Premises Address:	#320 Center Street				
City:	Kodiak	State:	Alaska	ZIP:	99615
Local Governing Body/Bodies:	City of Kodiak				

Transfer Type:

- Regular transfer
- Transfer with security interest
- Involuntary retransfer
- Controlling interest transfer
- Location transfer

OFFICE USE ONLY

Complete Date:		Transaction #:	100837416
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	



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:	Bernie's Bar LLC				
Doing Business As:	Bernie's Bar LLC				
Premises Address:	#320 Center Street				
City:	Kodiak	State:	Alaska	ZIP:	99615
Community Council, (If applicable):	Charles Davidson, Terry J Haines, Bob Stanford, Richard Walker, John Whiddon, Anita Woods				N/A
Mailing Address:	PO Box 1529				
City:	Kodiak	State:	Alaska	ZIP:	99615
Email:	bernies_lounge@yahoo.com aballao@yahoo.com	Phone:	907-654-4202		
Designated Licensee:	Anabel A Ballao				
Contact Phone:	907-654-4202	Business Phone:	907-654-4202		
Contact Email:	aballao@yahoo.com, bernies_lounge@yahoo.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 (Must be in feet).

Kodiak High School (3/4 mile) 3168 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 (Must be in feet.)

Russian Orthodox (1/4 mile) 1320 feet



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:	
Email:		Phone:			

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

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 application shall be executed by an authorized officer of the Corporation. Information must be completed below 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, whether manager managed or member managed, the following information must be completed for each *member with an ownership interest of 10% or more* and for each *manager regardless of ownership share*.
- 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*.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	Anabel A Ballao				
Title(s):	Owner/Member	Phone:	907-654-4202	% Owned:	100%
Address:	#320 Center Street				
City:	Kodiak	State:	Alaska	ZIP:	99615
Email:	aballao@yahoo.com bernies_lounge@yahoo.com	Phone:	907-654-4202		



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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

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

Entity Official:				
Title(s):	Phone:	% Owned:		
Address:				
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 #:	10199114	AK Formed Date:	06/22/2022	Home State:	Alaska
Registered Agent:	Anabel A Ballao		Agent's Phone:	907-654-4202	
Agent's Mailing Address:	PO Box 1529				
City:	Kodiak	State:	AK	ZIP:	99615
Email:	aballao@yahoo.com bernies_lounge@yahoo.com		Phone:	907-654-4202	

Residency of Agent:

Yes No

Does your registered agent satisfy the requirement of AS 04.11.430?



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:

Kiana Isabel Ballao. She is my adult child that I am giving my authority to communicate with AMCO staff if I cannot or is not available to discuss due to a certain factor like illness or other valid reason.



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.

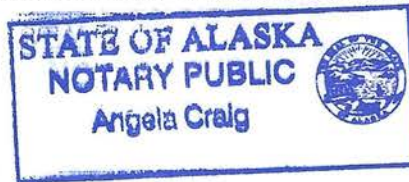
I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Anabel A Ballao
Signature of transferor

Anabel A Ballao

Printed name of transferor

Subscribed and sworn to before me this 5 day of August, 2024.



Angela Craig
Signature of Notary Public

Notary Public in and for the State of Alaska.

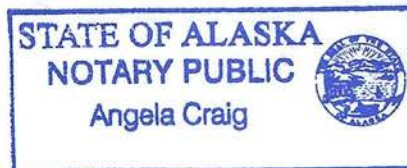
My commission expires: March 23, 2025

Anabel A Ballao
Signature of transferor

Anabel A Ballao

Printed name of transferor

Subscribed and sworn to before me this 5 day of August, 2024.



Angela Craig
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: March 23, 2025



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.

[Handwritten initials]

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

[Handwritten initials]

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.

[Handwritten initials]

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.

[Handwritten initials]

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

[Handwritten 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 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.

[Handwritten initials]

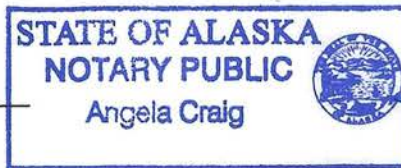
I certify that I and any individual identified in the business entity ownership section of this application, has, or will read AS 04 and its implementing regulations.

[Handwritten initials]

[Handwritten signature]

Signature of transferee
Anabel A Ballao

Printed name



[Handwritten signature]

Signature of Notary Public
Notary Public in and for the State of Alaska

My commission expires: March 23, 2025

Subscribed and sworn to before me this 5 day of August, 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 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.
 - The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - There should be no red lines within the perimeter
- 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.
 - 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:	Bernie's Bar LLC	License Number:	4346	
License Type:	Beverage Dispensary			
Doing Business As:	Bernie's Bar LLC			
Premises Address:	#320 Center Street			
City:	Kodiak	State:	AK	ZIP: 99615



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

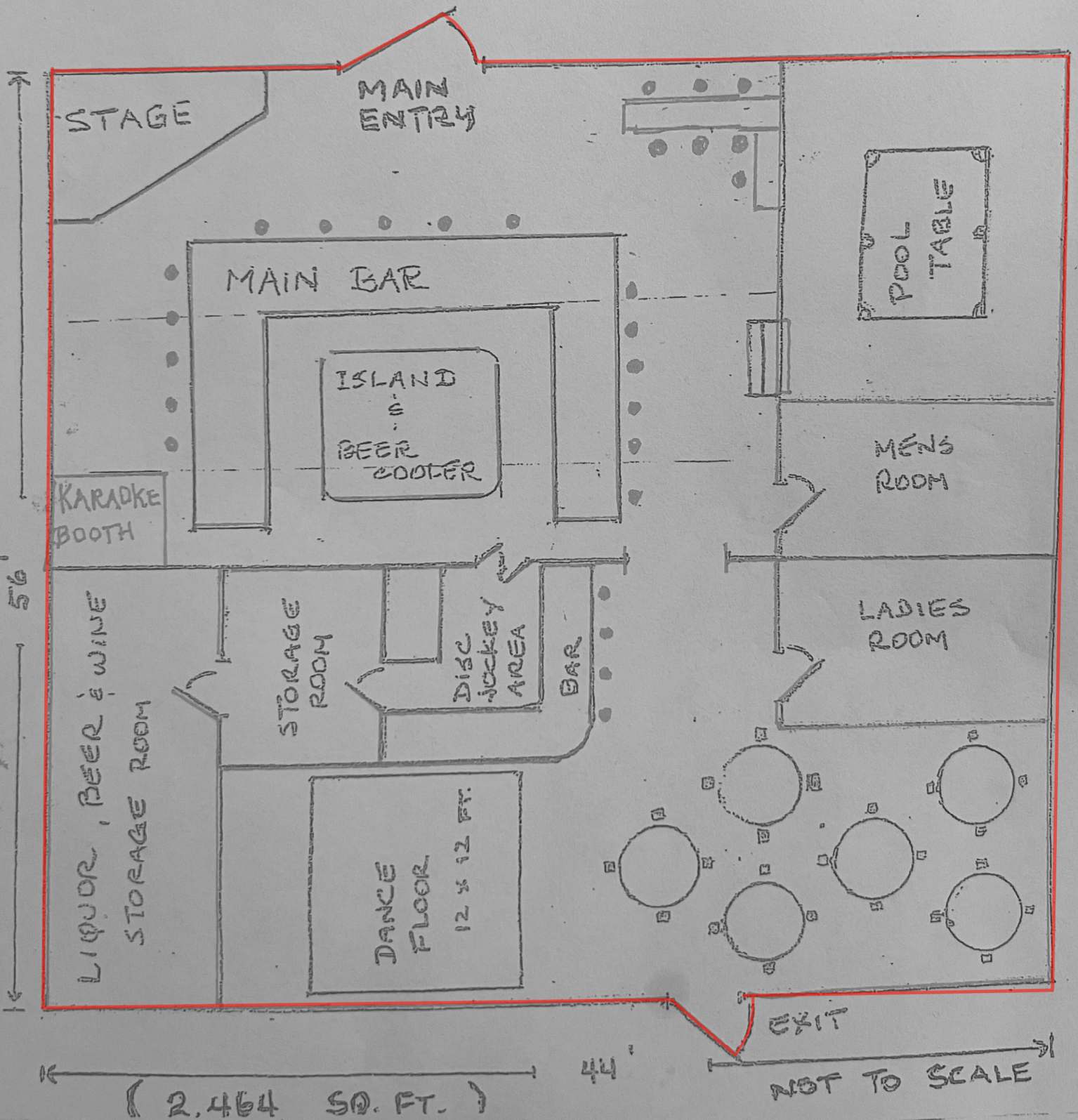
Alaska Alcoholic Beverage Control Board
Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

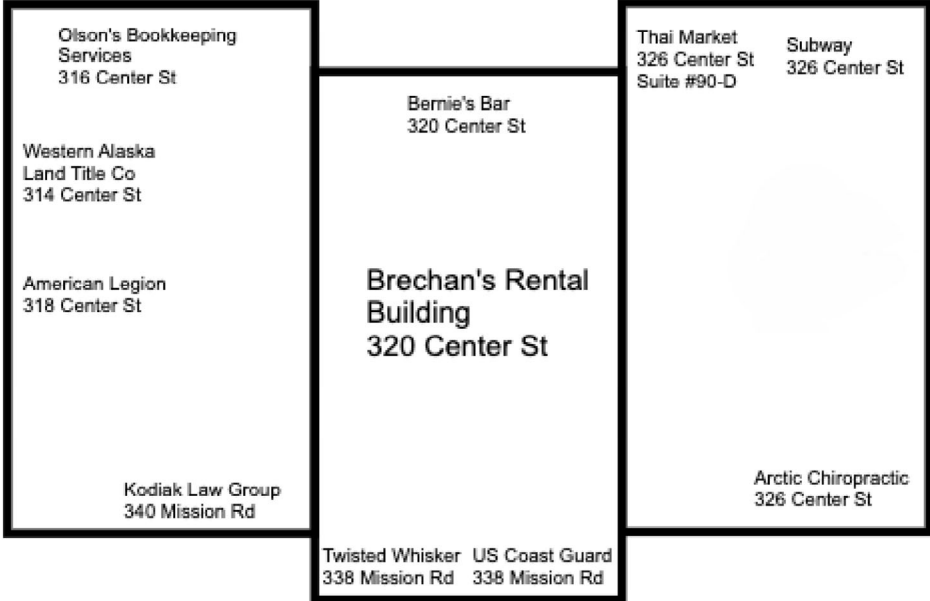
Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.

Pls. see attached

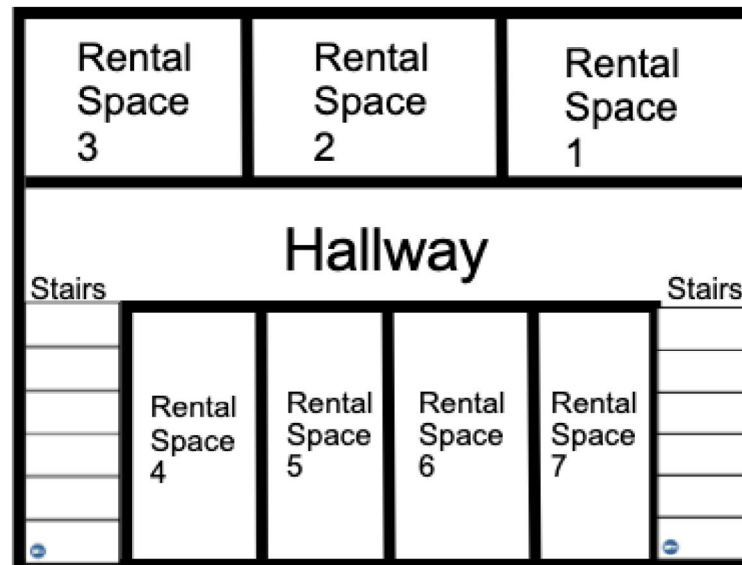
BERNIE'S BAR LLC
320 CENTER ST.
KODIAK, AK. 99615



Aerial View



Second Floor



Last Will and Testament

OF

BERNIE V. BALLAO

KNOW ALL MEN BY THESE PRESENTS:

That I, BERNIE V. BALLAO, born [REDACTED], residing at Kodiak, Alaska, being of sound mind and not acting under restraint, menace, fraud, or undue influence, publish and declare this instrument as my Last Will and Testament, and revoke all prior wills and codicils.

ARTICLE V.
Appointment of Fiduciaries

1. Appointment of Personal Representative. I hereby nominate and appoint my spouse, ANABEL ALCASID BALLAO, as Personal Representative of this Will. If Anabel does not survive me, or fails to qualify or refuses or ceases to act, I nominate and appoint my daughter, KIANA ANABEL A. BALLAO. My Personal Representative may receive such compensation for services as is provided by law.

2. Bond and/or Surety. My Personal Representative shall not be required to furnish bond or sureties.

3. Powers of Personal Representative. My Personal Representative shall have power to probate, manage, and settle my estate without the intervention or approval of any court or courts, except to the extent required by law. I further direct that my Personal Representative shall have the power to sell, transfer, and dispose of my property, real or personal, without order of court, without notice, and without reporting to the court such acts, and that confirmation of such deeds and acts by the probate court shall be unnecessary. Except as otherwise provided herein, and unless a contrary intent is manifest, my Personal Representative shall have all the powers, rights, and duties as otherwise provided by law.

My Personal Representative shall be entitled to take advantage of any election as to the computation or determination of any taxes, including an election to file joint returns, and shall have sole and absolute discretion in exercising or refusing to exercise any such election. It is my

