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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.

Licensee:	Hanny Vallay Par & Cofe In	License #:			4684	
Literisee.	Happy Valley Bar & Cafe, In	C.	License #:			1
License Type:	Package Store		Statutory R	eference:		04.09.23
Doing Business As:	Happy Valley Bar & Cafe					
Premises Address:	24175 Sterling Highway					
City:	Ninilchik	State:	Alaska		ZIP:	99639
Local Governing Body:	Kenai Peninsula Borough					
Regular transfer	ty interest					
Regular transfer Transfer with securi Involuntary retransf						
Regular transfer Transfer with securi Involuntary retransf	Fer		saction#:	1008	11649	13
Transfer with securi	Fer	Trans	saction #: nse Years:	1008	31649	13



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	ew applicant and/or location seeking to	be licensed.	-			
Licensee:	NEW SKULL RANCH LLC					
Doing Business As:	Happy Valley Store					
Premises Address:	24185 Sterling Highway (No	change i	n location -	correcting	addre	ss)
City:	Ninilchik	State:	Alaska		ZIP:	99639
Community Council:	N/A					
Mailing Address:	PO Box 39448					
City:	Ninilchik	State:	Alaska		ZIP:	99639
Designated Licensee:	Lucas Stuart					
Contact Phone:	907-398-2675	Business	Phone:	907-398	3-2675	
Yes	1 (EZ)		pperating peri	od:		
Yes	No	ix-month c				
Yes asonal License?	No If "Yes", write your si	ix-month c				
Yes asonal License?	No If "Yes", write your si	ix-month c				
Yes asonal License? emises to be licensed is: an existing facility	No If "Yes", write your single Section 3 − Prem	ix-month o	formation			ants only:
Yes asonal License? emises to be licensed is: an existing facility e next two questions mu What is the distance of	If "Yes", write your single Section 3 – Prem	ix-month o	formation sed building g tourism) and pance of the buil	package store	propose	
emises to be licensed is: an existing facility e next two questions mu What is the distance of the outer boundaries of	Section 3 – Prem a new building st be completed by beverage dispensar	ix-month o	formation sed building g tourism) and pance of the buil	package store	propose	
emises to be licensed is: an existing facility e next two questions mu What is the distance of the outer boundaries of Ninilchik School - What is the distance of the outer boundaries of the oute	Section 3 – Prem a new building st be completed by beverage dispensar the shortest pedestrian route from the the nearest school grounds? Include the	ix-month of ises Info	formation sed building stourism) and pance of the building	package store ding of your p your answer.	propose	d premises to



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S	ection 4 – Sole Proprie	tor Owner	ship Information	
If more space is needed, pleat The following information mo	sted by any sole proprietor who is ap ase attach a separate sheet with the ust be completed for each licensee ar applicant affiliate	required inform	nation.	Section 5.
Name:				
Address:				
City:		State:		ZIP:
This individual is an: a	pplicant affiliate			
Address:				
City:		State:		ZIP:
partnership, that is applying If more space is needed, plea	Section 5 – Entity O ted by any entity, including a corpor for a license. Sole proprietors should use attach a separate sheet with the pration, the following information mu	ation, limited lia d skip to Section required inform	ability company (LLC), part 1 6. nation.	

- 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:	Lucas Stuart					
Title(s):	Member	Phone:	907-398-2675	% Ow	ned:	50
Address:	835 Set Net Drive			- 1974		
City:	Ninilchik	State:	Alaska	ZIP:	996	39



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Form AB-01: Transfer License Application

Entity Official:									
Entry Official.	Jodi Stuart								
Title(s):	Member		Phon	e:	907-398-26	75	% Ow	ned:	50
Address:	835 Set Net Drive	Э							
City:	Ninilchik		State	:	Alaska		ZIP:	9963	39
Entity Official:				Ť					
Title(s):			Phone	e:			% Ow	ned:	
Address:									
City:			State	:			ZIP:		
Entity Official:									
Title(s):			Phone	e:			% Ow	ned:	
Address:									
City:			State	:			ZIP:		
nis subsection must be com anding with the Alaska Divi aska.			oration o a registe	or LLC.			re requir resident		state
is subsection must be com anding with the Alaska Divi aska. DOC Entity #:	sion of Corporations (I	DOC) and have	oration o a registe	or LLC. ered a	gent who is an i	individual	re requir resident State:	of the Alasi	state
nis subsection must be com anding with the Alaska Divi aska. DOC Entity #: Registered Agent:	10270164 Lucas Stuart	AK Formed	oration o a registe	or LLC. ered a	13.2024	Home	re requir resident State:	of the Alasi	state
City: his subsection must be companding with the Alaska Dividaska. DOC Entity #: Registered Agent: Agent's Mailing Address: City:	10270164 Lucas Stuart	AK Formed	oration o a registe Date:	or LLC. ered a	3.2024 ent's Phone:	Home	re requir resident State:	of the Alasi	(a

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 - Other Licenses		
nership 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?	√	
f "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in A icense number(s) and license type(s):	laska, whi	ich
Lucas Stuart 496 Happy Valley Bar & Cafe -BD - Seasonal Jodi Stuart 496 Happy Valley Bar & Cafe -BD - Seasonal		
Ocation 7 Authorization		
Section 7 – Authorization	Yes	N
	Yes	N
Does any person other than a licensee named in this application have authority to discuss this license with	Yes	N [



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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 unders	igned represents a controlling in	terest of the current license	ee. I additionally certify
that I, as the current licensee (either the sole propapplication, approve of the transfer of this license	prietor or the controlling interest , and find the information on this	of the currently licensed er s application to be true, cor	ntity) have examined this rect, and complete.
Signature of transferor			
Lucas Stuart - Personal Representative of Catherine Fox			
Printed name of transferor Subscribe	d and sworn to before me this	1_day of JUVE	
		AR S	Signature of Notary Public
	Notary Public in	and for the State of AU	ska
		My commission expires	Controlla
Signature of transferor LUCAS A STUART			OTHER OF MAIN
Printed name of transferor	d and sworn to before me this	1_day of JUVL	2024
		de S	Signature of Notary Public
	STONE Wotany Public in	and for the State of	aska 107-26
	Property Co.		
[Form AB-01] (rev 2/24/2022)	Contraction of		Page 6 of 7
	14/11/11/11		HEALERVILL





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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 license	ees (as defined in AS 04.11.260) and affiliates have been listed on this application.	W.
I certify that all proposed license	ees have been listed with the Division of Corporations.	
	providing a false statement on this form or any other form provided by AMCO is ground plication or revocation of any license issued.	ds /
patron will complete an approve serving alcoholic beverages, will	s, and employees who sell or serve alcoholic beverages or check the identification of a ed alcohol server education course, if required by AS 04.21.025, and, while selling or I carry or have available to show a current course card or a photocopy of the card ed alcohol server education course, if required by 3 AAC 304.465.	
l agree to provide all information	n required by the Alcoholic Beverage Control Board in support of this application.	
application, and I know the full of other documents submitted are response in this application, or a denying or revoking a license/pe	rson herein named and subscribing to this application and that I have read the complet content thereof. I declare that all of the information contained herein, and evidence or true and correct. I understand that any falsification or misrepresentation of any item any attachment, or documents to support this application, is sufficient grounds for ermit. I further understand that it is a Class A misdemeanor under Alaska Statute on and commit the crime of unsworn falsification.	
Signature of transferee	Signature of Notary Public Notary Public in and for the State of Alaska	~
Printed name	My commission expires: 27- Subscribed and swiom to before me this 17 day of 1000	26 2024.
[Form AB-01] (rev 2/24/2022)	RECH	Page 7 of 7
	JUL 0	9 2024



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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.	42
I certify that all proposed licensees have been listed with the Division of Corporations.	8
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.	18
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.	B
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	8
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.	B
Signature of transferee Jodi Stuart Printed name My commission expires: 6-1-26 Subscribed and sworn to before me this 1 day of JUNE	, 2024.

[Form AB-01] (rev 2/24/2022)

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JUL 0 9 2024

In the Matter of the Estate
of
CATHERINE PERRY FOX,
Deceased.

Case No. 3KN-24-0022 PR

LETTERS TESTAMENTARY BY THE COURT

The Last Will and Testament of CATHERINE PERRY FOX having been admitted to informal probate, LUCAS A. STUART is hereby informally appointed Personal Representative of the ESTATE OF CATHERINE PERRY FOX, to serve without bond. Until termination of appointment, the Personal Representative has the same power over the title to property of the estate that an absolute owner would have, in trust however, for the benefit of the creditors and others interested in the estate. This power may be exercised without notice, hearing, or order of court.

The Personal Representative or Attorney for the Estate is authorized to receive medical, financial, including but not limited to, bank statements from financial institution, credit unions or investment account, information from the Social Administration, State of Alaska, including protected information, records from secondary sources, and any other information pertinent to the probating of the Estate of CATHERINE PERRY FOX. All document requests shall be released within seven (7) days of the request by the Personal Representative or Attorney for the Estate. If you do not produce the requested records, you may be requested to appear at a hearing to explain why you did not release the information necessary to probate the Estate.

Dolifka & Mery Attorneys at Law P. O. Box 498 Soldotna, Alaska 99669 907 262 2910

LETTERS TESTAMENTARY BY THE COURT ESTATE OF CATHERINE PERRY FOX Page 1 of 2

2024.

DATED at Kenai, Alaska, this 10 day of Many

PROBATE MASTER/REGISTRAR

I certify that a copy of the foregoing was ____mailed

placed in court box to 300 Men

scanned to Mery

Clerk

Dale

Dolifka & Mery Attorneys at Law P. O. Box 498 Soldotna, Alaska 99669 907 262 2910

STATEMENT FOR INFORMAL PROBATE OF WILL AND APPOINTMENT OF A PERSONAL REPRESENTATIVE

The application of LUCAS A. STUART for the informal probate of the Will of CATHERINE PERRY FOX and the appointment of a Personal Representative having come before the Superior Court, the Superior Court makes the following findings based upon the application:

- 1. The application is complete and contains the applicant's oath or affirmation and the statements contained therein are true to the best of LUCAS A. STUART'S knowledge and belief.
- 2. Applicant is nineteen (19) years of age or older, and is interested person as defined by the laws of this state by reason of the fact that LUCAS A. STUART is the named Personal Representative in the Last Will and Testament of CATHERINE PERRY FOX.
- 3. CATHERINE PERRY FOX died on the 30th day of April, 2024, at Happy Valley, Alaska, at the age of seventy seven (77) years, and the original Verification of Death is filed

Dolifka & Mery Attorneys at Law P. O. Box 498 Soldotna, Alaska 99669 907 262 2910

STATEMENT FOR INFORMAL PROBATE OF WILL AND APPOINTMENT OF A PERSONAL REPRESENTATIVE ESTATE OF CATHERINE PERRY FOX Page 1 of 3 herewith. At least five days have elapsed since Decedent's death.

- 4. The time limit has not expired for probate because less than three years have passed since Decedent's death.
- 5. Venue is proper because Decedent was domiciled in the Third Judicial District, State of Alaska, at the time of death.
- 6. The Last Will and Testament of CATHERINE PERRY FOX was executed on the 4th day of November, 2021, and the original was filed with the Superior Court at Kenai, Alaska, under Will No. 3KN-00-00149WI.
- 7. A Personal Representative has not been appointed in this or any other Judicial District of the State of Alaska, and neither this Will nor any other Will of Decedent has been the subject of a previous probate order.
- 8. Notice of the application is not necessary by reason of the fact that Applicant has not received a demand for notice and is not aware of a demand for notice of any probate or appointment proceeding filed in this state or elsewhere. Further, no one has a priority right to appointment.
- 9. Applicant is entitled to be appointed Personal Representative of Decedent's Estate because LUCAS A. STUART is named Personal Representative in Decedent's Will.
- 10. Applicant is entitled to serve without bond because the Last Will and Testament of CATHERINE PERRY FOX directs that LUCAS A. STUART serve without bond.

THEREFORE, IT IS ORDERED that:

- 1. That the Last Will and Testament of CATHERINE PERRY FOX, dated the 4th day of November, 2021, is hereby admitted to informal probate.
 - 2. The Application for Informal Appointment of a

Personal Representative is hereby granted and LUCAS A. STUART is hereby appointed as Personal Representative of the ESTATE OF CATHERINE PERRY FOX, deceased, and further LUCAS A. STUART shall serve without bond.

issued to LUCAS A. STUART upon his qualification and acceptance.

PROBATE MASTER/REGISTRAR

I certify that a copy of the foregoing was

__mailed___

placed in court box to (ICC) N

Oscanned to New

Clark

Bate

In the Matter of the Estate of:	CASE NO: <u>3KN-24-00122PR</u>
Catherine Perry Fox.	NOTICE OF JUDICIAL ASSIGNMENT and ORDER OF REFERENCE TO MASTER
This case is assigned to Superior Court Judge J	ason M Gist for all purposes including trial.
Magistrate Judge <u>Michelle Higuchi</u> is assigned or Adoption Rule 3.	master in this case pursuant to Probate Rule 2
	CLERK OF COURT
	APearce . Deputy Clerk
a copy of this notice was distributed to: Wery	
Clerk:NF	
Probate Rule 2. Appointment and Authority of Masters (a) Appointment. The presiding judge may appoint a proceedings listed in subparagraph (b)(2). Appointment of master in probate shall serve as a registrar. The presiding proceeding which is specified in the order of reference and (b) Authority, Order of Reference. (1) An order of reference specifying the extent of the master in every case assigned to a master. The order of reference (2) The following proceedings may be referred to a master: (A) all decedent estate hearings: (B) guardianship and conservatorship hearings under Title (C) mental commitment, alcohol or substance abuse commit (D) hearings on trusts; (E) hearings on emancipations; and (F) authorization of emergency life-saving procedures pursuant	standing master to conduct any or all of the probate standing masters must be reviewed annually. A standing ding judge may appoint a special master to conduct a is listed in subparagraph (b)(2). et's authority and the type of appointment must be entered must be served on all parties. 13; itment, and medication consent hearings under Title 47;
Adoption Rule 3. Appointment and Authority of Master (a) Appointment. The presiding judge may appoint a Appointments of standing masters must be reviewed annual conduct a proceeding which is specified in the order of refer (b) Authority, Order of Reference. (1) An order of reference of appointment must be entered in every case assigned all parties.	a standing master to conduct adoption proceedings. ally. The presiding judge may appoint a special master to rence.

TATAB SUBJECTAL DISTRICT AT RENAL
In the Matter of the Estate)
of)
CATHERINE PERRY FOX,)
Deceased.
Case No. 3KN-24PR
ORDER
•
IT IS HEREBY ORDERED that the Personal Representative's Motion to Expedite Appointment IS HEREBY GRANTED.
DATED at Kenai, Alaska, this 10 day of
PROBATE MASTER/REGISTRAR

I certify that a copy of themailed	foregoing was
placed in court box tolaxed to	
Ascanned to Mary	
ME	5/13/24
Clerk '	Dale

Dolifka & Mery Attorneys at Law P. O. Box 498 Soldotna, Alaska 99669 907 262 2910

ORDER TO EXPEDITE ESTATE OF CATHERINE PERRY FOX Page 1 of 1



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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.
 - The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - o 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
 - o Served/Sold
 - Manufactured
 - o Consumed
- All diagrams must include:
 - Dimensions (AMCO does not accept diagrams drawn to scale)
 - Cross streets
 - o Points of reference, such as a compass rose indicating True North
 - o 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:	NEW SKULL RANCH LLC	License	Number:	4684	
License Type:	Package Store				
Doing Business As:	Happy Valley Store	+			
Premises Address:	24185 Sterling Highway				
City:	Ninilchik	State:	Alaska	ZIP:	99639

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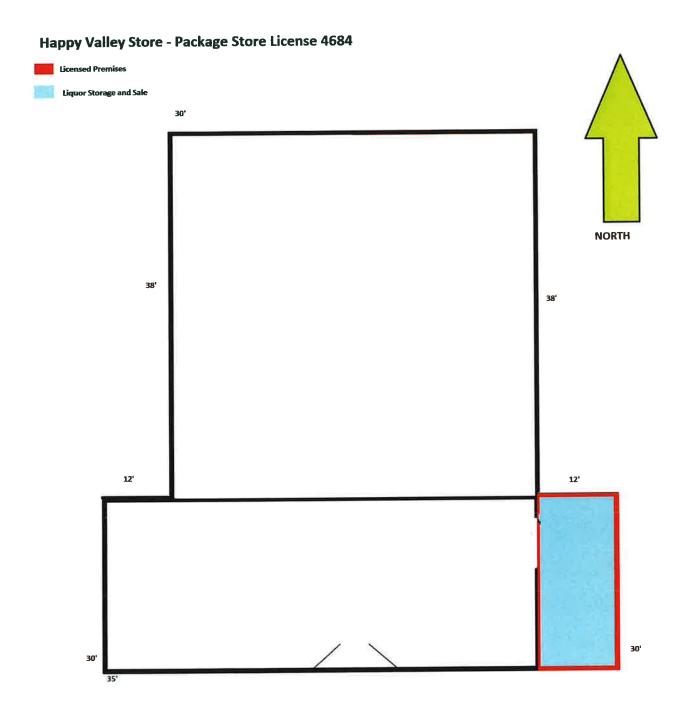
https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

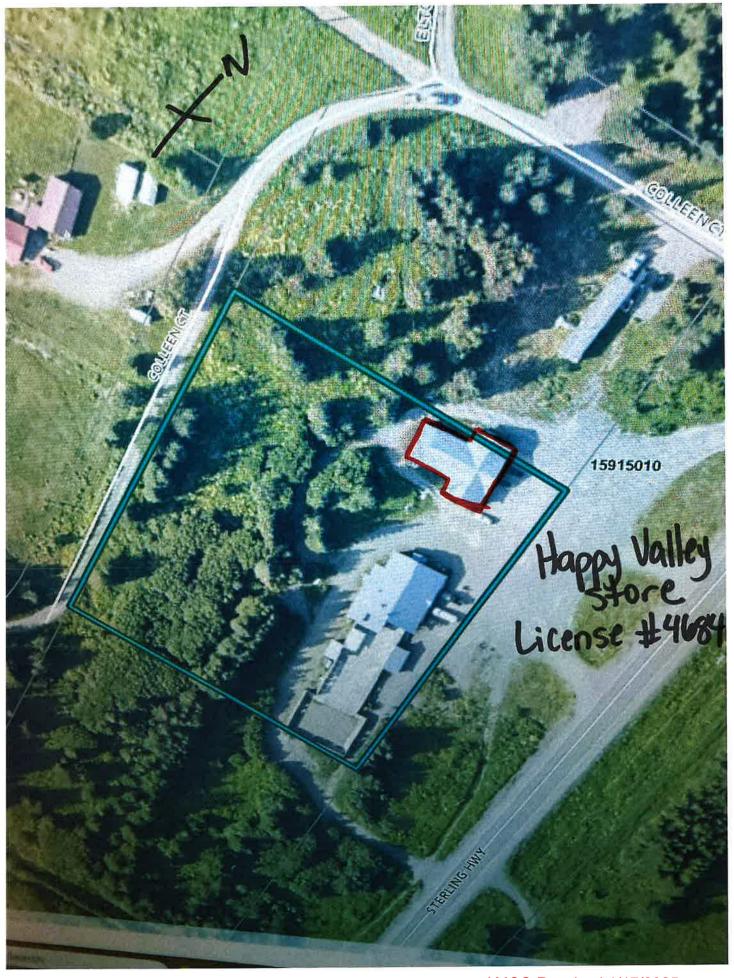
Alaska Alcoholic Beverage Control Board

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.





AMCO Received 1/17/2025

