

Department of Commerce, Community, and Economic Development

Alcohol and Marijuana Control Office

550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: January 27, 2025

FROM: Sonya Irwin, Licensing Supervisor RE: 1116 Tangle River Inn, 3rd Waiver

of Operations

Applicable statute: AS 04.11.330(a)(3). An application requesting renewal of a license or endorsement shall be denied if the applicant has not operated the licensed premises for at least 240 hours during each of the two preceding calendar years, unless the board determines that the licensed premises are under construction or cannot be operated through no fault of the applicant;...

Applicable regulation: 3 AAC 305.120 Waiver of annual operating requirement and minimum operating requirements. (a) Except as provided in this section, the board will deny an application for renewal of a license or a license with one or more endorsements if the licensed premises were not operated for the time required under AS 04.11.330(a)(3) or (d).

- (b) A licensee may submit a waiver application to the board to request a waiver of the operating requirement in AS 04.11.330 (a)(3) or (d). Under AS 04.11.330(a)(3), the board will determine whether, through no fault of the licensee or because the premises are under construction, the licensed premises could not be operated for the required time during the preceding calendar year.
- (c) A waiver application for a calendar year must be made in writing to the board and must be accompanied by the non-refundable application fee of (1) an amount equal to one-half the applicable biennial license fee if a waiver application was not made for the previous year; or (2) double the amount of the fee paid for the previous waiver application.
- (d) A waiver application must include a statement from the licensee explaining why the licensed premises was not in compliance with <u>AS 04.11.330(a)(3)</u> or (d). The licensee must provide a copy of the waiver application to any local governing body with jurisdiction over the license and licensed premises.
- (e) The board may deny a third or subsequent, consecutive application for waiver (1) unless the licensee clearly shows that the licensed premises were not operated, because the premises were condemned or substantially destroyed by any cause; or (2) the licensee holds a common carrier dispensary license and is a boat weighing over 1,000 tons;
- (f) Absent circumstances to the contrary, the board will deny a third or subsequent, consecutive application for waiver in the event of condemnation or destruction of the premises if the premises

identified on an applicant's license are not leased or owned by the licensee Additionally, a third or subsequent consecutive application for waiver that does not identify a licensed premises location will be denied.

- (g) The board may impose conditions along with the approval of a waiver application.
- (h) If a waiver application is denied, an application for license renewal for the succeeding license period will be denied by the board under AS 04.11.330(a)(3).
- (i) In addition to the application fee under (c) of this section, the applicant shall pay \$1,000 for an application that is received too late for board consideration at its last meeting of the calendar year for which the waiver is requested.
- (j) In the event of the death of a licensee, destruction of the premises, or comparable circumstances showing extraordinary hardship, the board may waive the fees required under (c) and (i) of this section.
- (k) If a license is exercised only to satisfy the minimum operating requirement under AS 04.11.330(a)(3) or 3 AAC 305.110, a licensee shall operate in a similar fashion to other licensed premises of the same type by meeting the following operating requirements as appropriate for the license type: (1) provide signage of sufficient size and visibility to show that the premises is open for business, including the business name and hours of operation; (2) offer a variety of brewed beverages, wines, and distilled spirits for sale at the licensed premises, as appropriate to the type of license, (3) for a licensed package store premises, visibly display the alcoholic beverages stock; (4) for a beverage dispensary licensed premises, provide seating for at least one-half of the maximum number allowed by the occupancy permit; (5) comply with all state or municipal health, fire, and zoning laws or ordinances required for the operation of business; (6) maintain a record of all purchases of alcoholic beverages for resale on the licensed premises; and (7) record sales with a cash register or point of sale system that retains a record of transactions.
- (1) The licensee has the burden of proof to show that the licensed premises were operated for the minimum required period of time and met the operating requirements under (k) of this section. The licensee may provide receipts, invoices, photographs, permits, timecards, and other records to meet the burden of proof. If the licensee fails to provide proof that one or more of the operating requirements was met, the board may consider additional documentation provided by the licensee to determine whether the licensee has met the burden of proof.
- (m) If a new license is issued between November 20 and December 31, the licensee is exempt from filing a waiver of annual operating requirement for that year.

Background: This is the third waiver requested for this license without including the Covid waivers. Licensee passed away March of 2024. Personal Representative for deceased licensee states they have identified an individual they wish to transfer this license to.

Attachment: Memo, 3rd Waiver Application for 2024, 2nd Waiver Application for 2023 (approved administratively), 1st Waiver Application for 2022 (approved administratively), Covid Waivers for 2020-2021, and Letter requesting time extension to submit transfer application – Approved at 9/10/2024 ABC

Board Meeting. Court documents assigning Donald & Janet Boylan as Personal Representatives for Nadidine O. Johnson.



alcohol.licensing@alaska.gov

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

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Alaska Alcoholic Beverage Control Board

Form AB-29: Waiver of Operation Application

Why is this form needed?

This form is the means by which a licensee may request that the Alcoholic Beverage Control (ABC) Board waive the operating requirement of AS 04.11.330(a)(3) or (d). If a recreational site license has not been operated at least once in a calendar year, or if a license of any other type has not been operated for at least 240 hours in each calendar year, then a complete copy of this form and the corresponding fees must be submitted for that calendar year, per 3 AAC 304.170.

This application must be accompanied by a non-refundable waiver application fee of:

- for a 1st request, an amount equal to ½ the applicable biennial license fee; or
- for a 2nd or subsequent request, double the amount of the fee paid for the previous waiver application.

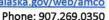
The ABC Board will determine whether, through no fault of the licensee or because the premises are under construction, the licensed premises count not be operated for the required time during the calendar year. The ABC Board may impose conditions along with the approval of an application for waiver, and it may deny a third or subsequent application for waiver. If an application for waiver is denied, an application for license renewal for the succeeding license period will be denied by the Board. In addition to the waiver application fee, the applicant must pay a late fee of \$1,000 for an application that is received too late for Board consideration at its meeting before November 30 of the year for which the waiver is requested. Please check AMCO's website for meeting agenda deadlines.

Please note that a licensee must submit a separate completed copy of this form and pay a separate corresponding fee for <u>each license</u> and for <u>each calendar year</u> during which a license was not operated in compliance with AS 04.11.330.

	Section 1 - Est	ablishment Inf	formati	on		-
Enter information for the lice	nse that has not been operated	for the time required	under AS 04	4.11.330.		
Licensee:	Naidine 0	- Johnson	License	Number:	111	
License Type:	Tangle River I	an Beverag	re di	spensa	y Too	rism/Serson
DBA:	Tangle River I Tangle River mile 20 Dena Paxson, alask	er Inn	1			- /
Premises Address:	mile 20 Dena	li Hay.				
City:	Paxson, alask	a	State:	Alaska	ZIP:	99737
Local Governing Body:	Unorganized	Borough				
	J		0-14	V		
	Section 2 – Reques	t Number and	Calenda	ar Year		
1 st Request	2 nd Request	3 rd Request		Oth	er	
Request for Calendar Yea	2024					
						Page 1 of 2









Alaska Alcoholic Beverage Control Board

Form AB-29: Waiver of Operation Application

Section 3 – Reason for Non-operation

Provide an explanation as to why the licensed premises were not operated:

My Mother Naidine Johnson passed Away March 2 St 2024 Its been in probate and no one was able to open the lodge This summer. We plan on opening Next year 2025 We have to do some Repairs to Lodge Leaks, etc.

Rebecca have

Section 4 - Certifications

The following must be completed for establishments located within the boundaries of a local governing body:

Read the line below, and then sign your initials in the box to the right of the statement:

Initials

I certify that I will provide a true copy of this application to the local governing body listed on Page 1 of this form prior to ABC Board consideration 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.



Office Use Only

100951601 \$5.000.00 Waiver Application Fee: Late Fee: None Transaction #:



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Alaska Alcoholic Beverage Control Board

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This application must be accompanied by a non-refundable waiver application fee of:

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- for a 2nd or subsequent request, double the amount of the fee paid for the previous waiver application.

The ABC Board will determine whether, through no fault of the licensee or because the premises are under construction, the licensed premises count not be operated for the required time during the calendar year. The ABC Board may impose conditions along with the approval of an application for waiver, and it may deny a third or subsequent application for waiver. If an application for waiver is denied, an application for license renewal for the succeeding license period will be denied by the Board. In addition to the waiver application fee, the applicant must pay a late fee of \$1,000 for an application that is received too late for Board consideration at its meeting before November 30 of the year for which the waiver is requested. Please check AMCO's website for meeting agenda deadlines.

Please note that a licensee must submit a separate completed copy of this form and pay a separate corresponding fee for <u>each license</u> and for <u>each calendar year</u> during which a license was not operated in compliance with AS 04.11.330.

Section 1 – Establishment Information

Enter information for the lice	nse that has not been oper	ated for the time required	under AS 04	4.11.330.	100	
Licensee:	Naidine 0	Johnson	License	Number:	111	6
License Type:	Beverage	e Dispens	ary T	ouris	m - Se	asonal
DBA:	Tangle Ri	ver Inn)			
Premises Address:	Mile 20	Denali Hi	vu-t	Payson	AK	
City:	Glennaller	1(?)	State:	Alaska	ZIP:	
Local Governing Body:	Unorga	inized Bo	rou	gh		
	Section 2 – Requ			/		
1 st Request	2 nd Request	3 rd Request		Oth	er	
Request for Calendar Year	2023		原電	BEUVIEU		
Form AB-29] (rev 3/1/2022)	11:00		alle	Lanz 1		Page 1 of 2



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Alaska Alcoholic Beverage Control Board

Form AB-29: Waiver of Operation Application

Section 3 - Reason for Non-operation

rovide an explanation as to why the licensed premises were not operated:
Naidine was very ill and under a
guardianship-Buardians were unable
to run the lodge and take care of her.
Jack (her busband) had died and unable
to help.

Section 4 - Certifications

The following must be completed for establishments located within the boundaries of a local governing body:

Read the line below, and then sign your initials in the box to the right of the statement:

Initials

I certify that I will provide a true copy of this application to the local governing body listed on Page 1 of this form prior to ABC Board consideration 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.



Naidine O Johnson Printed name of licensee	<u>Na</u> Signature	of licensee Janet Boyland
	Office Use C	Only
Waiver Application Fee:	Late Fee:	Transaction #: 100834140

[Form AB-29] (rev 3/1/2022)

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	Section 1 – E	stablishment Inf	ormation		
Enter information for the licer	se that has not been opera	ted for the time required u	under AS 04.11.330.		
Licensee:	Naidine 0	Johnson	License Number:	11	16
License Type:		Dispensary	Tourism-	Sec	29 onal
DBA:	Tangle Riv	1			
Premises Address:		nati Husy, P.	axson, AK		
City:	Passon Bio	late	State: Alaska	ZIP:	99652
Local Governing Body:	Unorganiz	ed Borough	1		
	J	J			
\$	Section 2 – Reque	est Number and (Calendar Year		
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Request for Calendar Year	2022		RECEIVE		
[Form AB-29] (rev 3/1/2022)			ALCOHOL MA UF IN CURN	HOLOFFICE	Page 1 of 2



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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.



Naidine O Johnson Printed name of licensee	<u>Marda</u> Signature of li	icensee Japet Boylan Personal Representation
	Office Use Only	
Waiver Application Fee:	Late Fee:	Transaction #: 100834140

[Form AB-29] (rev 3/1/2022)

ALCOHOL MARCUA A GUNTAOL OFFICE STATE OF ALASKA

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Form AB-29: Waiver of Operation Application

	Section 3	3 - Reaso	on for Non-opera	tion		
Provide an explanation as						
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Situation	n. Husban	a po	word Doi	1. 2021		
	Sec	ction 4 –	Certifications			
The following must be con				cal governing bo	dv:	
Read the line below, and	men sign your initials in t	ne box to the	right of the statement:			Initials
I certify that I will provide ABC Board consideration of	a true copy of this applica of this application.	ition to the lo	cal governing body listed	on Page 1 of this i	form prior to	28.
I hereby certify that I am t application, and I know the other documents submitte response in this applicatio	e full content thereof. I de ed are true and correct. I t	clare that all understand th	of the information contair at any falsification or misr	ned herein, and ever representation of	vidence or anv item or	uz.
denying or revoking a licer 11.56.210 to falsify an app	nse/permit. I further unde	rstand that it	is a Class A misdemeanor	under Alaska Stat	tute	9
Nailine O. Violet Dic	Schnson	l	Daidine	inson .	Quard	ian to
Printed name of licensee	Kinson	Sign	DardinE nature of licensee	0. 8	husod	
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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

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Section 1 - Establishment Information

Enter information for the lice	nse that has not been ope	rated for the time required t	ınder AS 04.11.330.	
Licensee:	Daidine C	2 Sohnson	License Number:	1116
License Type:	BEIGGAGE	(1)	4-JOHE 15	M Grasonal
DBA:	Janale	RIVER Inn	J -	
Premises Address:	Mile 20]) Enalithery		National Control of the Control of t
City:	Paxson	3	State: Alaska	zip: 99737
Local Governing Body:	outside	City Limit	ts	
	Section 2 – Requ	ں uest Number and ا	化基氯基 化物物基金化物 化二甲二甲二甲二甲二甲甲二甲二甲甲二甲二甲甲二甲甲	
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Request for Calendar Yea	1 2020 4-202	ł-		
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[Form AB-29] (rev 3/1/2022)

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

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Alaska Alcoholic Beverage Control Board

Provide an explanation as to why the licensed premises were not operated:

Form AB-29: Waiver of Operation Application

Section 3 - Reason for Non-operation

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(100). 0)	2021			v		
8						
				Annual Control of the		J
					ing and the second	
			Certifications			
The following must be con				cal governing bod		٠,
Read the line below, and t	hen sign your initials in th	e box to the r	ight of the statement:		Initial	<u>5</u> ≕्।
I certify that I will provide a ABC Board consideration o	a true copy of this applicat f this application.	tion to the loc	al governing body listed o	in Page 1 of this fo	orm prior to	
I hereby certify that I am the application, and I know the other documents submitted response in this application denying or revoking a licent 11.56.210 to falsify an application of the submitted in the submitt	e full content thereof. I de d are true and correct. I u n, or any attachment, or d ise/permit. I further under	clare that all on nderstand that ocuments to see that it is	of the information contain at any falsification or mism support this application, is s a Class A misdemeanor	ed nerein, and evi epresentation of a s sufficient ground	any item or $\mathcal{U}(t)$	<u> </u>
Vaidine O Printed name of licensee Violet Dick	inson	Sign	iolet iclassicature of licensee	on Guar	edianto di Zoh	adini nson
		Office	Use Only			
Waiver Application Fee:		Late Fee:		Transaction #:		
	1					

June 24, 2024

From:
Donald and Janet Boylan
18609 Man O War
Eagle River, AK. 99577
907-244-0480

To: State of Alaska Alcoholic Beverage Control Board 550 W 7th Avenue Ste. 1600 Anchorage, AK. 99501

To whom it may concern:

We are acting as personal representatives for Naidine O Johnson.

She died on March 1, 2024.

Inclosed are a copy of the death certificate and the Letters of Testamentary.

We are charged with the sale of the Tangle River Inn at Mile 20 on the Denali Highway near Paxson, AK.

It will be very difficult to sell the lodge before the August deadline. Therefore we would like an extension of at least a year if possible to complete the legal paperwork and get the lodge sold. Other lodges have taken as long as two years to sell, and we owe it to the heirs to get as good a price as possible.

Licenses affected are: Liquor License #1116 Beverage Dispensary Tourism-Seasonal

License #1117 Package Store-Seasonal

anet Boylan

Also please direct future correspondence to us at the above address.

Thank you,

Janet Boylan

KIRCITIVED

JUN 2 8 2024

Dept. of Commerce AMCO

	IN THE SUPERIOR COURT FOR THE STATE OF ALASKA ATPALMER
In th	e Matter of the Estate of:))))
NAI	INE OLIVE JOHNSON
Perso	n who Died (Decedent)) Date of Birth: CASE NO. 3PA-24-00186 PR
	ACCEPTANCE OF DUTIES BY PERSONAL REPRESENTATIVE (Filed by personal representative when there IS a will)
I acc	ept the appointment of personal representative and agree to perform the following duties:
(1)	Complete Form P-340, Information to Heirs and Devisees.
(2)	Deal with creditors: (a) Complete Form P-341, Notice to Creditors. (b) Complete Form P-345, Notice to Creditors Allowing or Disallowing the Claim. Handle the estate property of the person who died:
(3)	 (a) Gather the estate property. (b) Complete an inventory of estate property by completing Form P-370, Inventory of Property.
	(c) Determine the assets and liabilities of the estate property and transfer estate property by completing P-380, Accounting and Proposed Distribution.
(4)	Pay homestead, exempt property, and family allowances to surviving spouse and/or minor children.
(5)	Pay required state and federal taxes (income, property, estate).
(6)	Pay required costs of administering the probate, including any bond.
(7)	Tell the court my address and phone number in writing. Wrap up the final business affairs of the person who died
(8)	(see www.courts.alaska.gov/shc/probate/probate-after-death.htm#legal-tasks).
(9)	Close the estate as soon as appropriate.
I swe	ar or affirm that I read this document and believe all statements made are true.
4-	16.24 Janet Boylan
	Date Signature of Personal Representative Printed Name
1860	9 Man O'War Drive 907-694-5387
Addre Eagl	Phone Number joneslawinak@yahoo.com
Addre	E-mail Address
Subse (date	ribed and sworn to or affirmed before me at Ychner, Alaska or
	Notary Public
	TIMOTHY HALL Clerk of Court, Notary Public or other person
	States Allerska authorized to administer oaths.
	My Commission Expires May 12, 2025 My commission expires: 5/12/25

Page 1 of 2 P-335 (5/21)(cs) ACCEPTANCE OF DUTIES AND LETTERS TESTAMENTARY

Probate Rules 7 & 8; AS 13.16.015; AS 13.16.245, AS 13.16.220

My commission expires: 5/12/25

8.	Right to be Appointed as Personal Representative. The court finds that [name] Don Boylan
9.	Additional Findings.
10.	Notice. Any notice required by Alaska law has been given.
	PROCEDURAL ORDER
The c	ourt orders that:
1.	The will is admitted to informal probate.
2.	No bond is required. A bond is required in the amount of \$
3.	The appointed personal representative is [name] Don Rayton & Janet Royla and he or she assumes the responsibilities after posting a bond, is required.
4.	The court will issue Letters Testamentary after the personal representative files Form P-335, Acceptance of Duties by Personal Representative and Letters Testamentary by Court.
5.	Other:
5 Date	19/24 Signature of Registrar Deve & Voelle
	Printed Name
5/	المحور المحدد ا
ß	Clerk of the inal courts
Page 2	of 2 By Deputy Date AS 13.16.115

FILED in the TRIAL COURTS
State of Alaska Third District
at Palmer, Alaska

	IN THE SUPERIOR COURT FOR TO ATPALMER		
In the	e Matter of the Estate of:	Clerk of the Trial Courts	
)	ByDeputy	
NAID	DINE OLIVE JOHNSON		
Perso	on Who Died (Decedent) Date of Birth:	SE NO. 3.PA -24-00186 PR	
	STATEMENT STARTING INFOR	MAL PROBATE AND	
	APPOINTING A PERSONAL REPRESENTA (Statement of Informal Probate of Will and Appo		
proba	d upon the request of [name] DON BOYLAN ate of [name of person who died] NAIDINE sonal representative, the court makes the following	to open informal OLIVE JOHNSON's last will and appoint	
	FINDINGS		
1.	Application. The application appears to be coor affirmation that the statements are true to t	omplete and includes the requestor's oath he best of the requestor's belief.	
2.	Interest. The requestor is a person with an ir a spouse, relative, person named in the will, be representing an interested person.	nterest in the estate because he or she is eneficiary, creditor, or fiduciary	
3.	Person Who Died (Decedent). The decedent died on [date] 3/01/2024 At least five full days have passed since the death.		
4.	Filing Location. This is the correct court to file in because the person who died: lived in this judicial district at the time of death. did not live in Alaska at the time of death, but had property located in this judicial district at the time of death.		
5.	Time. The time for probate is within the requirement less than three years have passed since that three years have passed but it because:	red time period because: he person died. ate probate is allowed under AS 13.16.040	
6.	will. The person who died made a valid will o original will (or an authenticated copy of the w	n [date] 1/22/2002 . The court has the ill probated in another jurisdiction).	
7.	Current Personal Representative. No court has appointed a personal representative. A court appointed a personal representative. A court appointed [name] who lives at [address] The requestor filed an authenticated copy of	, but later ended that appointment as personal representative	
	where the will was first probated.		

Page 1 of 2

AS 13.16.115

P-316 (5/21)(cs)
STATEMENT STARTING INFORMAL PROBATE AND APPOINTING A PERSONAL REPRESENTATIVE WHEN THERE IS A WILL

FILED in the TRIAL COURTS State of Alaska Third District at Palmer, Alaska

IN THE SUPERIOR COURT F ATPAL	OR THE STATE OF ALASKA MAY 0 9 2024
In the Matter of the Estate of:	Clerk of the Trial Courts ByDepu
Person who Died (Decedent) Date of Birth:)))) CASE NO3PA-24-00186 PR
Leave This Portion Blank	for the Court to Fill Out
(Court Opens Probate and Appoints a Person The will of the decedent was admitted to probate Don Boylan & Janes Boylan	onal Representative When There is a Will) The appointed personal representative is:
The personal representative is:	ve shall not make any distribution of the estate
5/9/24 Date	Signature of Registrar or Judicial Officer ¹ Devek Koehler Printed Name
Cort. Copy-Jones 5/16/24 BP	I hereby certify that this is a true and correct copy of the original on file in my office: ATTEST: Clerk of the Trial Courts By 5/14/24 Deputy Date

<u>Informal</u> appointment under AS 13.16.115 can be made by the <u>registrar</u> without hearing or notice. <u>Formal</u> appointment under AS 13.16.145 must be made by a <u>judge</u> after hearing and notice.

Department of Commerce, Community, and Economic Development ALCOHOL & MARIJUANA CONTROL OFFICE

State of Alaska / Commerce / Intranet / ABC License / Home / Add/Update License

ADD/UPDATE A LICENSE

License No.:	1116	Expiration Year:	2023	
Data Entry:		Last Update:	7/1/2022 9:28:19 AM	
Form No.:	191	Entered By:		
	Valid OPending O Expired	Updated By:	SOA\krserezhenkov	
DBA/Establishme	Tangle River Inn			
Owner:	1102 Naidine O Johnson ✓			
Location:	Mile 20 Denali Hwy	,		
	PO Box 520855	Community Council:		
City:	Big Lake	EIN:		
State:	AK			
Zip:	99652		deejack37@gmail.com	
		Phone:	907-350-4145; 907-317-6942	
		Fax:		
Citv Code:	Outside City Limits •	Start Season:	5/1	
	Unorganized Borough ✓	End Season:		
20.0030000.	The state of the s	00000111		

Department of Commerce, Community, and Economic Development ALCOHOL & MARIJUANA CONTROL OFFICE

State of Alaska / Commerce / Intranet / ABC License / Home / Owner/Enterprise

ADD/UPDATE OWNER OR ENTERPRISE

ID:	1102		ENSES	
Name:	Naidine O Johnson	1116	Tangle River Inn	Mile 20 Denali Hwy
\ddress:	PO Box 520855	1117	Tangle River Inn	Mile 20 Denali Hwy
City:	Big Lake			
State:	AK			
ZIP:	99652			
Email:	deejack37@gmail.com			
Email:				
	Save Cancel			

INT

	~	
Add Interested Party		
No Interested Parties for this Owner/Enterprise		

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