## **Notice of Violation**

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: 11/4/21 License #/Type: 313

Beverage Dispensary-Tourism AS 04.11.400(d)

Licensee: Juneau Hospitality, LLC Address: 375 Whittier Street, Juneau, AK 99801

DBA: Ramada by Wyndham Juneau & TK Maguires AMCO Case #: AM211176

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

During an inspection of the licensed premises on 11/04/2021 it was found employee Roberto Orozco did not have a valid Alcohol Server Education card. The TAP card he presented expired on 03/18/2021.

This is a violation of AS 04.21.025 Alcohol Server Education Course

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

\*Please send your response to the address below and include your alcohol license number in your response.

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7<sup>th</sup> Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov

Issuing Investigator: S. Johnson Received by:

SIGNATURE: SIGNATURE:

Delivered VIA: Mail Date:

## Davies, Jason M (CED)

From:

Johnson, Steven M (CED)

Sent:

Monday, November 8, 2021 11:59 AM

To:

Davies, Jason M (CED)

Subject:

FW: Violation from Ramada by Wyndham Juneau

**Categories:** 

From: Jessica Meacham [mailto:jessica.tkmaguires@yahoo.com]

Sent: Monday, November 8, 2021 11:48

To: Johnson, Steven M (CED) <steven.johnson@alaska.gov> Subject: Violation from Ramada by Wyndham Juneau

Mr. Johnson, I am writing to let you know that Roberto will be at the next TAPS class in Juneau. He did not realise his card was expired but will take care of it right away. I have went through our other serving staff and their cards are not expired. I apologize for this over sight and we are taking care of it right away. If I need to respond to this violation differently please let me know and I will take care of right away.

Have a good afternoon!

#### Jessica Meacham

General Manager The Ramada by Wyndham Juneau & TK Maguires 375 Whittier St Juneau, AK 99801 Phone: 907-586-3737

## Davies, Jason M (CED)

From: Roberto Orozco [mailto:roberto.k.sofia@gmail.com]

Sent: Sunday, November 14, 2021 18:21

To: Johnson, Steven M (CED) <steven.johnson@alaska.gov>

Cc: Doug <dougktn@gmail.com>

Subject: Roberto Orozco Tap Card for TK Maguires

## Good evening,

I am emailing to share that I have renewed my Tap card, as of today. This is in response to the discussion we had a couple of weeks ago when you we at the TK Maguire's restaurant. I am sorry for the inconvenience, as I did not realize the card had expired.

Thank you, and please let me know if you have any questions or concerns.

#### Roberto Orozco





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

Phone: 907.269.0350

## **Alaska Alcoholic Beverage Control Board**

## Form AB-37: Tourism Statement

A new, transfer, or renewal application for a Beverage Dispensary – Tourism or Restaurant/Eating Place – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be completed and submitted to AMCO's Anchorage office before any tourism license application will be reviewed.

reviewed.			
	Section 1 – Establishment Informa	tion	
Enter information for the lic	ensed establishment or the business seeking to be licensed.		
Doing Business As:	Ramada/TK Maguires	License #:	313
License Type:	Beverage Dispensary-Tourism		
	Section 2 – Tourism Statement		
2.1. Explain how issuance of	a liquor license at your establishment has/will encourage tou	rism.	
Guests expe	et a full and varied scleets	on of do.	ink option
Having a lisua	to with other dining and cons	trong and a	11005
45 to compar	te with other dining and cons	ference co	inpetitors.
Guests relax	in the bar or dining room and	experience	The Vices
of Junian and	they frequently recommend us T	to their fri	ends and
	+ later travel here.		
	was/will be constructed or improved as required by AS 04.11.		
We have bust	tout and remodeled a full 5	cervice rest	takenst and
bar. Over tin	ne we have served the towns	+ communi	ty, Dusiness
staniales under	endent traveler and others by	string an a	updated,
Clean Pind	1. I wife premises to enjoy	There si ay	in Juneau
and the survey.	rding area. We have a number of fall	Ame employ	rees and
use local tra	des in many of our projects.	YES	NO
2.3 Does the licensee or app tourism facility in which	olicant for this liquor license also operate the name this license is located?		
2.4 If "no" who operates the	e tourism facility?		



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

Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public?	YES	NO
If "yes" answer the following questions:		
How many rooms are available?		
62	-	
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for foo with refrigeration and cooking appliance devices, including a microwave)?	od preparation	n along
4 suites with sink, microwave and refrisere	tor.	
All guest rooms with Microwave and refrige	eratou	
	YES	NO
If "no" is your facility located within an airport terminal?	YES	NO X
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write	"none".	
Daily breakfest, lunch and dinner in restaraunt the Room for private parties, wedding reception, business in many with out of town suests.		up to 150 s -
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or triguests, other activities that attract tourists), please describe them. If they are not offered, please write "n		uipment for
Working with small ship operators we offer "Kiel pre departure and overnight lodging before and	k off" e	events vuise.
We work with and support small businesses who and trips to our hotel guests.		

AMCO



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Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

## Form AB-37: Tourism Statement

#### **Section 3 - Certification**

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

**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 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.



Printed name of licensee/affiliate

ignature of licensee/affiliate

AMCO FEB 1 6 2023 STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

313

FORM CONTROL

XXXX

**ISSUED** 8/7/2023 ABC BOARD LIQUOR LICENSE 2023 - 2024

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2024 (AS 04.11.270(b))

**TEMPORARY** THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2025 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

CITY / BOROUGH:

Juneau

Juneau

Ramada by Wyndham June.

375 Whittier Street

Mail Address:

Juneau Hospitality, LLC 375 Whittier Street Juneau, AK 99801

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

04-900 (REV 10/20/22

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

**ISSUED** 8/7/2023 ABC BOARD LIQUOR LICENSE

2023 - 2024

313

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2024 (AS 04.11.270(b))

**TEMPORAR** 

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2025 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Disper

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Juneau Juneau

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

Ramada by Wyndham Juneau & TK Maguires 375 Whittier Street

Mailing Address:

D/B/A:

Juneau Hospitality, LLC 375 Whittier Street Juneau, AK 99801

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 5/9/22)



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

Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# 2023-2024 Master Checklist: Renewal License Application

Doing Business As:	Rama	da / TK Ma	quiros		License Number:	242
License Type:		Ramada / TK Maguires License Number: 313  Beverage Dispensary - Tourism			313	
Examiner:					400507004	
LXammer.	11. gu	unu g	141 23		Transaction #:	100537891
Document		Received	Completed	Notes		
AB-17: Renewal Applic	cation	2/16/23	814123			
App and License Fees		2/16/23	8/4/23			
Supplemental Docume	ent	Received	Completed	Notes		
AB-25: Supplier Certifica	tion					
AB-33: Restaurant Receip	ots Aff			1000		
AB-36: Rec Site Statemen	t					
AB-37: Tourism Statement		2/16/213	8/4/23	**************************************	NACCO NACCO	
AB-39: Change of Officers						
COI / COC / 5 Star / FAA Cert			*****			
FP Cards & Fees / AB-08a						
Late Fee (after 12/31/2022) 2/16/23 8/4 23			,			
Additional Documents:						
Names on FP Cards:						
			Yes No	N/A		
CBPL Entity Printout include	d?		χ			
Business License Copy include	ded?		X			
Background(s) Completed &	Date:			X		
Special Consideration:	1001	1004181	<b>W</b> Board Meeti	ng Date: 812	2/23	
LGB Sent Date:	13		LGB Deadline D	ate: 10[6]	23	
LGB 1 Name:	au_	·	LGB 2 Name:	Lunear	L	
Waive	Protest	Lapsed	Waive	Protes	st Lapsed	



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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

# Form AB-17: 2023/2024 General Renewal Application

This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2022 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.

	Section 1 - Esta	blishment Co	ntact Informa	tion	
Licensee (Owner):	Juncan H	escritality h	LC Lice	ense #:	313
License Type:	Beverage Dis	' '			
Doing Business As:	Rangdal		quires		
Local Governing Body:	City & Bor	7	Juneau		
Community Council:	none	9			
your mailing address has c	hanged, write the NEW addre	ess below:			
Mailing Address:	375 Whitt	ier Stre	et		
City:	Juneau	State:	AK	ZIP:	99801
	Section 2 – Lice	ensee Contac	t Information		
	dual listed below must be part of contact regarding this license, unl			Section 1. Thi	s person
Contact Licensee:	Joel Sims- N	lem ber	Contact Phone:	831	-206-3559
Contact Email:	teamsims (	yahoo.c	om		
Optional: If you wish for AMCo	O staff to communicate with anyo	/		al counsel) ab	oout your license,
			Contact Phone:		
Name of Contact:					

calendar years 2022 and/or 2023?



## **Alaska Alcoholic Beverage Control Board**

# Form AB-17: 2023/2024 License Renewal Application

## **Section 4 - Ownership Structure Certification**

YES NO		
Did the ownership structure of the licensed business change in 2021/2022?		
If Yes, and you have NOT notified AMCO, list the updated information on form AB-39: Change of Officers and submit with you	r renewal	l application
If No, certify the statement below by initialing the box to the right of the statement.		
I certify that the ownership structure of the business who owns this alcohol license did not change in any way during the calendar years 2021 or 2022.	ز	bs
Section 5 - License Operation		
Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated:	2021	2022
<ol> <li>The license was operated for more than 240 hours throughout each year. (Year-round)</li> </ol>	X	X
2. The license was only operated during a specified time each year. (Not to exceed 6 months per year)		
If your operation dates have changed, list them below:		
to		
3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.  A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.		
4. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendar years. A complete Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not		
operated.  If you have not met the minimum number of hours of operation in 2021, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "Other" and COVID is listed as the reason.		
Section 6 - Violations and Convictions		
	YES	NO
Have ANY Notices of Violation been issued for this license?	$\square_{\epsilon}$	
Has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2021 or 2022?		$\bowtie$
If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)		
If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.		
Section 7 – Certifications		
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar wi	th AS 04	and

3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and the license being potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that in accordance with AS 04.11.450, no one other than the licensee(s), as defined in AS 04.11.260, has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and I have provided AMCO with all required changes of the ownership structure of the business license, and have provided all required documents for any new or changes of officers.

**AMCO** 



## **Alaska Alcoholic Beverage Control Board**

# Form AB-17: 2023/2024 License Renewal Application

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.

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.

ature of licensee

STATE OF ALASKA

OFFICIAL SEAL Joseph Crowley

NOTARY PUBLIC My Commission Expires 514

Notary Public in and for the State of Aska

My commission expires:

ure of Notary

Subscribed and sworn to before me this 3 day of

Restaurant and Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit Recreational Site applications must include a completed AB-36: Recreational Site Statement Tourism applications must include a completed AB-37: Tourism Statement Wholesale applications must include a completed AB-25: Supplier Certification Common Carrier applications must include a current safety inspection certificate

> All renewal and supplemental forms are available online: https://www.commerce.alaska.gov/web/amco/AlcoholLicenseApplication.aspx

#### FOR OFFICE USE ONLY

License Fee:	\$ Application Fee:	\$ 300.00	Misc. Fee:	\$
		To	otal Fees Due:	\$

#100537891

**AMCO** 

FEB 16 2023



# Department of Commerce, Community, and Economic Development CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

# **ENTITY DETAILS**

# Name(s)

Туре	Name
Legal Name	Juneau Hospitality L.L.C.

**Entity Type:** Limited Liability Company

Entity #: 103899

Status: Good Standing

**AK Formed Date: 10/11/2006** 

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2024

Entity Mailing Address: 615 MAIN ST, KETCHIKAN, AK 99901-9990

Entity Physical Address: 615 MAIN ST, KETCHIKAN, AK 99901-9990

# **Registered Agent**

Agent Name: Doug Andrew

Registered Mailing Address: 615 MAIN ST, KETCHIKAN, AK 99901

Registered Physical Address: 615 MAIN ST, KETCHIKAN, AK 99901

## **Officials**

			Snow Former
AK Entity #	Name	Titles	Owned
	DOUG ANDREW	Member	50.00
	JOEL SIMS	Member	50.00

# **Filed Documents**

Date Filed	Туре	Filing Certificate
10/11/2006	Creation Filing	Click to View
4/10/2007	Initial Report	Click to View
9/12/2010	Biennial Report	Click to View
9/12/2010	Biennial Report	Click to View
1/03/2013	Biennial Report	Click to View
4/30/2014	Biennial Report	Click to View
7/12/2016	Biennial Report	Click to View
8/07/2018	Biennial Report	Click to View
10/16/2018	Agent Change	Click to View
3/21/2020	Biennial Report	Click to View
4/26/2022	Biennial Report	Click to View

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