



**STATE OF ALABAMA**  
**ALCOHOLIC BEVERAGE CONTROL BOARD**  
**ALCOHOL LICENSE APPLICATION**



**Confirmation Number: 20200702140331751**

**Type License:** 020 - RESTAURANT RETAIL LIQUOR      **State:**      **County:**  
**Type License:**      **State:**      **County:**  
**Trade Name:** SHRIMP BASKET      **Filing Fee:**  
**Applicant:** SHRIMP BASKET RESTAURANTS LLC      **Transfer Fee:** \$50.00  
**Location Address:** 301 HWY 59 GULF SHORES, AL 36542  
**Mailing Address:** 7282 PLANTATION ROAD; SUITE 301 PENSACOLA, FL 32504  
**County:** BALDWIN    **Tobacco sales:** NO      **Tobacco Vending Machines:**  
**Type Ownership:** LLC

**Book, Page, or Document info:** FLORIDA  
**Date Incorporated:** 05/19/2020    **State incorporated:** FL      **County Incorporated:**  
**Date of Authority:** 05/16/2020      **Alabama State Sales Tax ID:** R  
**Federal Tax ID:**

<b>Name:</b>	<b>Title:</b>	<b>Date and Place of Birth:</b>	<b>Residence Address:</b>
BARRY GOFF	AUTHORIZED REPRESENTATIVE		
WILLIAM HEADLEY	AUTHORIZED REPRESENTATIVE		
MICHAEL WOOD	AUTHORIZED REPRESENTATIVE		

Has applicant complied with financial responsibility ABC RR 20-X-5-.14? **YES**  
Does ABC have any actions pending against the current licensee? **NO**  
Has anyone, including manager or applicant, had a Federal/State permit or license suspended or revoked? **NO**  
Has a liquor, wine, malt or brewed license for these premises ever been denied, suspended, or revoked? **NO**  
Are the applicant(s) named above, the only person(s), in any manner interested in the business sought to be licensed? **YES**  
Are any of the applicants, whether individual, member of a partnership or association, or officers and directors of a corporation itself, in any manner monetarily interested, either directly or indirectly, in the profits of any other class of business regulated under authority of this act? **NO**  
Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under authority of this act? **NO**  
Is applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof from or through a subsidiary or affiliate or other licensee, or from any firm, association or corporation operating under or regulated by the authority of this act? **NO**

**Contact Person:** JON ARCHER      **Home Phone:**  
**Business Phone:** 251-937-3655      **Cell Phone:**  
**Fax:**      **E-mail:** JARCHER@JBPLAW.COM

**PREVIOUS LICENSE INFORMATION:**      **Previous License Number(s)**  
**Trade Name:** THE SHRIMP BASKET      **License 1:** 020 000581902  
**Applicant:** THE SHRIMP BASKET LLC      **License 2:**