

**State of Arizona**  
**Department of Liquor Licenses and Control**

Created 12/20/2023 @ 01:16:45 PM

**Local Governing Body Report**

**LICENSE**

Number: 06110012                      Type: 006 BAR  
Name: SKIES  
State: Pending  
Issue Date:                              Expiration Date: 08/31/2024  
Original Issue Date: 10/02/1984  
Location: 945 E SCENIC STREET  
APACHE JUNCTION, AZ 85119  
USA  
Mailing Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (480)877-8101  
Alt. Phone: (480)730-2675  
Email: LIQUORLICENSE@AZLIC.COM

Mixed Cocktails To Go Privilege Leased to License 12079704

Currently, this license has pending applications.

**AGENT**

Name: AMY S NATIONS  
Gender: Female  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (480)730-2675  
Alt. Phone:  
Email: LIQUORLICENSE@AZLIC.COM

**OWNER**

Name: PM SKIES LLC  
Contact Name: AMY S NATIONS  
Type: LIMITED LIABILITY COMPANY  
AZ CC File Number: 23613233                      State of Incorporation:  
Incorporation Date:  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (480)730-2675  
Alt. Phone:  
Email: LIQUORLICENSE@AZLIC.COM

**Officers / Stockholders**

<b>Name:</b>	<b>Title:</b>	<b>% Interest:</b>
MICHAEL DAVID HINIKER	Member	50.00
PATRICK MICHAEL TRAYNOR	Member	50.00

**PM SKIES LLC - Member**

**Name:** MICHAEL DAVID HINIKER  
**Gender:** Male  
**Correspondence Address:** PO BOX 2502  
 CHANDLER, AZ 85244  
 USA  
**Phone:** (612)845-2510  
**Alt. Phone:**  
**Email:** MDHINIKER@GMAIL.COM

**PM SKIES LLC - Member**

**Name:** PATRICK MICHAEL TRAYNOR  
**Gender:** Male  
**Correspondence Address:** PO BOX 2502  
 CHANDLER, AZ 85244  
 USA  
**Phone:** (715)222-9143  
**Alt. Phone:**  
**Email:** PATRICK@SKYCOAT.COM

**APPLICATION INFORMATION**

**Application Number:** 270346  
**Application Type:** Owner Transfer  
**Created Date:** 12/05/2023 *Ch*

**QUESTIONS & ANSWERS**

**006 Bar**

- 1) Are you applying for an Interim Permit (INP)?  
 Yes  
 A Document of type INTERIM PERMIT (INP) NOTARY PAGE is required.
- 4) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?  
 No
- 8) Did the Premises phone number change?  
 No
- 10) Provide name, address, and distance of nearest school. (If less than one (1) mile note footage)  
 Apache Trail High School  
 945 E. Apache Trail  
 Apache Junction, Arizona 85120  
 1.18 Miles

- 11) Are you one of the following? Please indicate below.  
 Property Tenant  
 Sub-tenant  
 Property Owner  
 Property Purchaser  
 Property Management Company  
 Property Owner
- 12) Is there a penalty if lease is not fulfilled?  
 No
- 13) What is the total money borrowed for the business not including the lease?  
 Please list lenders/people owed money for the business.  
 0
- 14) Is there a drive through window on the premises?  
 No
- 15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.  
 Contiguous
- 16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
 No
- 17) Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only)  
 \$35,000.00

<b>DOCUMENTS</b>
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DOCUMENT TYPE	FILE NAME	UPLOADED DATE
BILL OF SALE	06110012 Bill of Sale to PM Investments.pdf	12/05/2023
INTERIM PERMIT (INP) NOTARY PAGE	06110012 IP.pdf	12/05/2023
MISCELLANEOUS	06110012 Section 6 Signed.pdf	12/05/2023
QUESTIONNAIRE	Patrick Traynor Questionnaire.pdf	12/05/2023
QUESTIONNAIRE	Michael Hiniker Questionnaire.pdf	12/05/2023
QUESTIONNAIRE	06110012 A. Nations Questionnaire.pdf	12/05/2023
MISCELLANEOUS	A. Nations Signed Attachment.pdf	12/05/2023
	06110012 Bill of Sale to PM Investments.pdf	12/20/2023
	06110012 Skies Diagram.pdf	12/20/2023

**State of Arizona  
Department of Liquor Licenses and Control**

Created 12/20/2023 @ 01:15:40 PM

**Local Governing Body Report**

**LICENSE**

<b>Number:</b>	INP110026333	<b>Type:</b>	INP INTERIM PERMIT
<b>Name:</b>	SKIES		
<b>State:</b>	Active		
<b>Issue Date:</b>	12/20/2023	<b>Expiration Date:</b>	04/03/2024
<b>Original Issue Date:</b>	12/20/2023		
<b>Location:</b>	945 E SCENIC STREET APACHE JUNCTION, AZ 85119 USA		
<b>Mailing Address:</b>	PO BOX 2502 CHANDLER, AZ 85244 USA		
<b>Phone:</b>	(480)877-8101		
<b>Alt. Phone:</b>	(480)730-2675		
<b>Email:</b>	LIQUORLICENSE@AZLIC.COM		

**AGENT**

<b>Name:</b>	AMY S NATIONS
<b>Gender:</b>	Female
<b>Correspondence Address:</b>	PO BOX 2502 CHANDLER, AZ 85244 USA
<b>Phone:</b>	(480)730-2675
<b>Alt. Phone:</b>	
<b>Email:</b>	LIQUORLICENSE@AZLIC.COM

**OWNER**

<b>Name:</b>	PM SKIES LLC
<b>Contact Name:</b>	AMY S NATIONS
<b>Type:</b>	LIMITED LIABILITY COMPANY
<b>AZ CC File Number:</b>	23613233
<b>Incorporation Date:</b>	State of Incorporation:
<b>Correspondence Address:</b>	PO BOX 2502 CHANDLER, AZ 85244 USA
<b>Phone:</b>	(480)730-2675
<b>Alt. Phone:</b>	
<b>Email:</b>	LIQUORLICENSE@AZLIC.COM

**Officers / Stockholders**

Name:  
MICHAEL DAVID HINIKER  
PATRICK MICHAEL TRAYNOR

Title:  
Member  
Member

REDACTED

% Interest:  
50.00  
50.00

**PM SKIES LLC - Member**

Name: MICHAEL DAVID HINIKER  
Gender: Male  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (612)845-2510  
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**PM SKIES LLC - Member**

Name: PATRICK MICHAEL TRAYNOR  
Gender: Male  
Correspondence Address: PO BOX 2502  
CHANDLER, AZ 85244  
USA  
Phone: (715)222-9143  
Alt. Phone:  
Email: PATRICK@SKYCOAT.COM

**APPLICATION INFORMATION**

Application Number: 270355  
Application Type: New Application  
Created Date: 12/05/2023 *Ch*

**QUESTIONS & ANSWERS**

**INP Interim Permit**

- 1) Enter License Number currently at location *06110012*
- 2) Is the license currently in use? *yes*
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page? *yes*

REDACTED

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Arizona Department of Liquor Licenses and Control  
800 W Washington 5th Floor  
Phoenix, AZ 85007-2934  
www.azliquor.gov  
(602) 542-5141

FOR DLIC USE ONLY

INP number:	INP110026333
Date Approved:	12-20-2023
Expiration:	9-3-2024
CS:	Chay
Fee:	\$100.00

Interim Permit (INP) Notary Page

For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. § 4-203.01 (A)

1. Enter license number currently at the location: 06110012

2. Is the license currently in use? ☒ Yes ☐ No If no, how long has it been out of use? \_\_\_\_\_

NOTARY

I (Print Full Name) Amy S. Nations hereby declare that I am the Individual Owner, Agent, or Controlling Person on the stated license and location.

Signature: *Amy Nations*

State of Arizona

County of Maricopa

The foregoing instrument was acknowledged before me this

My Commission Expires on: 3-10-24

Date

Day

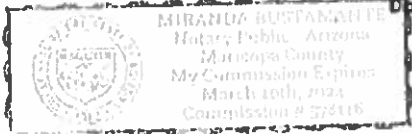
of 3rd

Day of December

Month

2023

Year



*Amy Nations*  
Signature of Notary

