

Alaska Marijuana Control Board

Enter information for the licensed establishment, as identified on the license application.

AKO FARMS LLC

AKO FARMS LLC

the type of violation or offense, as required under 3 AAC 306.035(b).

[Form MJ-20] (rev 4/23/2020)

1210 BEARDSLEE WAY

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

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

12253

Phone: 907.269.0350

Page 1 of 2

AMCO Received 6/10/2020

Form MJ-20: Renewal Application Certifications

What is this form?

Licensee:

License Type:

Doing Business As:

Premises Address:

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 - Establishment Information

STANDARD MARIJUANA CULTIVATION

License Number:

City:	SITKA	State:	Alaska	ZIP:	99835
	Section 2 – Indiv	idual Information	ŀ		
Enter information	for the individual licensee who is completing this	form.		* 12.121	
Name:	ELIZABETH MARTIN				
Title:	OWNER			Electric Control	
					,,,
	Section 3 - Viola	itions & Charges		100	5 (000.0
Read each line be	slow, and then sign your initials in the box to the			•••	Initials
I certify that I have	e not been convicted of any criminal charge in the	e previous two calendar yea	ars.		Cen
I certify that I have	e not committed any civil violation of AS 04, AS 17	7.38, or 3 AAC 306 in the pr	evious two	calendar y	ears.
I certify that a not	ice of violation has not been issued to this license	between July 1, 2019 and	June 30, 202	20.	Em
Sign your initials t	to the following statement <u>only if you are unable</u>	to certify one or more of	the above s	tatements	: Initials
I have attached a	written explanation for why I cannot certify one	or more of the above state	ements, whi	ich include	es T



Form MJ-20: Renewal Application Certifications

Section 4 - Certifications

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (M1-20a) along with this application. I certify that this establishment compiles with any applicable health, fire, safety, or tax statute, ordinance, regulation, of other law in the state. I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board. I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application including all accompanying schedules and statements, is true, correct, and complete. Lagree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license. **LIZABETH** MARTIN** Printed name of licensee Subscribed and sworn to before me this	Read each line below, and then sign your initials in the box to the right of each sta	itement:	Initials
(MJ-20a) along with this application. I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state. I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board. I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued. As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license. Subscribed and sworn to before me this	I certify that no person other than a licensee listed on my marijuana establishment direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the busines establishment license has been issued.	license renewal application has a ss for which the marijuana	Jun 1
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board. I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued. As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworm falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license. LICABETH MARTIN My commission expires: A 2 0 2 4 Printed name of licensee Subscribed and sworn to before me this 9 day of My commission expires: OF ALSON OF ALSON OF ALSON OF ALSON Figings Krithing Figings Krithing Figings Krithing Figure 4/23/2020)		a residency exception affidavit	Fin
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued. As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license. **LIZABETH** MARTIA** Signature of licensee **ELIZABETH** MARTIA** Ny commission expires: 4 2 0 2 4 Printed name of licensee **Subscribed and sworn to before me this 9 day of 200 200 200 200 200 200 200 200 200 20		r tax statute, ordinance, regulation, o	em
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[Form IVIJ-20] (rev 4/23/2020)	familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompand complete. I agree to provide all information required by the Marijuana Control that failure to do so by any deadline given to me by AMCO staff may result in additional additional accompany. Signature of licensee Lizabeth Martin Printed name of licensee	My commission expires: 20 2 0	of Alaska
	[Form MJ-20] (rev 4/23/2020) License # 12253	- AMCO December 1 0/40	

AMCO Received 6/10/2020



Alaska Marijuana Control Board

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This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 - Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number: 12253			
License Type:	STANDARD MARIJUANA CULTIVATION				
Doing Business As:	AKO FARMS LLC	12		•	
Premises Address:	1210 BEARDSLEE WAY				
City:	SITKA	State: Alaska	ZIP:	99835	

Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name:	MARTY MARTIN	
Title:	OWNER	

Section 3 - Violations & Charges

Read each line below	, and then sign	your initials in th	e box to the right	of any applicable statements:
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Initials

I certify that I have not been convicted of any criminal charge in the previous two calendar years.



I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.



I certify that a notice of violation has not been issued to this license between July 1, 2019 and June 30, 2020.



Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).



[Form MJ-20] (rev 4/23/2020) Page 1 of 2

Form MJ-20: Renewal Application Certifications

Section 4 - Certifications

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

initials

I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.



I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.



I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.



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Signature of lidensee

Novary Public in and for the State of Alaska

Printed name of licensee

My commission expires:

4.20.24

Subscribed and sworn to before me this ____

1 day of June

, 20 <u>2 C</u>

NOTARY OF ALASER OF EXPIRES APRILLATION EXPIRE



Alaska Marijuana Control Board

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License Number:

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License Type:

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AKO FARMS LLC

Section 1 - Establishment Information

STANDARD MARIJUANA CULTIVATION

Licelise Type:	O I FRI VIDI RI CID IVII RI CID OF RIVI O	02////		. 2	
Doing Business As:	AKO FARMS LLC				
Premises Address:	1210 BEARDSLEE WAY				
City:	SITKA	State:	Alaska	ZIP:	99835
	Section 2 – Individua	10	1	2	H) N ((((((((((((((((((
nter information for the	individual licensee who is completing this form	<u> </u>			
Name:	JUSTIN BROWN				
Title:	OWNER				
	nd then sign your initials in the box to the right een convicted of any criminal charge in the pre				
	committed any civil violation of AS 04, AS 17.38,			calendar	years.
	violation has not been issued to this license bet				
Sign your initials to the	following statement <u>only if you are unable to</u>	certify one or more c	f the above	<u>statemen</u>	ts: Initia
I have attached a writt	en explanation for why I cannot certify one or offense, as required under 3 AAC 306.035(b).				
					Page 1

Section 4 - Certifications

Read each line below, and	then sign your initia	ils in the hox to the	right of each statement:
Kean each line below, and	i illeli Sigli Youl millio	112 III THE DOV TO THE	THE CI COULT STATE INCIDE

Initials

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Signature of licensee

My commission expires: 4 · 20 · 2024

Subscribed and sworn to before me this _____ day of ___

BOND OF ALA.

P

[Form MJ-20] (rev 4/23/2020)

Page 2 of 2