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
Phone: 907.269.0350

Alaska Marijuana Control Board

Marijuana Establishment
Form MJ-17c: License Transfer Application

What is this form?

This form must be used to initiate a transfer of ownership of a marijuana establishment license under 3 AAC 306.045. This transfer application must be completed and submitted to AMCO's main office, along with all necessary supplemental documents and fees listed in **Form MJ-17b: License Transfer Application Checklist**, before a transfer of ownership, including a change that affects the controlling interest of an entity, will be considered by the Marijuana Control Board.

Please note that licensees seeking to change controlling interest of an entity that owns multiple licenses must submit a separate completed copy of this form and the required supplemental documents and fees for each license.

Licensees seeking to establish a security interest in the license transferred must submit all documentation required under 3 AAC 306.051.

Section 1 – Transferor Information

Enter information for the ***current*** licensee and licensed establishment.

Licensee:	Greenstar Inc	**License Number:**	5b-23692		
License Type:	Marijuana Concentrates Manufacturing Facility				
Doing Business As:	Gold Star Concentrates				
Premises Address:	40593 Kalifornsky Beach Rd. Ste C				
City:	Kenai	**State:**	Alaska	**ZIP:**	99611
Email:	jason.greenstar.cultivators@gmail.com				
Local Government:	Kenai Peninsula Borough				

☒ Regular ownership transfer ☐ Transfer of controlling interest in the licensed entity

☐ Transfer with security interest ☐ Compelled retransfer

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Section 2 – Transferee Information

Enter information for the ***new*** applicant seeking to be licensed. The business license # should be issued for the DBA listed below, and held by the transferee.

Licensee:	Canna Get Hashy, LLC	**Alaska Entity #**	10212484		
Mailing Address:	2339 E. Myrtle Cive				
City:	Wasilla	**State:**	ak	**ZIP:**	99654
Doing Business As:	Canna Get Hashy				
Business License #:	2167891	**Business Phone:**	907.841.9408		

Designated Licensee:	Troy and Trent Millhorse		
Contact Email:	bigdaddyfuzzy@yahoo.com	**Phone #**	907.841.9408

Section 2 – Entity Officials

Enter all information for each of the individuals listed below (attach additional copies of this page, as needed). If any entity official is another entity, you must include the AK Entity # of that entity in the Entity Official Name field, attach a separate completed copy of this page that breaks down the ownership information for that entity, and submit the required supplemental documents and fees listed on Page 1 for each entity official of that entity. Entity documents must be submitted for each entity listed on this form.

- If the applicant is a **corporation**, each officer or director, and owner of any of the corporation's stock.
- If the applicant is a **limited liability company**, each member holding any ownership interest and each manager.
- If the applicant is a **partnership**, each partner holding any interest in the partnership, and each general partner.

Entity Official Name:	Trout Millhouse				
Title(s):	Owner	**Phone:**	907-841-9408	**% Owned:**	45
Email:	cbdglassfrontier@gmail.com				
Mailing Address:	P.O. Box 874574				
City:	Wasilla	**State:**	AK	**ZIP:**	99687

Entity Official Name:	Troy Millhouse				
Title(s):	Owner	**Phone:**	907-229-6783	**% Owned:**	45
Email:	bigdaddyfuzzy@yahoo.com				
Mailing Address:	P.O. Box 874574				
City:	Wasilla	**State:**	AK	**ZIP:**	99687

Entity Official Name:	Sandra Millhouse				
Title(s):	Owner	**Phone:**	907-373-8761	**% Owned:**	10
Email:	sandrahbic@yahoo.com				
Mailing Address:	P.O. Box 874574				
City:	Wasilla	**State:**	AK	**ZIP:**	99687

Entity Official Name:					
Title(s):		**Phone:**		**% Owned:**	
Email:					
Mailing Address:					
City:		**State:**		**ZIP:**	

Entity Official Name:					
Title(s):		**Phone:**		**% Owned:**	
Email:					
Mailing Address:					
City:		**State:**		**ZIP:**	

License #_____

Alaska Marijuana Control Board

Form MJ-17c: License Transfer Application

Section 4 – Other Licenses

Ownership and financial interest in other marijuana establishments: Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other marijuana establishment that is licensed in Alaska? ☑ ☐

If "Yes", disclose which individual(s) has the financial interest, which license number(s), and license type(s):

Trout Millhouse - Deez Nugz 43510
Canna Get Hashy 34641
Troy Millhouse - Green 60 10959
Green 60 32405
Canna Get Hashy 34641

Section 5 – Authorization

Communication with AMCO staff: Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? ☑ ☐

If "Yes", disclose the name of the individual and the reason for this authorization:

Sandra D. Millhouse mom/wife/secretary

Section 6 – Transferee Certifications

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

I certify that all proposed licensees (as defined in 3 AAC 306.020) have been listed on this application. TM

Completed copies of all required documents and fees listed on Form MJ-17b are attached to this form. TM

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

I agree to provide all information required by the Marijuana Control Board in support of this application. TM

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As an applicant for a marijuana establishment license, 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 form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of transferee

OFFICIAL SEAL
Jessica Bryant
Notary Public-State of Alaska
My Comm Expires 3-30-2026

Notary Public in and for the State of Alaska.

Trout D. Millhouse
Printed name of transferee

My commission expires: 3-30-2026

Subscribed and sworn to before me this 9th day of January, 2025.

Section 7 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of unsworn falsification that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) approve of the transfer of this license, and that the information on this form is true, correct, and complete.

Signature of transferor

Jason M. Bott
Printed name of transferor

Notary Public in and for the State of Alaska.

My commission expires: Aug 02, 2025

Subscribed and sworn to before me this 25 day of May, 2024.

OFFICIAL SEAL
LEILANI BROOKS
NOTARY PUBLIC-STATE OF ALASKA
My Comm. Expires August 2, 2025

Signature of transferor

Printed name of transferor

Notary Public in and for the State of Alaska.

My commission expires: _____

Subscribed and sworn to before me this ____ day of _____, 20____.

Signature of transferor

Printed name of transferor

Notary Public in and for the State of Alaska.

My commission expires: _____

Subscribed and sworn to before me this ____ day of _____, 20____.

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