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

Form MJ-08: Local Government Notice Affidavit

What is this form?

A local government notice affidavit is required for all marijuana establishment license applications with a proposed premises that is located within a local government, per 3 AAC 306.025(b)(3). As soon as practical after initiating a new marijuana establishment license application, an applicant must give notice of the application to the public by submitting a copy of the application (produced by the board's application website) to the local government and any community council in the area of the proposed licensed premises.

This form must be submitted to AMCO's main office before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Top Hat Concentrates, LLC	**License Number:**	10271		
License Type:	Marijuana Product Manufacturing Facility				
Doing Business As:	TOP HAT CONCENTRATES, LLC				
Premises Address:	2315 Industrial BLVD, Suite B				
City:	Juneau	**State:**	ALASKA	**ZIP:**	99801

Section 2 – Certification

I certify that I have met the local government notice requirement set forth under 3 AAC 306.025(b)(3) by submitting a copy of my application to the following local government and community council (if applicable):

Local Government: City & Borough of Juneau Date Submitted: 6/24/16

Community Council: _____ Date Submitted: _____
(Municipality of Anchorage and Matanuska-Susitna Borough only)

I declare under penalty of perjury that I have examined this form, including all accompanying schedules and statements, and to the best of my knowledge and belief find it to be true, correct, and complete.

Signature of licensee

Subscribed and sworn to before me this 24th day of June, 2016.

STATE OF ALASKA
OFFICIAL SEAL
Elizabeth J. McEwen
NOTARY PUBLIC
My Commission Expires 5/6/18

Notary Public in and for the State of Alaska.

My commission expires: 5/6/2018

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Licensee:	Top Hat Concentrates, LLC	**License Number:**	10271		
License Type:	Marijuana Product Manufacturing Facility				
Doing Business As:	TOP HAT CONCENTRATES, LLC				
Premises Address:	2315 Industrial BLVD				
City:	Juneau	**State:**	ALASKA	**ZIP:**	99801

Section 2 – Certification

I certify that I have met the local government notice requirement set forth under 3 AAC 306.025(b)(3) by submitting a copy of my application to the following local government and community council (if applicable):

Local Government: City + Borough of Juneau Date Submitted: 4/21/2016

Community Council: _____ Date Submitted: _____
(Municipality of Anchorage and Matanuska-Susitna Borough only)

I declare under penalty of perjury that I have examined this form, including all accompanying schedules and statements, and to the best of my knowledge and belief find it to be true, correct, and complete.

Signature of licensee

Subscribed and sworn to before me this 21st day of April, 2016.

STATE OF ALASKA
OFFICIAL SEAL
Elizabeth J. McEwen
NOTARY PUBLIC
My Commission Expires 5/6/18

Notary Public in and for the State of Alaska.

My commission expires: 5/6/2018

Public Notice

Application for Marijuana Establishment License

License Number: 10271
License Status: Initiated
License Type: Marijuana Product Manufacturing Facility
Doing Business As: TOP HAT CONCENTRATES, LLC
Business License Number: 1035398
Email Address: john@thcalaska.com
Latitude, Longitude: 58.366400, -134.605000
Physical Address: 2315 Industrial BLVD
Juneau, AK 99801
UNITED STATES

Owner #1

Owner Type: Entity
Alaska Entity Number: 10037169
Alaska Entity Name: Top Hat Concentrates, LLC
Phone Number: 313-318-5322
Email Address: john@thcalaska.com
Mailing Address: PO BOX 20842
Juneau, AK 99801
UNITED STATES

Affiliate #1

Owner Type: Individual
Name: John Nemeth
Date of Birth: 03/12/1983
Phone Number: 313-318-5322
Email Address: john@thcalaska.com
Mailing Address: 1220 Glacier Ave
APT 204
Juneau, AK 99801
UNITED STATES

Affiliate #2

Owner Type: Individual
Name: Benjamen Wilcox
Date of Birth: 04/08/1970
Phone Number: 907-419-0065
Email Address: ben@thcalaska.com
Mailing Address: 125 Wire St
Juneau, AK 99801
UNITED STATES

Affiliate #3

Owner Type: Individual
Name: Tracy LaBarge
Date of Birth: 03/26/1967
Phone Number: 907-723-2004
Email Address: tracy@thcalaska.com
Mailing Address: 2913 Blueberry Hills Rd
Juneau, AK 99801
UNITED STATES

Interested persons should submit written comment or objection to their local government, the applicant, and to the Alcohol & Marijuana Control Office at 550 W 7th Ave, Suite 1600, Anchorage, AK 99501 or to marijuana.licensing@alaska.gov not later than 30 days after this notice of application.

POSTING DATE 4/21/2016