Alcohol & 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

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

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

Licensee:	AKO Farms, LLC	**License Number:**	12253		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	AK O FARMSLLC.				
Physical Address:	1210 beardsley				
City:	sitka	**State:**	AK	**Zip Code:**	99835
Designated Licensee:	justin brown				
Email Address:	rgrjrb@hotmail.com				

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	MJ-07 PUBLIC Notice POST –

OFFICE USE ONLY					
Received Date:		Payment Submitted Y/N:		Transaction #:	

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Form MJ-07: Public Notice Posting Affidavit

What is this form?

A public notice posting affidavit is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(10). As soon as practical after initiating a new marijuana establishment license application, an applicant must give notice of the application to the public by posting a copy of the application (produced by the board's application website) for ten (10) days at the location of the proposed licensed premises and one other conspicuous location in the area of the proposed premises, per 3 AAC 306.025(b)(1).

This form must be completed and 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:	AKO FARMS LLC	**License Number:**	12253		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	AKO Farms LLC				
Premises Address:	1210 Beardslee				
City:	Sitka	**State:**	AK	**ZIP:**	99835

Section 2 – Certification

I certify that I have met the public notice requirement set forth under 3 AAC 306.025(b)(1) by posting a copy of my application for the following 10-day period at the location of the proposed licensed premises and at the following conspicuous location in the area of the proposed premises:

Start Date: 02/21/2017 End Date: 03/04/2017

Other conspicuous location: Post office/1210 Beardslee

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

Justin Brown
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 11/01/17

Subscribed and sworn to before me this 13 day of June, 2017.

Public Notice

Application for Marijuana Establishment License

License Number: 12253
License Status: Initiated
License Type: Standard Marijuana Cultivation Facility
Doing Business As: AK O FARMSLLC.
Business License Number: 1035604
Email Address: rgrjrb@hotmail.com
Latitude, Longitude: 57.051579, -135.306230
Physical Address: 1210 beardsley
sitka, AK 99835
UNITED STATES

Licensee #1

Licensee Type: Entity
Alaska Entity Number: 10037708
Alaska Entity Name: AKO Farms, LLC
Phone Number: 907-738-5301
Email Address: rgrjrb@hotmail.com
Mailing Address: 103 metlakatla st
sitka, AK 99835
UNITED STATES

Affiliate #1

Licensee Type: Individual
Name: Elizabeth Martin
[redacted]
Phone Number: 907-738-3484
Email Address: lizaak13@gmail.com
Mailing Address: P O Box 2752 2217 hpr
sitka, AK 99835
UNITED STATES

Affiliate #2

Licensee Type: Individual
Name: justin brown
[redacted]
Phone Number: 907-738-5301
Email Address: rgrjrb@hotmail.com
Mailing Address: 103 metlakatla st
sitka, AK 99835
UNITED STATES

Affiliate #3

Licensee Type: Individual
Name: marty Martin
[redacted]
Phone Number: 907-738-4048
Email Address: martinent@gci.net
Mailing Address: P O Box 2752 2217 hpr
Sitka, AK 99835
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 21 Feb 2017