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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | 14199 | | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

### Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Please find for filing:<br>- Cover letter<br>- Converted MJ-04 p. 2;<br>- Converted MJ-02.<br>Thx ☺ |

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

Received by AMCO 3/16/18

**LANCE CHRISTIAN WELLS**
**Law Offices of Lance Christian Wells, LLC.**
**733 W. 4th Avenue, Suite 308**
**Anchorage, AK. 99501**
**www.LanceCWells.com**

**Phone 907-274-9696** **Fax 907-277-9859**

March 16, 2018

Ms. Jacqlene Drulis
Occupational Licensing Examiner
Alcohol & Marijuana Control Office
550 West 7th Avenue, Suite 1600
Anchorage, Alaska 99501

**RE: Your Email of 3/15/2018**
**Matanuska Cannabis Company, LLC.**
**License Number 14199**
**Completed Corrections**

Dear Ms. Drulis:

Thank you for your Email of 3/15/2018. Attached are the completed corrections requested by you. Please make sure this makes the April 2018 meeting, as today is the final day to submit corrections.

MJ-02: See attached corrections.

MJ-04: See attached corrections.

Should you have any questions, please do not hesitate to contact me at the above number or address.

Law Offices of Lance C. Wells, LLC.

By: _____
Lance C. Wells, Atty.

Enclosure

Received by AMCO 3/16/18

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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | | 14199 | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

### Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Please find for filing:<br>- Cover letter;<br>- Corrected MJ-01;<br>- Corrected MJ-02;<br>- Corrected MJ-04;<br>- Corrected MJ-07;<br>- Corrected MJ-08;<br>- Publisher's Affidavit;<br>- Entity Document: Operating Agreement Signature Page - |

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

RECEIVED
MAR 12 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

**LANCE CHRISTIAN WELLS**
**Law Offices of Lance Christian Wells, LLC.**
**733 West 4th Avenue, Suite 308**
**Anchorage, AK. 99501**
**www.LanceCWells.com**
**lwells@gci.net**

**Phone 907-274-9696** **Fax 907-277-9859**

03/09/2018 **Hand Courier Delivery**

Ms. Jacqlene Drulis
Occupational Licensing Examiner
Alcohol and Marijuana Control Office
550 W. 7th, Suite 1600
Anchorage, AK. 99501

RE: Matanuska Cannabis Company, LLC.
Limited Marijuana Cultivation Facility
License No. 14199
Your Email Letter Dated 02/22/2018

Dear Ms. Drulis:

Thank you for your E-mail letter dated 02/22/2018. Enclosed please find all corrections and materials responsive to your requests as follows:

-Online Application: Corrected per your request.

-MJ-01:
-P. 11. See attached.
-P. 13. See attached.
-P. 15, First Box: See attached.

-MJ-02:
-Google image that is zoomed in reflecting an aerial view map of the building with streets, buildings etc. See attached.
-Other diagram changes. See attached per your letter.

-MJ-04:
-P. 3. Second Box: See attached, See Also Exhibits A & B.
-P. 4. Fist box.
-P. 6. See attached labels. Exhibit C, 1-3.

-MJ-07: See attached.

RECEIVED
MAR 12 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

-MJ-08: See attached.

-Publisher's affidavit: See attached.

-Entity documents: See attached signed operating agreement page with all member's signatures.

This should complete all documents requested and changes made pursuant to your Email. Thank you for your time and attention to this matter as I know you are very busy. We look forward to the upcoming AMCO Meeting.

Sincerely yours,
Law Offices of Lance C. Wells, LLC.

Lance C. Wells, Esq.

cc: Client

Enclosure



RECEIVED
MAR 12 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | 14199 | | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

## Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Please find for filing:<br>MJ-00;<br>MJ-07;<br>MJ-08;<br>MJ-09;<br>Thank you |

RECEIVED
SEP 14 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

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

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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | 14199 | | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

## Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Please find for filing:<br>-MJ-04;<br>-MJ-01;<br>-Entity Doc's<br>This completes ALL filings please advise when company fees.<br>Thx |

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

RECEIVED
OCT 0 9 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | 14199 | | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

## Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Payment of fees:<br>$2000<br>- 2 checks $1000 each.<br>Thx |

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

RECEIVED
OCT 09 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

RE
OCT
ALCOHOL MA
STATE OF

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:** | MATANUSKA CANNABIS COMPANY, LLC. | **License Number:** | 14199 | | |
| **License Type:** | Limited Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | MATANUSKA CANNABIS COMPANY, LLC. | | | | |
| **Physical Address:** | 3550 S. Old Glenn Highway | | | | |
| **City:** | Palmer | **State:** | AK | **Zip Code:** | 99645 |
| **Designated Licensee:** | Chad Ragsdale | | | | |
| **Email Address:** | tokawear@outlook.com | | | | |

## Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | Please find for filing:<br>- Affidavit of publication;<br>- (3X) fingerprint cards;<br>- (3X) checks for fingerprints.<br>Thx |

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

RECEIVED
AUG 30 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA