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.

Section 1 – Transferor Information

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

Licensee:	FSE, Inc.	**License Number:**			10886
License Type:	Marijuana Product Manufacturing Facility				
Doing Business As:	GOOD TITRATIONS				
Premises Address:	1770 Donald Ave, Suite B				
City:	Fairbanks	**State:**	Alaska	**ZIP:**	99701
Email:	shaun.tacke@gmail.com				
Local Government:	Fairbanks North Star Borough				

☐ Regular ownership transfer ☑ Transfer of controlling interest of the licensed entity

Section 2 – Transferee Information

Enter information for the ***new*** applicant seeking to be licensed.

Licensee:	FSE, Inc.		**Alaska Entity #**		10026238
Mailing Address:	PO Box 82011				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709
Business License #:	1040494	**Business Phone:**	907-978-7647		

Designated Licensee:	Shaun Tacke
Contact Phone:	907-978-7647
Contact Email:	shaun.tacke@gmail.com

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If more space is needed, please attach additional completed copies of this page, as needed.

- If the applicant is a **corporation**, complete the following for each ***officer or owner of any of the corporation's stock***.
- If the applicant is a **limited liability company**, complete the following for each ***member holding any ownership interest***.
- If the applicant is a **partnership** or **limited partnership**, complete the following for each ***partner holding any interest***.

Entity / Entity Official:	Billie Jo Gehring				
Title(s):	Shareholder	**Phone:**	907-359-2246	**% Owned:**	3.13
Email:	billiejogehring@gmail.com				
Mailing Address:	PO Box 226				
City:	Unalaska	**State:**	AK	**ZIP:**	99685

Entity / Entity Official:	Brandon Emmett				
Title(s):	Shareholder	**Phone:**	907 -328-8529	**% Owned:**	25
Email:	Emmett@goodtitrations.com				
Mailing Address:	1299 Lowbush Lane				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	Craig O'Donghue				
Title(s):	Shareholder	**Phone:**	907-378-3645	**% Owned:**	6.39
Email:	fairbanksdentist@gmail.com				
Mailing Address:	4740 Villanova Dr #A				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	Curtis Franklin				
Title(s):	Shareholder	**Phone:**	907-322-7945	**% Owned:**	.63
Email:	curtfran68@gmail.com				
Mailing Address:	3760 Mitchell Ave				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

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Entity / Entity Official:	Dawson Carroll				
Title(s):	Shareholder	**Phone:**	907-687-6097	**% Owned:**	1.25
Email:	tess_w_2@hotmail.com				
Mailing Address:	163 Carlyle Way				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	Frank Berardi				
Title(s):	Shareholder	**Phone:**	907-231-2943	**% Owned:**	25
Email:	Frank@goodtitrations.com				
Mailing Address:	801 Pelican Way				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	Jeffrey Weltzin				
Title(s):	Shareholder	**Phone:**	907-590-1304	**% Owned:**	4.53
Email:	jeffreyweltzin@gmail.com				
Mailing Address:	3844 Ullrbahn Rd				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	Joanne Ellsworth				
Title(s):	Shareholder	**Phone:**	907-451-9401	**% Owned:**	.01
Email:	dickells74@gmail.com				
Mailing Address:	2581 Goldstream Rd				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

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Entity / Entity Official:	Joshua Spence				
Title(s):	Shareholder	**Phone:**	907-488-1823	**% Owned:**	1.25
Email:	spence@redhatcultivation.com				
Mailing Address:	2296 Outside Blvd				
City:	North Pole	**State:**	AK	**ZIP:**	99705

Entity / Entity Official:	Judy Bath				
Title(s):	Shareholder	**Phone:**	907-488-9451	**% Owned:**	1.25
Email:	jkbath@hotmail.com				
Mailing Address:	545 Freeman Rd				
City:	North Pole	**State:**	AK	**ZIP:**	99705

Entity / Entity Official:	Lynn Crane				
Title(s):	Shareholder	**Phone:**	907-581-3248	**% Owned:**	1.25
Email:	unakwoman@yahoo.com				
Mailing Address:	PO Box 626				
City:	Unalaska	**State:**	AK	**ZIP:**	99685

Entity / Entity Official:	Martin Tacke				
Title(s):	Shareholder	**Phone:**	907-460-2472	**% Owned:**	1.56
Email:	marty.tacke@gmail.com				
Mailing Address:	1770 Donald Ave				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

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Entity / Entity Official:	Naomi Johnson				
Title(s):	Shareholder	**Phone:**	907-388-0446	**% Owned:**	.63
Email:	naomiraven.nj@gmail.com				
Mailing Address:	100 10th Ave, Apt 2B6				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Entity / Entity Official:	Seth Hawkins				
Title(s):	Shareholder	**Phone:**	907-347-4372	**% Owned:**	2.5
Email:	sethhawkins@hotmail.com				
Mailing Address:	PO Box 70018				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

Entity / Entity Official:	Shaun Tacke				
Title(s):	Shareholder	**Phone:**	907-978-7647	**% Owned:**	25
Email:	shaun@goodtitrations.com				
Mailing Address:	PO Box 82011				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Entity / Entity Official:	U.N.ME, LLC Alaska Entity Number: 10039028				
Title(s):	Shareholder	**Phone:**	662-694-9025	**% Owned:**	.63
Email:	mbroach1@gmail.com				
Mailing Address:	607 Old Steese Hwy., Ste. B #209				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

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Entity / Entity Official:	Melissa Cervantes				
Title(s):	Member of U.N.ME, LLC	**Phone:**	662-694-9025	**% Owned:**	100 of U.N.ME, LLC
Email:	mbroach1@gmail.com				
Mailing Address:	607 Old Steese Hwy., Suite B209				
City:	Fairbanks	**State:**	AK	**ZIP:**	99701

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

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

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

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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):

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:

JDW Counsel Team - legal counsel
Jana Weltzin - Attorney
Valerie Mastolier - Paralegal
Tina Thibodeaux - Paralegal

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Section 6 – 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

Shaun Tacke

Printed name of transferor

Subscribed and sworn to before me this 30 day of NOV, 2017.

State of Alaska
NOTARY PUBLIC
Melissa Proper
My Commission Expires Nov 19, 2019

Melissa Proper
Notary Public in and for the State of Alaska.

My commission expires: 11/19/19

Signature of transferor

Frank Berardi

Printed name of transferor

Subscribed and sworn to before me this 10th day of November, 2017.

Christina Thibodeaux
Notary Public in and for the State of Alaska.

CHRISTINA THIBODEAUX
Notary Public
State of Alaska
My Commission Expires Mar 31, 2021

My commission expires: March 31, 2021

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Signature of transferor

Brandon Emmett

Printed name of transferor

Subscribed and sworn to before me this 30 day of NOV, 20 17.

Melissa Proper

Notary Public in and for the State of Alaska.

State of Alaska
NOTARY PUBLIC
Melissa Proper
My Commission Expires Nov 19, 2019

My commission expires: 11/19/19

ST

Signature of transferor

~~Brandon Emmett~~

Printed name of transferor

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

Notary Public in and for the State of Alaska.

My commission expires: _____

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Section 7 – Transferee Certifications

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

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

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

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. FDB

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

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

Frank Bernardi
Printed name of transferee

Subscribed and sworn to before me this 10th day of November, 2017.

Christina Thibodeaux
Notary Public in and for the State of Alaska.

My commission expires: March 31, 2021

CHRISTINA THIBODEAUX
Notary Public
State of Alaska
My Commission Expires Mar 31, 2021

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