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-09: Statement of Financial Interest

What is this form?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each proposed licensee 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:	Great Northern Retail Stores, Inc.	**License Number:**	20366		
License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Smart Capital Holdings, LLC		
Title:	Shareholder		
SSN:	AK Entity #10049204	**Date of Birth:**	Est. 1/16/2017

AMCO
JUL 22 2019

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Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Louis John Kuest

Printed name of licensee

CASSIE MARLOVITS
My Commission Expires
NOTARY PUBLIC
Jan. 23, 2022
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: Jan 23, 2022

Subscribed and sworn to before me this 28 day of January, 2019.

AMCO
JUL 22 2019

Alcohol and Marijuana Control Office
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Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Kristin A. Rognes		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Kristin A. Rognes

Printed name of licensee

Brittney Frederick
Notary Public
State of Florida
My Commission Expires 6/21/2020
Commission No. GG 4181

Notary Public in and for the State of ~~Alaska~~ Florida

My commission expires: 06/21/2020

Subscribed and sworn to before me this 25 day of June, 2019.

AMCO
JUL 22 2019

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Licensee:	Great Northern Retail Stores, Inc.	**License Number:**	20366		
License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Jeff R. Rognes		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Jeff R. Rognes

Printed name of licensee

Brittney Frederick
Notary Public
State of Florida
My Commission Expires 6/21/2020
Commission No. GG 4181

Notary Public in and for the State of ~~Alaska~~ Florida

My commission expires: Jul 21 2020

Subscribed and sworn to before me this 25 day of January, 20 19.

AMCO
JUL 22 2019

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550 W 7th Avenue, Suite 1600
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Phone: 907.269.0350

ALCOHOL & MARIJUANA AMCO CONTROL OFFICE

Alaska Marijuana Control Board

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This form must be completed and submitted to AMCO's main office <u>by each proposed licensee</u> before any license application will be considered complete.

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Licensee:	Great Northern Retail Stores, Inc.	**License Number:**	20366		
License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Victor R. Rodriguez		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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ALCOHOL & MARIJUANA AMCO CONTROL OFFICE

Alaska Marijuana Control Board

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Section 3 – Certifications

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Victor R. Rodriguez

Printed name of licensee

STATE OF ALASKA NOTARY PUBLIC KELLI JACKSON My Commission Expires Nov 11, 2020

Kelli Jackson

Notary Public in and for the State of Alaska

My commission expires: 11/11/20

Subscribed and sworn to before me this 16th day of January, 2019.

AMCO
JUL 22 2019

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License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Victoria L. Rhoades		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Victoria L. Rhoades
Signature of licensee

Victoria L. Rhoades
Printed name of licensee

NOTARY PUBLIC STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: 12/7/2021

Subscribed and sworn to before me this 25th day of Jan, 20 19.

AMCO
JUL 22 2019

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License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Brian C. Pike		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Brian C. Pike

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 11/19/2022

Subscribed and sworn to before me this 25 day of January, 2019.

STATE OF ALASKA
NOTARY PUBLIC
Michael Cassel
My Commission Expires November 19, 2022

AMCO
JUL 22 2019

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Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Jacklyn Oney		
Title:	Shareholder (GNCI)		
SSN:	[redacted]	**Date of Birth:**	[redacted]

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Jackie Olney
Printed name of licensee

JOSE L. ROMERO II
My Commission Expires
NOTARY PUBLIC
March 10, 2019
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: March 10, 2019

Subscribed and sworn to before me this 25th day of September, 2018.

AMCO
JUL 22 2019

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ALCOHOL & MARIJUANA AMCO CONTROL OFFICE

Alaska Marijuana Control Board

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License Type:	Retail Marijuana Store				
Doing Business As:	Great Northern Cannabis				
Premises Address:	2600 E. Tudor Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99507-1134

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Murder Lake, LLC		
Title:	Great Northern Cannabis, Inc. Shareholder		
SSN:	AK Entity #10059404	**Date of Birth:**	Est. 5/19/2017

AMCO
JUL 22 2019

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Michael Ellenburg
Printed name of licensee

ANNA TISHINA NOTARY PUBLIC STATE OF ALASKA My Commission Expires: May 1, 21

Notary Public in and for the State of Alaska

My commission expires: May 1, 21

Subscribed and sworn to before me this 30th day of Jan., 2019.

AMCO
JUL 22 2019