Notice of Violation

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records Act AS 40.25

Date:	License #/Type:
Designated Licensee:	AMCO Case#:
DBA:	
Premises Address:	
Mailing Address:	
This is a notice to you as licensee that an alleged vicense, under the provisions of AS 44.62.330 - AS Notice of your right to an Administrative Hearing.	violation has occurred. If the Marijuana Control Board decides to act against your 44.62.630 (Administrative Procedures Act) you will receive an Accusation and
Note: This is not an accusation or a criminal complaint.	
2 AAC 206 905 provides that upon receipt of a Natice of	of Violation, a licensee may request to appear before the board and be heard regarding the
Notice of Violation. The request must be made within the Notice.	ten days after receipt of the Notice. A licensee may respond, either orally or in writing, to
IT IS RECOMMENDED THAT YOU RESPOND IN WRIT	ING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.
*Please send your response to the address your response.	below and include your Marijuana Establishment License Number in
Alcohol & Marijuana Control Office	
ATTN: Enforcement	
550 W. 7 th Ave, Suite 1600 Anchorage, Alaska 99501	
amco.enforcement@alaska.gov	
Issuing Investigator:	Received by:
SIGNATURE:	SIGNATURE:

Date:

Delivered VIA:

Notice of Violation

Email

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records Act AS 40.25

Date: 4/2/19 License #/Type: 10073 Standard Cultivation

Designated Licensee: Linden Anson AMCO Case#:

DBA: Alaskan Blooms LLC

Premises Address: 2448 Arvilla St. Building A, B & C, Fairbanks, AK 99709

Mailing Address: 2406 Statehood St, North Pole, AK 99705

This is a notice to you as licensee that an alleged violation has occurred. If the Marijuana Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

As of 4/2/19, Alaskan Blooms LLC, #10073, Standard Cultivation, you were delinquent on your marijuana excise tax liability.

You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation will be brought to the Marijuana Control Board.

Your attention is directed to: AS 17.38.010(b)(2) legitimate, taxpaying business people, and not criminal actors, will conduct sales of marijuana; 3 AAC 306.480. Marijuana tax to be paid; 3 AAC 306.810. Suspension or revocation of license; AS 43.61.030(b). Marijuana cultivation facility fails to pay tax; AS 43.05.230(e) DOR can publish list of taxpayer(s) who failed to pay their taxes.; 15 AAC 61.020. License revocation and suspension.

3 AAC 306.805 provides that upon receipt of a Notice of Violation, a licensee may request to appear before the board and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice. A licensee may respond, either orally or in writing, to the Notice.

IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.

*Please send your response to the address below and include your Marijuana Establishment License Number in your response.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7th Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov

Issuing Investigator: J. Hoelscher Received by:

SIGNATURE: SIGNATURE:

Delivered VIA: Email Date:

 From:
 Alaskan Blooms

 To:
 Davies, Jason M (CED)

Subject: Re: NOV Delinquency in Tax 10073

Date: Tuesday, April 30, 2019 9:38:07 AM

Attachments: <u>image001.png</u>

Hello Mr. Davies,

We have cleared up our January taxes with the DOR. They have said they have no formal "paper" they send to you? Please let me know what I can provide o clear this NOV. Thank you,

Karen Lowry

~Alaskan Blooms~

On Tue, Apr 2, 2019 at 1:13 PM Davies, Jason M (CED) < <u>iason.davies@alaska.gov</u>> wrote:

Karen,

Please reply back with a confirmation from DoR that you have paid it in full. I will add that confirmation to your notice of violation.

Thank you,

Jason M Davies - Criminal Justice Tech I

AMCO/ENFORCEMENT

jason.davies@alaska.gov

907-754-3410

From: Alaskan Blooms [mailto:alaskanblooms@gmail.com]

Sent: Tuesday, April 2, 2019 1:11 PM

To: Davies, Jason M (CED) < <u>iason.davies@alaska.gov</u>>

Subject: Re: NOV Delinquency in Tax 10073

Hello,

We made a partial payment yesterday to this account and will be paying it in full immediately. Do we need to respond to any other entity at this point? We spoke with the DOR yesterday as well. Please advise. Thank you,

Karen

~Alaskan Blooms~

On Tue, Apr 2, 2019 at 1:00 PM Davies, Jason M (CED) < <u>jason.davies@alaska.gov</u>> wrote:

Hello-

Please see attached notice of violation.

Thank you,



Jason M. Davies Criminal Justice Technician I

AMCO Enforcement Alcohol & Marijuana Control Office 550 W. 7th Ave, Suite 1600

Anchorage, AK 99501 Office (907) 754-3410 jason.davies@alaska.gov

Alcohol & Marijuana Control Office

License Number: 10073

License Status: Active-Operating

License Type: Standard Marijuana Cultivation Facility

Doing Business As: ALASKAN BLOOMS, LLC

Business License Number: 1030620

Designated Licensee: Linden Anson

Email Address: alaskanblooms@gmail.com Local Government: Fairbanks North Star Borough

Community Council:

Latitude, Longitude: 68.484200, -147.464800

Physical Address: 2448 Arvilla St.

Building A, B & C Fairbanks, AK 99709 UNITED STATES

Licensee #1

Type: Entity

Alaska Entity Number: 10034485

Alaska Entity Name: Alaskan Blooms, LLC

Phone Number: 907-987-1010

Email Address: alaskanblooms@gmail.com

Mailing Address: 2448 Arvilla St.

Fairbanks, AK 99709 UNITED STATES

Entity Official #1

Type: Individual

Name: Gene Bloom

SSN:

Date of Birth:

Phone Number: 907-322-5830

Email Address: alaskanblooms@gmail.com

Mailing Address: 2451 Standard Ave

Entity Official #3

Type: Individual

Name: Karen Lowry

Fairbanks, AK 99709 **UNITED STATES**

Entity Official #2

Type: Individual

Name: Linden Anson

SSN:

Date of Birth:

Phone Number: 907-888-5777

Email Address: alaskanblooms@gmail.com

Mailing Address: 2406 Statehood St.

North Pole, AK 99705 **UNITED STATES**

Date of Birth:

Phone Number: 916-203-2046

SSN:

Email Address: lowrykm65@gmail.com

Mailing Address: 2406 Statehood St.

North Pole, AK 99705

UNITED STATES

Note: No affiliates entered for this license.



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

Form MJ-20: Renewal Application Certifications

What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. 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).

Section 1 - Establishment Information

This form must be completed and submitted to AMCO's main office <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Enter information for the	icensed establishment, as identified on the license application.		
Licensee:	Alaskan Blooms LC License No	umber: UA - 1	0072
License Type:	Standard Cultivation	•	
Doing Business As:	Alaskan Poloroms Lie		
Premises Address:	2448 Arvilla St. Build	lings a b	9C
City:	Fairbancs State:	AL ZIP: 9	3700
Enter information for the i	Section 2 – Individual Information ndividual licensee who is completing this form.		
Name:	Ampld Bloom NKA	Svene Ble	779-11
Title:	Owner		
Read each line below, and	Section 3 – Violations & Charges then sign your initials in the box to the right of any applicable staten	nents:	Initials
certify that I have not bed	en convicted of any criminal charge in the previous two calendar years.		6B
certify that I have not cor	nmitted any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previ	ous two calendar years.	B
certify that a notice of vic	lation has not been issued for this license.		
ign your initials to the fo	lowing statement only if you are unable to certify one or more of the	above statements:	Initials
	explanation for why I cannot certify one or more of the above statem ense, as required under 3 AAC 306.035(b).	ents, which includes	and some fines to provide the second second
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Section 4 - Certifications

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

Initials

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



I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.



I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.



As an applicant for a marijuana establishment license renewal, 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 application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

stary Public in and for the State of Alaska

Printed name of licensee

My commission expires: JWE 11, 2023

Subscribed and sworn to before me this 14 day of August, 2011.

Notary Public
KLARA MICHELLE KAUTZ
State of Alaska
My Commission Expires June 11, 2023



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

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This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

	Section 1 – Establishment Information	
MENG	ensed establishment, as identified on the license application.	_
Licensee:	Musican Booms Wa License Number: 44-100	73
License Type:	Standard Cultivation	3
Doing Business As:	Alaskan Blooms, LLC	
Premises Address:	2448 Arvilla St. Ab; C (Buildings)	
City:	Fairbanks, State: AK ZIP: 99	709
	Section 2 – Individual Information	
Enter information for the in	dividual licensee who is completing this form.	
Name:	Kaven Louin	
Title:	Owner	
	Section 3 – Violations & Charges	
Read each line below, and t	then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have not beer	convicted of any criminal charge in the previous two calendar years.	W
I certify that I have not com	mitted any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	TW
certify that a notice of viola	ation has not been issued for this license.	
Sign your initials to the follo	owing statement only if you are unable to certify one or more of the above statements:	Initials
	Explanation for why I cannot certify one or more of the above statements, which includes nse, as required under 3 AAC 306.035(b).	

[Form MJ-20] (rev 4/24/2019)

Section 4 - Certifications

Read each line below, and then sign your initials in the box to the right of each statement: Initials I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued. I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application. I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state. I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board. I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued. As an applicant for a marijuana establishment license renewal, 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 application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license. Notary Public in and for the State of Alaska My commission expires: JUNE 11, 2019 Subscribed and sworn to before me this 14 day of AuguST **Notary Public**

Notary Public
KLARA MICHELLE KAUTZ
State of Alaska
My Commission Expires June 11, 2023

[Form MJ-20] (rev 4/24/2019)

License # 44 - 10075



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

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This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

	Section 1 – Establishment Information	
Enter information for the l	icensed establishment, as identified on the license application.	
Licensee:	Alaskan Blooms LC License Number: 1/2 A 100	073
License Type:	Standard Guetivation	
Doing Business As:	Alaskey Bloom LLd	
Premises Address:	2448 Arvilla St. Buildings A.B.	C
City:	Fairbanies State: Ak ZIP: 0	19700
	Section 2 – Individual Information	
Enter information for the i	ndividual licensee who is completing this form.	
Name:	Linden Anson	
Title:	Owner	
Read each line below, and	Section 3 – Violations & Charges I then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have not bed	en convicted of any criminal charge in the previous two calendar years.	4A
I certify that I have not cor	nmitted any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	LA
I certify that a notice of vio	plation has not been issued for this license.	
Sign your initials to the fo	llowing statement only if you are unable to certify one or more of the above statements:	Initials
	explanation for why I cannot certify one or more of the above statements, which includes tense, as required under 3 AAC 306.035(b).	
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Form MJ-20: Renewal Application Certifications

Section 4 – Certifications

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

Initials

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



I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.



I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.



As an applicant for a marijuana establishment license renewal, 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 application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

tary Public in and for the State of Alaska

My commission expires: JUNE 11, 2023

Subscribed and sworn to before me this 19 day of Aucust

Notary Public KLARA MICHELLE KAUTZ State of Alaska

ly Commission Expires June 11, 2023