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: 5/7/19

Licensee: Parallel 64 LLC

DBA: Parallel 64 LLC

License #/Type: 10174 Standard Marijuana Cultivation Facilities Address: 2128 N Post Road, Anchorage, AK 99504 AMCO Case #: AM1900709

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

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

On May 3, 2019 at approximately 0712 hours, Fairbanks Airport Police came in contact with transporter Anwar Amar-Rogers whom was transporting product from Parallel 64 LLC in Anchorage to Good Titrations and Natures Releaf in Fairbanks via RAVN Air. (METRC Manifests #737008 and #736912). A RAVN Air employee smelled a strong odor of marijuana coming from a blue tote in checked luggage coming off the aircraft in Fairbanks resulting in the Fairbanks Airport Police being contacted to respond. Fairbanks Airport Police found the tote was in fact checked into checked luggage in Anchorage and only secured with 3 zip ties and one pad lock in holes drilled into the top of the tote. The top of the tote had a label stating the tote belonged to "State of Alaska c/o Anwar Amar". The tote did or does not belong to the State of Alaska and the labeling of the tote is misleading to the Airlines Carrier. The transporter and/or licensee does not have the permission of the State of Alaska to transport Marijuana on a Commercial Aircraft under false pretenses the product belongs to the State of Alaska. Custody of the product(s) was not maintained by the transporter at all times as required.

This is a violation of: 3 AAC 306.750 (a) & (b) Transportation

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 of Violation. A licensee may respond, either orally or in writing to the Notice. 3 AAC 306.810 (2)(A)(B)(C) failed, within a reasonable time after receiving a notice of violation, to correct any defect that is the subject of the notice of violation of AS 17.8 or this chapter. 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 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: A. Stonecipher

SIGNATURE:

Delivered VIA: Email

updated 4/23/19

Received by:	A
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SIGNATUR

Date:



205 E Dimond Blvd. #464 ANCHORAGE, AK 99515

May 7, 2019

This letter is in response to NOV dated 5-7-19 from the Alcohol and Marijuana Control Office regarding violation of 3 AAC 306.750 (a) and (b).

While fulfilling an order for delivery, we found that not all product was able to accompany the carry on and a decision was made to place some product in a blue tote. While the tote was secured using irreversible zip ties in 3 of the 4 corners. A lock on the 4th corner was used and there were two additional locks underneath at opposing handles not shown. We assumed that accompanying the product in flight, under the secure container would suffice.

The labeling attached to the tote was for transparency as the contents are governed under AMCO with the State of Alaska and had all accompanying METRC paperwork and in no way was a form of trying to mislead anybody.

This was a first and last-minute decision to transport in this manner and we will take necessary steps to prevent an occurrence from happening again in the future.

Thank You,

Anwar Amar-Rogers

President

Alcohol & Marijuana Control Office

License Number: 10174

License Status:Active-OperatingLicense Type:Standard Marijuana Cultivation FacilityDoing Business As:PARALLEL 64 LLCBusiness License Number:1028839Designated Licensee:Travis JonesEmail Address:Travis@parallel64.netLocal Government:Anchorage (Municipality of)Community Council:Government HillLatitude, Longitude:2128 N Post Road
Anchorage, AK 99504
UNITED STATES

Licensee #1

Type: Entity

Alaska Entity Number: 10033643

Alaska Entity Name: Parallel 64 llc

Phone Number: 907-342-5334

Email Address: travis@parallel64.net

Mailing Address: 205 E. Dimond Blvd. #464 Anchorage, AK 99515 UNITED STATES

Entity Official #2

Type: Individual

Name: Anwar Amar-Rogers

Phone Number: 907-229-0088

Email Address: anwar.amar@parallel64.com

Mailing Address: 205 E. Dimond Blvd. # 438 Anchorage , AK 99515 UNITED STATES

Entity Official #4

Type: Individual

Name: Stephen Garcia



Phone Number: 907-440-7206

Email Address: steve@parallel64.net

Mailing Address: 7335 Barefoot Circle Anchorage, AK 99502 UNITED STATES

Entity Official #1

Type: Individual Name: Travis Jones

Phone Number: 907-342-5334

Email Address: travis@parallel64.net

Mailing Address: 225. Adam Circle Palmer, AK 99645 UNITED STATES

Entity Official #3

Type: Individual

Name: Dimitri Amar

Phone Number: 907-230-0355

Email Address: dimitri@parallel64.net

Mailing Address: 7100 Burlwood Drive Anchorage, AK 99507 UNITED STATES

Note: No affiliates entered for this license.

License #10174 Initiating License Application 5/1/2019 10:14:12 AM



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

Alaska Marijuana Control Board 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).

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.

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Parallel 64, LLC	License	Number:	10174	ļ
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Parallel 64, LLC				
Premises Address:	2128 North Post Road				
City:	Anchorage	State:	AK	ZIP:	99504

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Anwar Amar-Rogers
Title:	President

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have not been convicted of any criminal charge in the previous two calendar years.	A -
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	AM -
I certify that a notice of violation has not been issued for this license.	
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	e -
[Form MJ-20] (rev 4/24/2019)	Page 1 of 2



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.	R -
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.	R, -
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.	Ē -
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.	A -

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

ANWAR AMAR- ROHERS

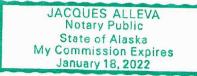
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 0/

Subscribed and sworn to before me this 24 day of June

2019 .



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

License # 10174

Page 2 of 2



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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	licensed establishment, as identified on the license application.
Licensee:	Parallel 6d 11C License Number: 10171
License Type:	Starlag Mariano Culture 114
Doing Business As:	Parailled the un
Premises Address:	212\$ M: 125 + 2
City:	Anchorese State: AL ZIP: Qard
	Section 2 - Individual Informati

al information

Enter information for the individual licensee who is completing this form

Name:		
	Dimite. Amor	
Title:	(FD)	

Section 3 – Violations & Charges	
Read each line below, and then sign your initials in the box to the right of any applicable statements:	
	Initials
I certify that I have not been convicted of any criminal charge in the previous two calendar years.	2A
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	2A-
I certify that a notice of violation has not been issued for this license.	
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Burgersteinungenen
have attached a written available in the second of the above statements:	Initials
have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	BA
[Form MJ-20] (rev 4/24/2019)	
	Page 1 of 2



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 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

Printed name of licensee



Notary Public in and for the State of Alaska

My commission expires:

Subscribed and sworn to before me this day

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

License #____

Page 2 of 2



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> 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 <u>by each licensee</u> (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 licensed establishment, as identified on the license application.

Licensee:	Parallel 64, LLC	Licenso	e Number:	1017	· A
License Type:	Standard Marijuana Cultivation Facil	a second s		1017	4
Doing Business As:	Parallel 64, LLC	ity			
Premises Address:	2128 North Post Road				
City:	Anchorage	State:	AK	ZIP:	99504
		1			199004

Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Travis Jones	
Title:	Vice President	

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements:	
I certify that I have not been convicted in f	Initials
I certify that I have not been convicted of any criminal charge in the previous two calendar years.	
certify that I have not committed and the second seco	KMS
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	
I certify that a notice of violation has not been issued for this license.	Knis
this license.	
Sign your initials to the following statement of the	
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a written explanation for why Leave the second seco	
the type of violation or offense, as required under 3 AAC 306.035(b). [Form MJ-20] (rev 4/24/2019)	TIM
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Page 1 of 2



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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.	(IN)

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.

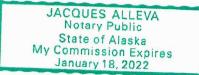
gnature of licensee

Alla Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 01/18/2020-

Subscribed and sworn to before me this 27 day of June



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

License # 10174

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Alaska Marijuana Control Board

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License Type:	Standard Marijuana Cultivation Faci	1		1017	4
Doing Business As:	Parallel 64, LLC				-
Premises Address:	2128 North Post Road				
City:	Anchorage	State:	AK	ZIP:	99504

Section 2 - Individual Information

Enter information for the in	ndividual licensee who is completing this form.	
Name:	Stephen Garcia	
Title:	Operations Manager	

Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements:	
	Initials
I certify that I have not been convicted of any criminal charge in the previous two calendar years.	G t
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	120
, and the previous two calendar years.	CZ*
I certify that a notice of violation has not been issued for this license.	20
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	<u>[]</u>
I have attached a written explanation for which is a second statements:	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	A A
[Form MJ-20] (rev 4/24/2019)	LY
	Page 1 of 2



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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.

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Initials

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, a substant deation at these for expiration of this license.	

Signature of licensee

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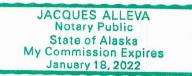
tephin Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 0

Subscribed and sworn to before me this 27 day of June

2019



License # 10174