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

Alaska Marijuana Control Board

Form MJ-15: Operating Plan Change

What is this form?

This operating plan change form is required for all marijuana establishment licensees seeking to change a licensed marijuana establishment's existing operating plan, as required by 3 AAC 306.100. With this form, a licensee may request changes to as much or as little as desired of Form MJ-01 and/or the corresponding operating plan supplemental for the establishment's license type. **The required $250 change fee may be made by check, cashier's check, or money order.**

Please complete and submit with this form the pages of Form MJ-01 and/or the corresponding operating plan supplemental that contain sections that you are requesting to change. **All fields must be completed of any page for which you are requesting changes** – upon board approval, the submitted pages will replace those currently on file. If your current, approved operating plan is on the original version of the forms, you may be required to complete and submit the new operating plan forms in their entirety.

The form(s) that I am requesting board approval to change is:

- ☐ **Form MJ-01:** Marijuana Establishment Operating Plan
- ☐ **Form MJ-03:** Retail Marijuana Store Operating Plan Supplemental
- ☐ **Form MJ-04:** Marijuana Cultivation Facility Operating Plan Supplemental
- ☑ **Form MJ-05:** Marijuana Product Manufacturing Facility Operating Plan Supplemental
- ☐ **Form MJ-06:** Marijuana Testing Facility Operating Plan Supplemental

This form must be completed and submitted to AMCO's main office prior to changing existing operations. The licensed establishment's operations may not be altered unless and until the director has given temporary approval or the Marijuana Control Board (MCB) has given final approval of the changes. Please note that licensees seeking to change operating plans for multiple licenses must submit a separate completed copy of this form for each license.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Axion Enterprises, LLC	**MJ License #:**			12769
License Type:	Marijuana Product Manufacturing Facility				
Doing Business As:	Secret Garden Cannabis				
Premises Address:	726 E. 15th Avenue, Suite 2				
City:	Anchorage	**State:**	Alaska	**ZIP:**	99501

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Section 2 – Summary of Changes

Provide a summary of the changes for which you are requesting approval.

Secret Garden would like to update:
Garden Gummies to include a flavor variety pack and update labels
Cotton Mouth Candy to include new ingredients, flavors, flavor variety pack, product description, update product photo, update packaging photos and packaging amounts.
Pot Brownies to include updated ingredients list (addition of pan spray (non allergen)), update packaging label and remove clear plastic container option.
THC Truffles to update ingredients (addition of pan spray (non allergen))
Chocolate Ganja Bars to include updated ingredients list (addition of pan spray (non allergen)) and update packaging label.
Comfort Caramels to include updated ingredients list (addition of pan spray (non allergen))

Secret Garden would also like to update the ingredients of the following products to add a pan spray (non allergen), update C02 concentrate options used in production and remove clear plastic container from packaging options; Blitz KrAKers, Chronic Crisps, Dill and Chill KrAKers, EZ Bakes and High Fives

Section 3 – Declarations

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

The proposed changes conform to all applicable public health, fire, and safety laws. JT

I understand that any temporary approval granted by the director is pending a final decision by the MCB; therefore, any investment I make, based upon temporary approval, is at my own risk. JT

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

Signature of licensee

James M.P Thornton

Printed name of licensee

STATE OF ALASKA
NOTARY PUBLIC
Mercedes Curran
My Commission Expires Dec 20, 2023

Notary Public in and for the State of Alaska.

My commission expires: 12/20/2023

Subscribed and sworn to before me this 11th day of March, 2021.

AMCO Director Review for Temporary Approval Pending Final MCB Decision: Approved [X] Disapproved [ ]

Glen Klinkhart

Printed name of Director

09/24/2021

Date

Signature of Director

Director Comments:

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