



Public Notice

Application for Marijuana Establishment License

License Number: 10152

License Status: Initiated

License Type: Retail Marijuana Store

Doing Business As: ALASKA NATURAL WAY INC

Business License Number: 1033102

Email Address: agalot@gmail.com

Latitude, Longitude: 61.105196, -149.533691

Physical Address: 521 W. Tudor Road, Unit 201
Anchorage, AK 99503
UNITED STATES

Owner #1

Owner Type: Entity

Alaska Entity Number: 10036252

Alaska Entity Name: ALASKA NATURAL WAY INC

Phone Number: 4015238828

Email Address: agalot@gmail.com

Mailing Address: 2617 Frigate Circle
Anchorage, AK 99515
UNITED STATES

Affiliate #1

Owner Type: Individual

Name: Amihay Cohen

Date of Birth: 10/16/1981

Phone Number: 4015238828

Email Address: agalot@gmail.com

Mailing Address: 2617 Frigate Circle
Anchorage, AK 99515
UNITED STATES

Interested persons should submit written comment or objection to their local government, the applicant, and to the Alcohol & Marijuana Control Office at 550 W 7th Ave, Suite 1600, Anchorage, AK 99501 or to marijuana.licensing@alaska.gov not later than 30 days after this notice of application.

POSTING DATE _____