



Medical Marijuana Dispensary License Application

Department of Health, Office of Health Care Assurance

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Criteria 1. Ability to operate a business, including but not limited to education, knowledge, and experience

Criteria 2. Plan for operating a medical marijuana dispensary in the county for which the applicant is seeking a license, including but not limited to a timeline for opening a retail dispensing location

Criteria 3. Proof of financial stability and access to financial resources

Criteria 4. Ability to comply with the security requirements of this chapter and section 329D-7, HRS

Criteria 5. Capacity to meet the needs of qualifying patients

Criteria 6. Ability to comply with criminal background check requirements pursuant to this chapter and sections 329D-7, 329D-12, and 846-2.7, HRS

Criteria 7. Ability to comply with the requirements in this chapter and chapters 329 and 329D, HRS, for inventory tracking, security, and dispensing limits for qualifying patients

Criteria 8. Ability to maintain confidentiality of a qualifying patient's medical condition, health status, and purchases of marijuana or manufactured marijuana products

Criteria 9. Ability to conduct or contract for certified laboratory testing on marijuana and manufactured marijuana products pursuant to this chapter and sections 329D-7 and 329D-8, HRS

Criteria 10. Ability to comply with requirements for packaging, labeling, and chain of custody of products

Criteria 11. A plan for secure disposal of marijuana and manufactured marijuana products

Criteria 12. Ability to ensure product safety, in accordance with this chapter and sections 329D-8, 329D-10, 329D-11, HRS

Criteria 13. No history of having a business license revoked.

Total Merit Criteria Points Awarded to Applicant

HELPFUL INFORMATION FOR FILLING OUT THIS FORM:

1. You can save your work on this form by checking the 'Save my progress and resume later' box and then clicking the 'Save form and resume later' button. **IMPORTANT: Remember to do this every time you leave your application or you will lose the information you have entered.**

2. To keep your information secure, remember to log out of your application each time you finish working on it.

3. Use a current version of Google Chrome or Firefox browser when completing this form.

4. Save the form every 20 minutes to avoid timing out. When entering information in a spreadsheet, save and exit the form first.

5. Do not include single or double quote marks (' or ") or more than one period (.) in your document names.

INSTRUCTIONS FOR THE MEDICAL MARIJUANA DISPENSARY LICENSE APPLICATION

Before applying for a medical marijuana dispensary license, applicants must acknowledge that they have read the statute and administrative rules on medical marijuana. Applicants will be redirected to the statute and administrative rules.

Hawaii Revised Statute (HRS) 329D

✓ I acknowledge that I have read [Chapter 329D, HRS \(http://health.hawaii.gov/m-329D-HRS.pdf\)](http://health.hawaii.gov/m-329D-HRS.pdf), and I am aware of the application and licensing requirements.

Hawaii Administrative Rules (HAR) Chapter 11-850

✓ I acknowledge that I have read [HAR Chapter 11-850 \(http://health.hawaii.gov/content/blogs.dir/93/files/2015/12/Dispensary-Rules-Chapter-11-850-signed-by-licensing-requirements\)](http://health.hawaii.gov/content/blogs.dir/93/files/2015/12/Dispensary-Rules-Chapter-11-850-signed-by-licensing-requirements).

Disclaimer:

✓ I understand that the use and possession of marijuana is illegal under federal law, and Chapters 329 and 329D, HRS.

MINIMUM REQUIREMENTS

All individual applicants and applying entities must meet the requirements listed below or the application will not be accepted. Applicants must attach proof sections.

INDIVIDUAL APPLICANT

- * Individual applicant shall be at least 21 years old.
- * Shall be a legal resident of the State of Hawaii for at least five (5) uninterrupted years immediately preceding the date of the license application.
- * Shall not have any felony convictions or any other disqualifying background history.
- * Shall be authorized by the applying entity to submit an application for a dispensary license, and act as the primary point of contact with the department.

APPLYING ENTITY

- * The applying entity must be organized under the laws of the State of Hawaii.
- * Have a Hawaii tax identification number.
- * Have a Department of Commerce and Consumer Affairs Business Registration Division number and suffix.
- * Have a federal employer identification number.
- * Not be less than fifty-one percent held by Hawaii legal residents or entities wholly controlled by Hawaii legal residents who have been legal residents for no application was submitted.
- * Have financial resources under its control of not less than \$1,000,000 for each license applied for, plus not less than \$100,000 for each retail dispensing location bank statements or escrow accounts, and those financial resources shall have been under the control of the applying entity for not less than ninety days immediately preceding the application.
- * Be composed of owners, principals, or members, each of whom is not less than twenty-one years of age and has no felony convictions or any other disqualifying background history.

APPLICATION FEE

The license application fee of \$5,000 by certified check or cashier's check payable to the State of Hawaii, Department of Health, is part of the minimum required for Medical Marijuana Dispensary Licensing, Room 337, 601 Kamokila Blvd., Kapolei, HI 96707 or be postmarked by 4:30 pm Hawaii Standard Time on the last day of the month.

Please note the application number on the check. This is found in the heading of the email confirmation you receive upon submittal, and is also visible where the check is processed.

NOTE: ALL QUESTIONS MUST BE ANSWERED TO SUBMIT YOUR APPLICATION UNLESS OTHERWISE INDICATED.

SECTION A: APPLICATION FOR COUNTY

NOTE: An applicant may apply for a license for more than one county, but may only receive one license. Indicating here that you are applying for a license for a license in another county; separate applications must be submitted. The applicant and applying entity must complete a separate application with all required refundable application fee of \$5,000 for each application. The financial resources required (\$1,000,000 plus not less than \$100,000 for each retail dispensing location) only apply toward one license, if granted.

1. For which county are you requesting a license? County of Kauai

2. Are you also applying for a dispensary license in another county? No

2a. If YES, what other county or counties are you applying for a license?
(NOTE: A separate application and check will be required for each county.)

SECTION B: INDIVIDUAL APPLICANT INFORMATION**GENERAL INFORMATION**

3. Legal Name of Applicant Mr. Justin Robert Britt

4. Upload Proof of Legal Name of Applicant

Scan and submit a certified copy of AT LEAST ONE (1) of the following:

- * Certified copy of a birth certificate or marriage certificate filed with a state office of vital statistics or equivalent agency in the individual's state of birth or marriage;
- * Valid, unexpired U.S. passport [inside cover and first page only] or U.S. passport card;
- * Consular report of birth abroad Form FS-240, DS-1350 or FS-545 issued by the U.S. Department of State;
- * Valid, unexpired permanent resident card (Form I-551) issued by the Department of Homeland Security (DHS) or the U.S. Citizenship and Immigration Services (USCIS);
- * Unexpired employment authorization document issued by the DHS, Form I-766 or Form I-688B;
- * Unexpired foreign passport with the following: a valid, unexpired U.S. visa affixed, and an approved I-94 form documenting the applicant's most recent admittance into the United States or a DHS admittance stamp on the passport;
- * Certified copy of the Certificate of Naturalization issued by DHS, Form N-550 or Form N-570;
- * Certificate of citizenship, Form N-560 or Form N-561, issued by DHS;
- * Court-issued, certified copy of a divorce decree;
- * Certified copy of a legal change of name order

Justin_Britt_Passport.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/doc/Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTA4Jmhhc2g9Zjg

5. Date of Birth (must be at least 21 years old)**6. Upload Proof of Date of Birth of Applicant**

Scan and submit a certified copy of AT LEAST ONE (1) of the following:

- * Certified copy of a birth certificate or marriage certificate filed with a state office of vital statistics or equivalent agency in the individual's state of birth or marriage;
- * Valid, unexpired U.S. passport [inside cover and first page only] or U.S. passport card;
- * Consular report of birth abroad Form FS-240, DS-1350 or FS-545 issued by the U.S. Department of State;
- * Valid, unexpired permanent resident card (Form I-551) issued by the Department of Homeland Security (DHS) or the U.S. Citizenship and Immigration Services (USCIS);
- * Unexpired employment authorization document issued by the DHS, Form I-766 or Form I-688B;
- * Unexpired foreign passport with the following: a valid, unexpired U.S. visa affixed, and an approved I-94 form documenting the applicant's most recent admittance into the United States or a DHS admittance stamp on the passport;
- * Certificate of naturalization issued by DHS, Form N-550 or Form N-570;
- * Certificate of citizenship, Form N-560 or Form N-561, issued by DHS;
- * Valid, unexpired driver's license or government issued photo identification card.

Justin_Britt_Passport.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/doc/Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfODAmGFzaD04Yr

7. Social Security No. or Identifier No. (last 4 digits only):**8. Applicant's Address****9. Daytime Phone No.****10. Fax No.****11. Email****CRIMINAL HISTORY INFORMATION**

12. Has the individual applicant ever been convicted of a felony? If YES, STOP, you are not an eligible applicant.

No

13. Has the individual applicant ever been convicted of a crime?

No

13a. If YES, please describe (e.g., conviction, date, disposition, etc.)

14. Has the individual applicant ever been arrested?

No

14a. If YES, please describe (e.g., date, disposition, etc.)

Obtain a Criminal History Report

Copy the Validation code from an eCrim report for the individual applicant generated by the Hawaii Criminal Justice Data Center no earlier than December 12, 2015 at 8:00 a.m. (Hawaii-Aleutian Standard Time).

Visit [eCrim.ehawaii.gov \(https://ecrim.ehawaii.gov/ahewa/\)](https://ecrim.ehawaii.gov/ahewa/) to obtain the eCrim report.

15. Enter the eCrim Validation Code here:

16. NOTICE: Pursuant to Chapter 329D HRS and Chapter 11-850 HAR, applicants are required to provide consent to a background check, including fingerprinting, to be conducted by the Department of Health or its designee.

☒ I consent

Further information and instructions will be provided on <http://health.hawaii.gov/medicalmarijuana/>. If the information and instructions are not yet posted, please check the website often.

RESIDENCY INFORMATION 17. Is the Applicant a legal resident of the State of Hawaii for at least five years? If NO, STOP, you are not an eligible applicant. Yes

18. Upload Proof of Hawaii Residency:

Scan and submit AT LEAST ONE (1) of the following source documents as proof of Hawaii state residency for at least five years:

- * State of Hawaii tax return Form N-11 without schedules, worksheets, or attachments, and redacted to remove all financial information and all but the last four digits of the individual's social security number;
- * Evidence of voter registration;
- * Ownership, lease, or rental documents for place of primary domicile;
- * Billing statements including utility bills; or
- * Vehicle registration.

Justin_Britt_Proof_of_HI_Residency_(N-11_Forms).pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVhZW1lbnRfMTcmaGFzaD04Nj>)

19. Authorized to Act on Behalf of Applying Entity

Scan and submit evidence of the authority of the individual to act on behalf of the applying entity, and supporting documentation (e.g. corporate resolution, bylaws, articles of incorporation):

Green_Aloha_Justin_Britt_Authorization_to_Act_on_Behalf_of_Applying_Entity. (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVhZW1lbnRfODYmaGFzaD05Oj>)

SECTION C: APPLYING ENTITY INFORMATION

20. Name of Applying Entity

Green Aloha, Ltd.

21. Applying Entity's Business Address

22. Entity Phone #

23. Entity Email

24. Entity Fax #

25. Is the applying entity organized under the laws of the State of Hawaii? If the answer is 'NO', STOP, you are not an eligible applicant.

☒ Yes

26. Upload Applying Entity Incorporation or Business Status Documentation:

Upload a certified copy of applying entity's incorporation documents in the State of Hawaii.


Green_Aloha_State_of_Hawaii_Incorporation_Documents_(Articles_of_Incorporation_and_Amended_and_Restated_Articles_of_Incorporation) (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVhZW1lbnRfMTcmaGFzaD00Mj>)

Visit [Hawaii Business Express \(https://hbe.ehawaii.gov/documents/search.html\)](https://hbe.ehawaii.gov/documents/search.html) for available documents.

27. Provide the entity's Hawaii Department of Commerce & Consumer Affairs Business Registration Division Number & Suffix (file number).

Visit [Hawaii Business Express - Business Name Search \(https://hbe.ehawaii.gov/documents/search.html\)](https://hbe.ehawaii.gov/documents/search.html) to locate your entity's file number.

28. Upload a copy of the entity's Certificate of Good Standing from the Department of Commerce and Consumer Affairs.

 Green_Aloha_Certificate_of_Good_Standing.pdf (<https://mmjdisp.ehawaii.gov/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfNjJmaGFzaD00OTI>)


29. Hawaii Tax Identification Number:

Provide the number along with a copy of the State of Hawaii Tax Identification Number (see question immediately below).



Visit [Tax ID Search \(https://dotax.ehawaii.gov/tls/app\)](https://dotax.ehawaii.gov/tls/app) for this information.


30. Upload a copy of the entity's State of Hawaii Tax Identification document.

 Green_Aloha_Hawaii_Tax_Identification_Documents_ (Department_of_Taxation_General_Excise_Tax_License_and_Tax_Clearance_Cert (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfNjJmaGFzaD04Zjh>)

31. Federal Employer Identification Number: Provide the Federal Employer Identification Number.



32. Upload a copy of the entity's Federal Employer Identification Number document.

 Green_Aloha_Federal_Employee_Identification_Number_Document.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfNjJmaGFzaD1mO>)

OWNER(S), PRINCIPAL(S), & MEMBER(S) INFORMATION

33. Enter the total number of Owner(s), Principal(s), and Member(s) of the applying entity here:

20

34. Upload Owner, Principal, and Member Information Spreadsheet

INSTRUCTIONS: Download the EXCEL spreadsheet below, enter the following information in the format required, and upload it to attach it to your application.

Information to be provided:


1) List of Owners, Principals, and Members of the Applying Entity

For each Owner, Principal, and Member of the Applying Entity:

- A) Name, Address, Phone number, and Email Address
- B) Each individual's percent interest in the company
- C) State of primary residence
- D) Number of years each person has lived in Hawaii (the most recent, uninterrupted number of years that the person has been a resident), and
- E) A criminal background check for each Owner, Principal, and Member.

Copy the validation code from an eCrim report for the individual generated by the Hawaii Criminal Justice Data Center no earlier than December 12, 2015 at 8:00 a.m. (Hawaii-Aleutian Standard Time).

Visit [eCrim.ehawaii.gov \(https://ecrim.ehawaii.gov/ahewa/\)](https://ecrim.ehawaii.gov/ahewa/) to obtain the eCrim report.

 Green_Aloha_Owner_Information_Spreadsheet.xls (<https://mmjdisp.ehawaii.gov/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTExJmhhc2g9ND>)

Please include a signed statement by each Owner, Principal, or Member certifying that the information is complete and accurate. Upload the signed statements in the following question (35.)

2) Other Businesses Holding an Interest

If there are businesses that hold an interest in the company, list the business names and percent interest on a separate tab on the spreadsheet.

[Download Owner Principal Member Information Spreadsheet \(/mmjdisp/templates/Owner_Principal_Member_Report.xls\)](#)

36. FINANCIAL RESOURCES GENERAL INFORMATION

INSTRUCTIONS: Download the EXCEL spreadsheet below, enter the following information in the format required, and upload it to attach it to your application.

Information to be provided:

1) Financial Resources the applying entity has under its control. List each financial resource, amount of the resource (round to nearest dollar, no cents), and verifying information (account type, account number, account name, name of financial institution, applicant contact information) as shown on the spreadsheet

[Green_Aloha_Financial_Resources_General.xls](https://mmjdisp.ehawaii.gov/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV) (https://mmjdisp.ehawaii.gov/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV)

2) Date Resource/Dollar amount under the applying entity's control

[Download Financial Resources General Information Spreadsheet \(/mmjdisp/templates/Financial_Resources_General.xls\)](https://mmjdisp.templates/Financial_Resources_General.xls)

Upload the completed Financial Resources General Information Spreadsheet

37. Upload Financial Resources General Information Supporting Source Documents

Upload supporting source documents, i.e. bank statements, escrow account information, balance sheets etc. Supporting source documents for Financial Resources General Information must be provided as proof of the financial resources.

[Green_Aloha_Proof_of_Finances.pdf](https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9Zn) (https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9Zn)

Document size limit is 10 MB. Up to 5 documents may be attached.

38. FINANCIAL RESOURCES - RETAIL DISPENSING LOCATION INFORMATION

INSTRUCTIONS: Download the EXCEL spreadsheet below, enter the following information in the format required, and upload it to attach it to your application.

Data to be provided:

1) Financial Resources the applying entity has under its control for each retail dispensing location allowed (2 locations maximum)

2) Dollar Amount (total aggregate for each retail dispensing location shall be not less than \$100,000, or \$200,000 for 2 locations)

[Green_Aloha_Financial_Resources_Retail_Dispensing_Location.xls](https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfNDU0MDE3Jmhhc2g9Zn) (https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfNDU0MDE3Jmhhc2g9Zn)

3) Date Resource/Dollar amount under the applying entity's control (resources have been under the Applying Entity's control for not less than 90 days)

[Download Financial Resources - Retail Dispensing Location Information Spreadsheet \(/mmjdisp/templates/Financial_Resources_Retail_Dispensing_Location.xls\)](https://mmjdisp.templates/Financial_Resources_Retail_Dispensing_Location.xls)

Upload the completed Financial Resources - Retail Dispensing Location Information Spreadsheet

39. Upload Retail Dispensary Location Supporting Source Documents

Upload supporting source documents, i.e. bank statements, escrow account information, balance sheets etc. Supporting source documents for retail dispensing locations must be provided as proof of the financial resources.

[Green_Aloha_Proof_of_Finances.pdf](https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV) (https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV)
[Green_Aloha_Retail_Facility_Lease_Agreement.pdf](https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV) (https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV)
[Green_Aloha_Production_Center_Letter_of_Intent_to_Lease.pdf](https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV) (https://mmjdisp.ehawaii.gov/mmjdisp/q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTMTM1Jmhhc2g9YzV)

Document size limit is 10 MB. Up to 5 documents may be attached.

SECTION E: MERIT INFORMATION - OPTIONAL

Responses for each criteria shall be no longer than specified for each criteria, double spaced, font size no smaller than 12, and margins no less than 1 inch

- (1) Ability to operate a business, including but not limited to education, knowledge, and experience with:
- (A) Regulated industries;
 - (B) Agriculture or horticulture;
 - (C) Commercial manufacturing;
 - (D) Pharmaceutical companies;
 - (E) Operating or working in a medical marijuana dispensary business;
 - (F) Creating and implementing a business plan, including a timeline for opening a business;
 - (G) Creating and implementing a financial plan;
 - (H) Retail sales;
 - (I) Secure inventory tracking and control;
 - (J) Protecting confidential customer information;
 - (K) Owning or managing a business that required twenty four hour security monitoring; and
 - (L) Any other experience the applicant considers relevant;

Green_Aloha_01_Ability_to_Operate_a_Business.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfODgmaGFzaD01M>)

Response to (1) shall be no longer than five (5) pages.

Upload Response to (1)

- (2) Plan for operating a medical marijuana dispensary in the county for which the applicant is seeking a license, including but not limited to a timeline for opening a retail dispensing location;

Green_Aloha_02_Operations_Plan_and_Timeline.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfODkmaGFzaD0xM>)

Response to (2) shall be no longer than five (5) pages.

Upload Response to (2)

- (3) Proof of financial stability and access to financial resources, including but not limited to:
- (A) Legal sources of finances immediately available to begin operating a dispensary;
 - (B) A summary of financial statements in businesses previously or currently owned or operated by the applicant;
 - (C) A financial plan for operating a medical marijuana dispensary in Hawaii;
 - (D) Good credit history; and
 - (E) History of bankruptcy by the applicant or entities owned or operated by the applicant;

Green_Aloha_03_Financial_Stability_and_Access_to_Financial_Resources.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTUmaGFzaD01YjI>)

Response to (3) shall be no longer than five (5) pages.

Upload Response to (3)

- (4) Ability to comply with the security requirements of Chapter 11-850 and Section 329D-7, HRS;

Green_Aloha_04_Security.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTQmaGFzaD01NV>)

Response to (4) shall be no longer than five (5) pages.

Upload Response to (4)

- (5) Capacity to meet the needs of qualifying patients, including but not limited to:
- (A) Educating patients on how marijuana can be used to assist patients with debilitating medical conditions and about the marijuana and manufactured marijuana products that will be available in the applicant's retail dispensing locations;
 - (B) Producing and maintaining a supply of marijuana that is sufficient to meet the needs of qualifying patients;
 - (C) Providing safe, accessible retail dispensing locations; and
 - (D) Measuring and improving customer satisfaction;

Green_Aloha_05_Meeting_Patient_Needs.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTYmaGFzaD00NC>)

Response to (5) shall be no longer than five (5) pages.

Upload Response to (5)

- (6) Ability to comply with criminal background check requirements pursuant to Chapter 11-850 and Sections 329D-7, 329D-12, and 846-2.7, HRS;

Green_Aloha_06_Criminal_Background_Check_Compliance.pdf (<https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTcmaGFzaD01hZjI>)

Response to (6) shall be no longer than three (3) pages.

Upload Response to (6)

(7) Ability to comply with the requirements in Chapter 11-850 and Sections 329 and 329D, HRS, for inventory tracking, security, and dispensing limits for qualifying patients;

Response to (7) shall be no longer than five (5) pages.

Upload Response to (7)

(8) Ability to maintain confidentiality of a qualifying patient's medical condition, health status, and purchases of marijuana or manufactured marijuana products;

Response to (8) shall be no longer than three (3) pages.

Upload Response to (8)

(9) Ability to conduct or contract for certified laboratory testing on marijuana and manufactured marijuana products pursuant to Chapter 11-850 and Sections 329D-7 and 329D-8, HRS;

Response to (9) shall be no longer than three (3) pages.

Upload Response to (9)

(10) Ability to comply with requirements for packaging, labeling, and chain of custody of products;

Response to (10) shall be no longer than three (3) pages.

Upload Response to (10)

(11) A plan for secure disposal of marijuana and manufactured marijuana products;

Response to (11) shall be no longer than five (5) pages.

Upload Response to (11)

(12) Ability to ensure product safety, in accordance with Chapter 11-850 and Sections 329D-8, 329D-10, 329D-11, HRS.


Response to (12) shall be no longer than five (5) pages.


Upload Response to (12)


(13) No history of having a business license revoked.


Response to (13) shall be no longer than three (3) pages.


Upload Response to (13)


 Green_Aloha_07_Inventory_Tracking_Security_and_Sales_Limits_Compliance.p (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTgmaGFzaD1kZW


 Green_Aloha_08_Ability_to_Maintain_Patient_Confidentiality.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfOTkmaGFzaD05Zn

 Green_Aloha_09_Laboratory_Testing_Compliance.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTAwaWJmhhc2g9OC

 Green_Aloha_10_Signage_Packaging_Labeling_and_Chain_of_Custody_Compli (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTAxJmhhc2g9MC

 Green_Aloha_11_Disposal_and_Destruction_Plan.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTAyJmhhc2g9N2I

 Green_Aloha_12_Product_Safety_Plan.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTA3Jmhhc2g9YW

 Green_Aloha_13_Business_License_Revocation_History.pdf (https://mmjdisp.ehawaii.gov/mmjdisp/wikiflow/download.php?q=Zm9ybV9pZD0xMDQzOSZpZD00MDE3JmVsPWVsZW1lbnRfMTA4Jmhhc2g9Nz

SECTION F: CERTIFICATION AND SUBMITTAL

Certification

☒ I hereby certify under penalty of law that the information submitted as part of this ap

By checking the box above and entering the individual applicant's name below, the applicant has electronically signed this application.

Applicant Name

Mr. Justin Robert Britt

If you have previously submitted an application and this is a revision, enter the unique entry number(s) of your previous submission(s) here.

User ID

User Email

Entry Info

Date Created

29 Jan 2016 - 12:26:50 PM

Date Updated

IP Address

1. ABILITY TO OPERATE A BUSINESS

Green Aloha, at its core, is a group of Kaua'i residents deeply rooted in the island. We are well versed in agriculture, horticulture, construction, pharmaceuticals, medicine, law, research and other regulated industries providing the foundation of our qualification as a licensed Dispensary.

Green Aloha's Kama'āina are complemented by some of the nation's most knowledgeable medical marijuana industry experts and experienced entrepreneurs. Our ownership includes the visionary responsible for the development of the largest commercial agricultural project currently undertaken on Kaua'i (Kaua'i Coffee), a Hawai'i registered caregiver intimately familiar with local patient needs, and an owner/operator of 5 licensed medical marijuana dispensaries experienced with 24-hour security, secure inventory tracking, and patient confidentiality. Our strong community ties combined with our collective education, knowledge and experiences operating relevant businesses make us the clear choice to take on this great responsibility for the island of Kaua'i...our home.

Kaua'i-Based Owners. Green Aloha CEO and individual applicant *Justin Britt* founded Hawai'i Life which, in just 6 years, became the 3rd largest brokerage and one of the fastest growing companies in the state. Real estate sales north of \$900 million, including \$27+ million in gross revenue earned Hawai'i Life a place in Hawai'i Business Magazine's top 250 Biggest Companies in 2015. Named one of the Most Influential People in Real Estate by Inman News, Britt serves as an ambassador to Hawai'i by virtue of his nationally televised HGTV show. Britt is an owner or partner in several other businesses, including Hawai'i Explorer, a beach safety website in affiliation with Wilcox Hospital, the Kaua'i Fire Department and the County of Kaua'i Ocean Safety Bureau.

Aaron Casey Rothstein, has 23 years of property and facility management experience. He served as Vice President of Budgets and Finance for Hawai'i First Inc., the State's 3rd largest property management company, directly managing annual operating budgets exceeding \$10 million, and often serves as an industry expert witness.

Ray Maki is a permaculture expert with more than 20 years experience in organic farming businesses on Kaua'i. He is intimately familiar with the island's microclimates and associated plant diseases and pests. Maki founded Kaua'i Pacifica Organic Farms, Kaua'i Organic Farms and currently owns and operates Permaculture Kaua'i Inc. He is the Kaua'i representative and Co-Chair of the Hawai'i Farmers Union United and a certified instructor in Permaculture [REDACTED]. Maki is Green Aloha's Quality Control Manager, ensuring medicine is safe and contaminant-free, and produced using 100% organic and sustainable methodologies.

Alan Baldwin King has nearly 2 decades' of experience in diversified agriculture, including 15 years with Alexander & Baldwin, Inc., a business started in the late 1880's by his great-great-grandfather. He helped transition 4,500 acres on Kaua'i from sugar cane to the nation's largest coffee plantation. He has worked in all aspects of running an commercial agricultural operation, from managing a quarantined nursery environment to overseeing production and quality control of final products. He will serve as our Production Advisor.

Dr. Martha Harkey, PhD, RPh, RAP has a PhD in pharmacology and is a licensed pharmacist in Hawai'i. She is a specialist in Herbal Medicine. Dr. Harkey was Adjunct Professor for University of California-Davis School of Medicine, where she developed the first course on "Integrative Medicine" for medical students, and is a preceptor and consulting pharmacist for the University of Hawai'i College of Pharmacy. Dr. Harkey has trained staff

on HIPAA requirements and Schedule I drug protocols in highly regulated pharmacies. She was the founding director of the Pharmacokinetics Service, which provides individualized drug dosage regimens for patients; Director of Special Chemistry and Toxicology for SmithKline Clinical Laboratories; and co-investigator of a National Institutes of Health grant on “Metabolic Interactions between Medicinal Herbs and Pharmaceuticals.” She currently works at NorthShore Pharmacy on Kaua‘i, providing Medication Therapy Management and individualized drug dosage regimens for patients on multiple drug therapy. She is highly experienced and uniquely qualified to serve as Green Aloha’s Privacy Officer in charge of HIPAA compliance and retail dispensing staff privacy training.

Daniel Hempey, Esq. is a partner at De Costa Hempey Meyers LLC, the second largest law firm on Kaua‘i, where he routinely advises businesses on regulatory compliance and employment law. He has unparalleled experience in interpreting and enforcing State and Federal marijuana laws. Superlawyers named him in the top 5% of attorneys in his field. He has served as Judge Pro Tempore in California and currently serves as Judge Per Diem on Kaua‘i. He will serve as Green Aloha’s Compliance Officer and legal advisor.

Other Kaua‘i-based owners include: *Chad Deal*, the Director of Hawai‘i Association of Realtors and co-founder of the Kaua‘i Organic Growers Association; *Alex Wraight*, a U.S. Army veteran, and *Joe Corbo*, a science teacher at Island School.

Industry Expert Owners. Green Aloha’s core Kaua‘i owners have invited national medical marijuana operational experts to strengthen the local team with their industry knowledge.

Troy F. Kaplan, Esq. MBA has extensive experience in the medical cannabis industry as an attorney (licensed in California, New York and New Jersey), and as a licensing and regulatory consultant for Capital C Consulting LLC. His consulting practice has a national

footprint advising sophisticated, compliance-focused clientele, including retail dispensaries and production centers in highly regulated medical cannabis jurisdictions. Kaplan previously managed and served as in-house legal counsel for large medical marijuana dispensaries.

Ryan Kunkel is founder and CEO of Have A Heart, which has 5 medical marijuana retail dispensaries in Washington. He operates highly regulated medical marijuana dispensary businesses requiring 24/7 security monitoring, secure inventory tracking and control, and confidential customer information protection. He has also manages the company's banking and compliance audits.

Business and Healthcare Expert Owners. *William Greenfield* founded the Greenfield Group which has developed in excess of 2 million square feet of sterile medical facilities.

George Ligeti has held positions as CFO and COO for several small- and mid-sized companies. He is the founder of 2 successful consumer goods companies, including Harpoon Ale (a highly regulated beer brewery), with combined annual sales of nearly \$20 million. Ligeti holds an MBA from Harvard, a bachelor's from Princeton, and is an Engineer.

Dr. Carl Sadowsky, MD, is Director of Research at Premiere Research Institute, Medical Director of the Memory Disorders Center at Palm Beach Neurology, and Clinical Professor, Division of Neurology, at Nova Southeastern University. He earned his degree at Cornell University Medical College and completed his residency in internal medicine and neurology at Dartmouth-Hitchcock Medical Center. He is a Fellow of the American Academy of Neurology. He will serve on Green Aloha's Medical Advisory Board.

Consultants. *Transcend, Inc.*, our security consultant and the largest security guard training company in Hawai'i is led by Honolulu Police Department Maj. Jeff Owens (Ret.). He is a licensed Principal Guard, former member of the Board of Private Detectives and is a

licensed Principal Guard, former member of the Board of Private Detectives and Guards, author of Board-approved curricula used statewide to qualify security guards, and served as Pacific Region General Manager for the world's largest private security company.

808 Genetics LLC is our Kaua'i-based consultant who will provide local guidance on strain selection, cultivation methodology, sustainable soil management, pest control management, and solvent-free commercial manufacturing techniques and equipment.

Jennifer Van Gorp, is a Kaua'i resident who will serve as MMP Manufacturing Manager. As a Master Herbologist with training in La'au Lapa'au (Hawai'ian Herbal Medicine), she will develop an assortment of smokeless, all natural coconut oil infused MMPs, including non-psychoactive products with high CBD and low THC.

Reach Consultants, Inc., a Colorado-based group of cultivation facility and systems experts, owns and operates the largest medical marijuana grow facilities in the nation. Reach has been contracted to assess the feasibility of our Production Plan, Business Plan, timeline and Financial Plan to ensure medicine will be available on July 15, 2016.

Scientific Advisory Board. Kaua'i resident *Dr. Gary Henderson*, a former advisor and inspector for the National Institute of Drug Abuse Quality Assurance and Quality Control program, will liaise with our engaged independent testing laboratory and advise us on continually improving our internal testing protocol. Dr. Henderson will develop policies and procedures to ensure an unbroken chain of custody and the integrity of testing results.

Health Research Institute (HRI), plantresearch.org, is an Oregon-based non-profit comprised of physicians and researchers offering product validation and quality assurance services for horticultural and natural medicinal products. HRI also conducts independent horticultural and medical research into cannabis and its derivatives.

2. OPERATIONS PLAN AND TIMELINE

Upon licensure from the Hawai'i Department of Health (DOH), Green Aloha will open two production facilities and two retail dispensing locations. Green Aloha will employ best practices, including widely accepted Good Agricultural Practices (GAP), Good Manufacturing Practices (GMP), and Good Dispensing Practices (GDP). Utilizing the expertise of our engaged consultants, including Kaua'i-based 808 Genetics, CO-based Reach Consultants, CA-based Women Grow, and OR-based HRI, we will adopt proven methodologies and intensely train our skilled Kaua'i team to implement our efficient Operations Plan.

Production Center Operations. The primary goal of production center operations is to ensure product safety by operating in accordance with the high standards of a traditional pharmaceutical manufacturing plant. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] safe, compliant packaging and labeling procedures.

Under

Green Aloha's Extraction and MMP Manufacturing Plan also facilitates product and

patient safety by mandating solvent-free extraction techniques and natural-healing inspired MMP infusion techniques. Utilizing 808 Genetics' proprietary rosin extraction equipment, Green Aloha will avoid the potential hazardous health risks associated with solvent-based extraction methods popular with many medical marijuana processors. Instead, we will employ an all-natural, solvent-free technique using controlled temperature and pressure to produce safe extracts containing the plant's full spectrum of terpenes and cannabinoids.

Incorporating these safe extracts into our line of MMPs will be overseen by MMP Product Manager, Jennifer Van Gorp, a Kaua'i resident with years of natural healing, herbology and GMP experience, including training from La'au Lapa'au (Hawai'ian Herbal Medicine). Ms. Van Gorp will utilize her product development background to create an assortment of safe coconut oil and noni infused MMPs (including non-psychoactive products with high CBD and minimal THC, often used to treat diseases like epilepsy). Such MMPs will include capsules, lozenges, pills, tinctures, ointments, and other DOH-approved products, with a focus on MMPs that are not smoked/ vaporized. We will secure all required State and County permits/licenses for manufacturing activities related to any DOH-approved MMP intended to be ingested orally or chewed pursuant to HAR §11-850-73.

To continue product safety assurance, prior to transporting any final products to our retail dispensing locations, each product batch must pass independent laboratory testing, then be properly packaged, clearly labeled, and inspected for safety and compliance.

Retail Dispensing Operations. The primary goal of our retail dispensing operations is to ensure patient safety by operating in accordance with the highest standards of a traditional pharmacy with guidance from part-owner Dr. Martha Harkey, PhD, RPh, RAP, a Hawai'i licensed pharmacist specializing in Herbal Medicine. Green Aloha's Dispensing Plan is

modeled after standard operating procedures perfected by our affiliate Have A Heart, whose 5 medical marijuana dispensaries in WA have enjoyed exemplary patient-focused operations for years in one of the country's most highly regulated medical programs.

Staff will be trained in GDP, including but not limited to (i) intake, registration and verification procedures, (ii) patient confidentiality and HIPAA compliance, (iii) maintenance of accurate entry/exit logs, (iv) utilizing our BioTrackTHC inventory, POS, and recordkeeping system, which will fully integrate with the State's BioTrackTHC tracking system, (v) verifying patient sales limits upon entry to the facility and again prior to dispensing products pursuant to company policy and State law, (vi) confirming packaging and labeling compliance of all products at least twice prior to dispensing, and (vii) visitor policies and procedures.

Pursuant to our Dispensing Plan, all patients must first present an unexpired government issued photo ID and DOH-issued registry ID before gaining access. Our highly trained staff will follow strict authentication and verification protocol, including confirmation of patient status in the DOH registry. The staff will query the State's BioTrackTHC system to confirm the permissible quantity of medical marijuana that may be purchased, based on the State's 4 ounce limitation (or MMP equivalent). Only verified persons who have not purchased their full allotment in the previous 15 consecutive day period may be given access to the secured Sales Room; all others will be asked to leave immediately.

Verified and approved customers will remain in the Waiting Room until a sales representative is available for consultation. Green Aloha policy prohibits more than one customer per sales representative, unless a patient requires the assistance of his or her registered caregiver. In no case shall more than 2 persons per sales representative be permitted.

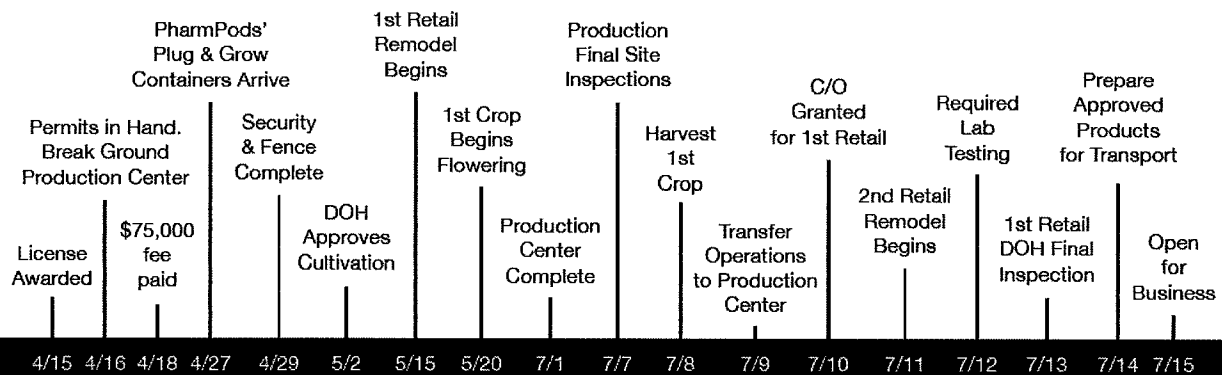
Once available, the patient will be buzzed into the Sales Room and trained staff will

the person and assist them in selecting an appropriate item, always emphasizing medicine which can be consumed by means other than smoking/vaporization. When necessary, our sales team will provide educational services either in the Sales Room or in a Private Patient Consultation room, upon request. This isolated room will provide a safe, private and judgment-free environment for more in depth one-on-one consultations.

Upon product selection, the sales representative will enter the information in our BioTrackTHC POS system. Prior to dispensing, the staff member will query DOH's BioTrackTHC system to again verify the amount of product that may be lawfully purchased.

If a patient attempts to purchase more than the permissible amount, our POS system will automatically prohibit the transaction. The patient's records will be updated with the failed purchase details and the patient will be allowed to revise their order to be compliant with State limitations. Once a permissible amount of product has been selected, the transaction will be finalized and products dispensed. Both the company's and DOH's BioTrackTHC systems will automatically update in real-time with the new purchase data.

Timeline. Pursuant to HRS 329D-2, Green Aloha will not dispense products prior to July 15, 2016. Below is our proposed timeline for operating a retail dispensing location assuming ideal conditions and the timely obtaining of required permits.



3. FINANCIAL STABILITY AND ACCESS TO FINANCIAL RESOURCES

Green Aloha boasts strong financial stability and sound financial planning, due in large part to our investor-owners who share the company's vision to produce the highest quality, safest products and provide unmatched patient-centric services to patients and caregivers on Kaua'i. We are committed to a culture of compliance and absolute transparency, particularly with regards to our financial and operational data, which will be made available to the Department of Health (DOH) upon request. With input from our experienced team of owners and expert consultants, we have developed a detailed financial planning and execution strategy to ensure we are well positioned to operate a safe, professional, pharmacy-inspired, licensed Dispensary.

Sources of Finances Available.

Green Aloha's project budget and pro forma projections have been vetted and approved for accuracy by expert consultants. In the event of unforeseen circumstances Green Aloha Shareholder Agreement requires investors to provide additional funds to cover any deficit.

Financial Statements Summary. Green Aloha was formed in the State of Hawai'i on

April 9, 2015 for the purposes of pursuing and operating a DOH-issued Dispensary license under the Hawai'i Medical Marijuana Program. During our relatively brief existence, the entity applicant has not owned or operated any other business. With regards to our own business, Green Aloha has raised in excess of [REDACTED] to secure licensing and begin operating a licensed Dispensary. To date, we have no income and will not generate revenue until our retail dispensing locations are open for business, which is expected to occur on July 15, 2016. Approximately [REDACTED] has been spent to date on items directly related to license pursuit including legal, engineering, consultants, etc. We have budgeted an additional [REDACTED] for necessary licensing related expenses subsequent to application submission, including holding rents for our proposed facilities, building plans and permit applications up to April 15, 2016, DOH's planned announcement date for the award of Dispensary licenses. These reserves are more than adequate for anticipated expenses. Upon licensure, we are prepared to pay the required \$75,000 initial registration fee immediately. Then, with permits in hand, we can begin building our facilities without delay.

Green Aloha's individual applicant, CEO Justin Britt, currently owns and/or operates a number of successful businesses. Mr. Britt founded Hawai'i Life which is Hawai'i's 3rd largest residential real estate brokerage and one of the state's fastest growing companies, eclipsing [REDACTED] revenue. Hawai'i Life was named Inc 500's 482nd fastest growing company in the nation in 2013 and was named in Hawai'i Business Magazine's top 250 Biggest Companies in 2015. Due to his impact with Hawai'i Life, Britt was named one of Inman's 100 Most Influential People in Real Estate. Britt also serves as a cultural ambassador to Hawai'i by virtue of his nationally televised HGTV show "Hawai'i Life" which boasts viewership in excess of 20 million/year. The vast majority of

funds earned from the show have been donated to Hawai'i Island Land Trust (HILT), a non-profit dedicated to protecting and preserving Hawai'i lands for current and future generations. Hawai'i Life is part of HILT's Founding Few.

Aside from the Hawai'i Life venture, Mr. Britt is an owner or partner in several other Hawai'i based businesses dedicated to serving the community, including Hawai'i Explorer, which runs Kauaiexplorer.com and provides educational beach safety information in affiliation with Wilcox Hospital, the County of Kaua'i, the Kaua'i Visitor's Bureau, the Kaua'i Fire Department and Ocean Safety Bureau, and The Surfrider Foundation.

Financial Plan. Green Aloha has leveraged the collective financial planning expertise of part-owners Justin Britt, William Greenfield and Aaron Casey Rothstein. Mr. Britt has created and implemented business and financial plans for Hawai'i Life and has consulted for a number of Hawai'i based businesses [REDACTED]

[REDACTED] Mr. Greenfield's financial planning background is substantial as he holds a master's degree in Taxation, is a retired Certified Public Accountant, and has been instrumental in the planning and development of over 2 million square feet of medical facilities. Mr. Rothstein has served as Vice President of Budgets and Finance for Hawai'i First Inc., the State's 3rd largest property management company and has directly managed a portfolio of 12 community associations with total annual operating budgets exceeding [REDACTED]

[REDACTED] As owner of Pacific Reserve Studies, Mr. Rothstein has provided reserve studies (30 year facility budgeting and maintenance plans) for over 150 community associations in Hawai'i. Together, the team created a realistic Project Budget, Pro Forma, timeline and other financial planning tools providing the benchmarks upon which our medical marijuana industry expert have assessed and confirmed the accuracy of our Business Plan.

Green Aloha's Financial Plan relies on the following assumptions: (i) we will begin growing using PharmPods' nursery and production Plug & Grow shipping containers approved for use in other medical marijuana jurisdictions, (ii) we will construct 2 brand new production centers [REDACTED]
[REDACTED]
[REDACTED] (iii) we will open 2 retail dispensing locations [REDACTED], (iv) we will initially cultivate 1,500 plants in each production center (totaling 3,000 plants) using a [REDACTED] cultivation plan which will produce output well in excess of expected demand. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] (v) patients will purchase an average of 1.0 ounce per month at an average price of \$250 per ounce (figures based on extensive research and information obtained from our expert industry consultants), (vi) the Kaua'i patient population is 1,686, 50% of which will purchase product in month 1, which will increase by 9% month-over-month in year 1 and 4% month-over-month in year 2, reaching 2,817 patients purchasing by month 24. Note: Patient demand will not exceed our output capacity for the first 10 years of operation even though we will only cultivate 3,000 total plants; however, our output capacity can more than double by increasing plant count to the fully allotted 6,000 plant limit, if necessary.

Given these assumptions, we expect to produce on average [REDACTED] ounces per month at a cost of [REDACTED] per ounce ([REDACTED] per ounce if fully enclosed greenhouses are allowed). This would yield a month's supply of products for approximately [REDACTED] patients

each month, or [REDACTED] patients each year, based on expected consumption levels. Green Aloha expects to net approximately [REDACTED] per month, or [REDACTED] total, for year 1. Patients choosing the dispensary over alternative sources is expected to increase 87.9% in year 1 and 25% in year 2, increasing demand. Based on these figures, we anticipate net earnings of approximately [REDACTED] for year 2, and [REDACTED] for year 3. Economies of scale and virtually fixed overhead costs of almost [REDACTED] per year, allow our cost of goods sold to decrease over time, thereby increasing EBITDA at a steady pace of [REDACTED] per year for the first 3 years. Pursuant to our Financial Plan, Green Aloha will become cash flow positive in [REDACTED].

In accordance with Hawai'i Medical Marijuana Program regulations, Green Aloha will maintain all financial records for 6+ years, including but not limited to income, expenses, bank deposits, bank withdrawals, and audit reports. Moreover, we will submit to DOH quarterly reports, including financial statements. Green Aloha will engage a reputable Hawai'i licensed CPA to perform an annual independent financial audit of our business and will submit the resulting report to DOH at least 60 days before our license expiration date.

Good Credit History. Since Green Aloha was recently formed in April 2015 specifically for the purpose of operating a licensed medical marijuana Dispensary and has been funded solely by owner-investors, there is no credit history to disclose.

The individual applicant, Justin Britt, has an exemplary credit history as proven by his Experian FICO Score of [REDACTED] (as of January 19, 2016). Upon request, Green Aloha will submit the results of Mr. Britt's credit history reports to DOH.

Bankruptcy History. Green Aloha and individual applicant Justin Britt have never filed for bankruptcy, nor has any entity owned or operated by Green Aloha or Justin Britt.

4. SECURITY

Green Aloha's comprehensive Security Plan is built upon best practices implemented by licensees in the nation's most stringently regulated medical marijuana jurisdictions and customized to meet the precise security environment of our proposed Kaua'i facilities. We have hired a preeminent Hawai'i-based security consultant, Transcend Inc., led by Honolulu Police Department Maj. Jeff Owens (Ret.). Maj. Owens is a Hawai'i licensed Principal Guard, former member of the Board of Private Detectives and Guards, and author of Board-approved curricula used statewide to qualify security guards to obtain/renew the Guard Employee (GDE) license required to work as a security guard. Transcend is a Hawai'i licensed guard agency and private detective agency with extensive experience in conducting employment background checks, including obtaining criminal conviction records nationwide. Transcend is the largest security guard training company in Hawai'i and has provided security consultation to many Hawai'i businesses.

Upon licensure, Transcend will oversee the installation and maintenance of our security systems, conduct criminal history background checks of all staff through the Hawai'i Criminal Justice Data Center and other jurisdictions as applicable, conduct staff security training, and advise management on an on-going basis. Pursuant to best practices and Transcend's advice, Green Aloha will engage on-site unarmed uniformed security guards who will patrol the retail facilities during business hours and the production centers 24/7, handle security incidents, and routinely inspect and test all security equipment.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Emergency Response Protocol. Upon any security breach or system failure, the affected facility will immediately suspend operations and secure the premises until the event is appropriately resolved. Facility management will notify DOH immediately upon suspension and resumption of services. Our security protocol requires the creation and maintenance of Security Incident Reports detailing any breach/failure, subsequent remediation efforts, and witness interviews. Such reports will be stored for 6+ years. To ensure efficient response, staff will undergo intensive security training, including group system training, one-on-one

equipment training, and emergency simulation training.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Business hours will be limited to 8 a.m.-8 p.m. Monday-Saturday, excluding all State and Federal holidays.

Reception or security personnel thoroughly trained in our admission protocol will screen and approve all persons seeking entry. Visitors must present government-issued photo IDs. Staff must record the date, visitor's name, time of entry/exit, purpose of visit, and identity of the facility escort (if applicable). Patients and caregivers may access the secured retail dispensing locations only after presenting their DOH-issued program registration cards. Those making an initial visit will fill out additional paperwork, including intake forms and registration documents. Access to production centers will be limited to scheduled and properly credentialed staff members and government representatives acting in their official capacity. In accordance with HRS 329D-15 and 329D-16, Green Aloha will provide DOH with a list of persons, such as contractors and vendors, who may access areas of our facilities for limited times and specific purposes. All such authorized persons will be 21+ years old, non-felons, and approved by DOH. A properly trained employee will escort such authorized visitors at all times. Logs of entry/exit will be stored for 6+ years and shall be made available to DOH upon request.

[REDACTED]

Retail Dispensing Location Security. Green Aloha will implement comprehensive retail security measures to fulfill the core tenets of its business philosophy: Patient and product safety. [REDACTED]

[REDACTED]

Product samples will be strictly prohibited under all circumstances. Though State law allows 2 customers per sales representative, Green Aloha will maintain a 1:1 ratio, with limited exceptions for attending caregivers, to ensure a safe environment for all.

[REDACTED]

Transportation. Green Aloha is dedicated to public safety at every stage from seed to sale, including transport. The critical nature of product transport requires the constant maintenance of security, and an unbroken chain of custody. Accordingly, we will employ highly trained transport agents, preferably with a law enforcement or secured

transportation background, and conduct additional protocol training.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] All delivery vehicles will be [REDACTED]

[REDACTED] maintained in good working order. [REDACTED]

Kaua'i Police Department. On January 14, 2016, our security consultant, legal counsel, and company leadership met with KPD to discuss issues related to our business. Security considerations resulting from that meeting are incorporated into our Security Plan.

5. MEETING PATIENT NEEDS

Green Aloha's primary goals are: patient, product and public safety. We will leverage the experience of our Executive Team, which includes Dispensary Facility operators from other highly regulated medical marijuana jurisdictions, to meet and exceed patient, caregiver and program regulator expectations. Our proposed Kaua'i Dispensary Facilities will implement proven innovative techniques to (i) educate and empower patients, (ii) maintain [REDACTED] safe, high quality medical products, (iii) provide high functioning, aesthetically beautiful and accessible retail locations, and (iv) measure and improve patient satisfaction through a unique interactive, responsive dispensary experience.

Patient Education. Patient safety starts with a solid educational foundation. Green Aloha will offer patients and caregivers a plethora of complementary educational services. Programs will (i) highlight the dangers of impaired driving, (ii) stress legal and responsible behavior, (iii) accentuate the dangers of smoking versus smoke-free alternatives, and (iv) teach growing techniques to reduce mold and mildew in legal home gardens. Karen Kahikina, State of Hawai'i Dept. of Transportation's Highway Safety Specialist, provided resources to help us create our own anti-DUI educational materials. We understand that public safety is greatly impacted by any impaired driver (be it marijuana, alcohol or other drug). If a person is seen using any marijuana product on Dispensary grounds, we will notify police, provide them with any requested surveillance, and suspend or revoke the offending person's access to the facility.

Within our retail dispensing facilities' bright, comfortable and spacious Waiting Rooms, patients can freely access educational content prepared by licensed pharmacist

Dr. Martha Harkey including (i) tablets and touch screen kiosks featuring interactive apps on strains and product-types (including expected benefits for qualifying medical conditions), the latest marijuana scientific research and warnings – including evidence-based research from our advisors Health Research Institute (HRI), (ii) libraries with pamphlets, handouts and topical publications, and (iii) multi-media presentations on large displays detailing important patient information, including the ability to schedule private consultations.

Our retail dispensing locations will feature Private Consultation Rooms where Privacy Officer Dr. Harkey, or her trained designee, will meet with patients who require more personal attention in a one-on-one setting. This dedicated area will facilitate a full health, drug regimen and lifestyle assessment to help patients shift to healthier options. Patients will also receive general information on marijuana and the Hawai'i program, tutorials on administration methods/tools and proper home-storage of medicinal products, options for safe alternatives to smoking/vaporizing, and answers to highly sensitive questions and individualized matters. Patients who wish to merely discuss the day's menu or other more generalized topics will be assisted in one-on-one consultations with trained sales staff within the limited access Sales Room.

Adjacent to a Green Aloha retail facility, we will feature an off-site Seminar Room for regular classes and workshops for patients. Guest lecturers will include health care professionals, program regulators, law enforcement representatives, lawyers, scientists, testing laboratory representatives, Green Aloha cultivators/extractors, and other industry experts.

All education related services, including one-on-one patient consultations and ongoing staff training, will be overseen by Dr. Harkey, our in-house pharmacist who can train staff on how different genetics may address a patient's condition and symptoms. Green,

Aloha part-owner Daniel Hempey, Esq., who has been practicing law for 25 years and has served as a judge in two states, will train staff on recognizing and preventing impaired driving. He will respond to any issues that may arise related to driving under the influence.

Sufficient Supply. Green Aloha understands that a critical aspect of meeting patient needs is to ensure a steady, dependable and adequate supply of medicine. Leveraging the local knowledge of our experienced caregivers and long time Kaua'i farmers, as well as guidance from Reach Consultants — a Colorado firm which owns licensed cultivation facilities in several medical marijuana jurisdictions, including some of the country's largest, cleanest and most efficient production centers — Green Aloha will implement a Supply Plan that ensures an uninterrupted supply of safe, high quality marijuana with a sufficient variety of consistent, predictable products. An integral element of our plan is a [REDACTED] [REDACTED] cultivation system using organic methods providing a steady assortment of fresh, contaminant-free medicine produced from proven genetics specifically bred and selected by Kaua'i caregivers and Cannabis Cup winning Master Growers to (i) address Hawai'i's list of qualifying medical conditions, and (ii) resist plant diseases prevalent throughout Kaua'i (including mold and mildew). To ensure our production centers are sterile we will use [REDACTED] [REDACTED] sealed climate-controlled grow rooms, [REDACTED] [REDACTED] and proprietary non-toxic preventative recipes.

For early detection of preventable outbreaks, [REDACTED]

[REDACTED]
[REDACTED] re-
ducing the likelihood of failed crops. All final medicine will undergo required 3rd party tests to ensure patient safety, as well as stability testing to assess product shelf-life. Using

BioTrackTHC's seed-to-sale tracking system and the FIFO (First In First Out) inventory method, Green Aloha will monitor products at all stages of the dispensing process to ensure no expired, recalled, or otherwise unsafe products are transferred to our patients.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] All

product packaging will be inspected regularly to ensure the continued maintenance of the integrity and safety of our medicine.

Retail Accessibility. Green Aloha's first retail dispensing location has been carefully chosen to assure compliance with setback regulations while facilitating public safety, patient safety, and access. Finding a compliant commercial space, suitable for dispensing purposes and accessible to patients was a challenge on Kaua'i. Lihu'e was identified as the ideal location for its population, centralized location and proximity to destinations frequented by island locals. After considering multiple locations, 2955 Aukele Street was selected for (i) its secure, enclosed, product unloading area, (ii) the 4,406 sf space that will allow us to serve Kaua'i's patient population comfortably, and (iii) its accessibility to patients living on all parts of the island. The site is far from schools, residences and other areas visited by the general public, especially children and tourists. Per request from a meeting with the Kaua'i Mayor and Life Choices Coordinator, the site cannot be seen from the highway or any main thoroughfare. The building itself is ADA compliant with a professional look that will inspire confidence in patients. It features a well-lit parking lot and close proximity to public

transportation, Wilcox Hospital, State Department of Health offices, the Kaua'i Police Department (KPD) and a fire station. We are currently in negotiations for a second location.

With the expert advice of our retail consultant and affiliate Have A Heart dispensaries, one of the largest licensed operators in Washington, Green Aloha has intelligently designed the layout of our proposed retail facilities to accommodate our patient-flow management plan, allowing us to easily assist all anticipated patients. The monitored parking lot can accommodate 22 cars, with additional adjacent on-street parking.

Patient safety goes hand in hand with facility accessibility. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Patient Feedback. Green Aloha understands we must always improve the patient experience in order to continually provide the highest possible level of service. Accordingly, we will institute a comprehensive feedback system to measure and improve patient satisfaction. We recently met with the Hawai'i Veterans Cannabis Alliance to help identify our initial genetic lineup and co-develop a strain specific to PTSD.

Patient feedback will be collected using on-site anonymous patient surveys, oral/ anecdotal evidence collected during one-on-one consultations, and buying patterns and other operational records indicating patient preferences. Green Aloha will commence operations with a varied and appropriate strain selection and product line that will be regularly refined, based on patient feedback and input from HRI's Scientific Advisory Board, world leaders in horticultural and medical research with an emphasis on cannabis.

6. CRIMINAL BACKGROUND CHECK COMPLIANCE

Green Aloha is fully prepared and able to comply with the criminal background check requirements as set forth in Chapter 11-850 of the Hawai'i Administrative Rules, as well as HRS §329D-7 and HRS §846-2.7. Our confidence is rooted in our relationship with our security consultant, Transcend, Inc., which is a Hawai'i licensed guard agency and private detective agency with extensive experience in conducting employment background checks including obtaining criminal conviction records nationwide, as well as our adoption of proven policies and procedures from our affiliate and operational consultant, Have A Heart, which is a licensed medical marijuana provider operating numerous dispensaries in Washington. Have a Heart's owner Ryan Kunkel, also a part-owner of Green Aloha, has an exemplary record of compliance with strict regulations governing the WA Medical Marijuana Program.

Prior to submission of this application, Green Aloha has already carefully vetted all personnel at all levels to ensure only persons with the utmost integrity, honesty, professionalism, and morals were invited to participate in our proposed business. We will continue this exercise upon licensure and on an ongoing basis to maintain the highest standards and sound business practices.

Personnel Background Check Policy and Procedures. All of Green Aloha's owners and agents have undergone rigorous internal background investigations, including a review of businesses, credit and criminal history reports, and have authorized the Department of Health to conduct its own searches to verify the character and qualifications of our team.

Green Aloha will leverage the experience and advice of our labor and employment consultant Jazmin Hupp, founder and CEO of Women Grow, a company created to

connect, educate, inspire and empower the next generation of medical marijuana industry leaders. Ms. Hupp will enhance our Staffing Plan, focusing on skilled and experienced personnel sourced from the United Food And Commercial Workers (UFCW) union and local talent pool, and will manage our initial hiring and training process. Only the strongest, most qualified candidates will be considered. Note: UFCW has given its exclusive support to Green Aloha in our pursuit of a Dispensary license for the County of Kaua'i.

Upon licensing, all prospective management and employee candidates must undergo comprehensive Federal and State criminal records checks, including an FBI criminal history background check conducted by DOH or its designee, prior to hire. Prospective hires must complete a 10-panel drug screening, thorough credit reports, personality tests, and in-person interviews with facility management and security management.

Any person who fails the drug screening without sufficient justification and/or has a felony conviction or other excluded offense will not be hired. Any person found to be under the age of 21 or otherwise deemed unfit will also not be hired. All new agents who successfully pass our vetting process will be hired on a 3-month probationary status, regardless of the position within our company, to facilitate our thorough assessment of their qualifications and overall fit with our Dispensary's culture and goals.

To ensure ongoing compliance with Hawai'i law, rules, and regulations, as well as our internal policies and procedures (which are in many cases more stringent than those required by law), all staff will be required to report any post-hiring arrests or other incidents which may have excluded them from initial hire. Annually, each employee will be required to sign an affidavit affirming that they have not been arrested or convicted of any felony or excluding offense in the past year. Of course, all employees will be subject to further drug

testing and follow-up criminal background checks to confirm on-going compliance.

Human Resources. Green Aloha's human resources (HR) department will be responsible for maintaining all employee records and files, including training certificates, attendance records, disciplinary reports and documents related to initial and ongoing criminal background checks.

HR personnel will be tasked to keep track of the date of hire for each employee in order to assure the annual attendance of all required continuing education and retraining, the completion of staff performance assessments, and the submission of the mandatory arrest/conviction reaffirmation affidavits. If a staff member refuses or otherwise fails to timely submit the affidavit affirming that they have not been arrested or convicted of any felony or excluding offense in the past year, HR is required to immediately notify management of the situation and assist in any follow up action to resolve the matter.

Upon any indication that an agent may be abusing alcohol or drugs, or has been arrested or convicted of a felony or other excluding offense, HR is required to initiate an internal investigation, including but not limited to conducting an unannounced drug screening and/or conducting an updated comprehensive criminal background check. If an agent no longer meets our criteria for employment, he or she will be terminated.

7. INVENTORY TRACKING, SECURITY & SALES LIMITS COMPLIANCE

Inventory Tracking. Using the secure, SSL encrypted seed-to-sale tracking software provided by industry leader BioTrackTHC, Green Aloha will maintain an unbroken chain of custody for all our seeds, plants, trimmings, waste, extracts, in-process products and final products from propagation or germination through sale or disposal and destruction. Since we will use the same vendor as the Hawai'i Department of Health (DOH), we are guaranteed seamless integration and interfacing capabilities with DOH's computer tracking software system to allow real-time, 24/7 access to our own tracking system and inventory reports, including historical action logs for each inventory item tracked.

To facilitate comprehensive tracking of all stages of cultivation/production, manufacturing, transport, testing, dispensing and destruction, Green Aloha will thoroughly train appropriate staff members on the BioTrackTHC software and equipment, as well as company inventory tracking protocol, as it pertains to their job duties and responsibilities. [REDACTED]

[REDACTED] staff will log into the inventory tracking system [REDACTED] to then record every action taken with respect to the plants or products handled, including but not limited to the date, time, type/nature of action, unique plant/product/batch number. [REDACTED]

[REDACTED] Green Aloha will be able to produce detailed chain of custody reports and automatically generate employee-specific action logs associated with plants or products by individual item or by batch. [REDACTED]

[REDACTED] To supplement internal education on our inventory tracking equipment and procedures, we intend to

regularly host BioTrackTHC representatives for staff training and updating sessions.

Using the BioTrackTHC system, we can account for our entire physical inventory and instantly produce accurate reports (including chain of custody records, batch reports, testing reports, etc.) for any plants, trimmings, waste, extracts, in-process products and final products by individual item or by batch. This will aid us in preventing product diversion by facilitating the identification and source of inventory discrepancies. With the same BioTrackTHC system, we can also track all sales to patients and will customize the POS features to automatically prohibit sales in excess of legal possession limits, which will be set to prohibit manual override, further preventing diversion. Since our tracking system is manufactured by DOH's own provider, we are ensured our system is capable of capturing and reporting all data specifically required by DOH. All inventory tracking records will be securely maintained for 6+ years. The BioTrackTHC system allows us to store saved reports in perpetuity for historical analysis purposes, which we intend to do.

Green Aloha's affiliate and dispensing consultant, Have A Heart (a model medical marijuana provider operating 5 compliant dispensaries throughout Washington) has vast experience with the BioTrackTHC system's functionality and features. Notably, BioTrackTHC is also Washington's selected vendor for its State inventory tracking system. Accordingly, we have direct access to Have A Heart personnel who use the program on a daily basis and can effectively train our staff, including customizing software features to the unique aspects of the Hawai'i Medical Marijuana Program.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Green Aloha will employ an Inventory Manager responsible for, among other things, ensuring the quality, integrity, safety and security of our inventory at all stages of production and dispensing. The Inventory Manager will conduct inspections at key process checkpoints to ensure our products are 100% unadulterated, contaminant-free, handled properly, timely tested, compliantly packaged and labeled, and accounted for at all times. The Inventory Manager will conduct daily, weekly and monthly physical inventory audits to ensure the integrity of our tracking system and quickly determine any discrepancies with our inventory records.

Pursuant to protocol, upon notice of any inventory tracking system breach or failure, Green Aloha will suspend operations until an investigation is initiated and the system is fully restored. Notably, the BioTrackTHC system, a server based system, has the ability to operate in an offline mode if Internet access is lost. Upon the conclusion of any inventory related investigation, which will include reviews of inventory records and security recordings, as well as interviews with all persons present or potentially involved in the incident, management will be responsible for assessing inventory policies and procedures, updating protocol as necessary, and training staff on any new procedures.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

In an effort to emulate the inventory security protocol of traditional pharmacies, while exceeding regulatory mandates, we will seek additional input on our Inventory Security Plan from our Hawai'i-based security consultants Transcend Inc., led by Honolulu Police Department Maj. Jeff Owens, (Ret.), and from Green Aloha part-owner Dr. Martha Harkey, PhD, RPh, RAP, a pharmacologist and registered Hawai'i pharmacist who created tracking and sales protocols for the NorthShore Pharmacy on Kaua'i.

We have already conferred with the Kaua'i Police Department (KPD) on security matters. Prior to commencing operations, we will present our Plan to KPD for review, to inform them of our intentions and to address any pending concerns.

Sales Limits. In accordance with State law, Green Aloha will monitor and control all sales to patients by verifying past patient purchases on DOH's computer tracking software system, and by using specialized features of our own customized BioTrackTHC tracking

system, to ensure absolute compliance with patient sales limitations (i.e., 4 ounces, or its equivalent, in any 15 consecutive day period). Our retail staff will be trained in and required to follow our redundant purchase limit verification protocol.

Verification protocol mandates that upon arrival to a retail dispensing location, and again prior to accepting a transaction within the Sales Room, trained staff must log into DOH's BioTrackTHC system to confirm the exact purchasing limitations for each verified patient attempting to obtain medical marijuana and convey the determined limits to the client. To facilitate the determination and to prevent inadvertent violations, Green Aloha will create a "Sales Limit" filter on our own BioTrackTHC POS system to automatically prohibit staff from completing unlawful transactions. Upon notification of an impermissible sale, the representative will inform the patient of the issue and give them an opportunity to revise their order.

Since our inventory tracking system will record every transaction in real-time and automatically update DOH's system (which in turn tracks all patient transactions from licensed Dispensaries across the State), all possession limitation information available, including prohibited sales alerts, will be accurate. Any attempt by a customer to exceed possession limits will be recorded in the patient or caregiver's file.

Green Aloha will retain all sales and related compliance records for 6+ years and will make such records available for DOH inspection upon request.

8. ABILITY TO MAINTAIN PATIENT CONFIDENTIALITY

Patient safety is Green Aloha's primary concern and this includes patient privacy. Green Aloha also recognizes that in Hawai'i, privacy is a constitutional right pursuant to Article I, Sec. 5 of the Hawai'i Constitution. To protect patient privacy, we will take great measures to safeguard and keep confidential from public disclosure all personally identifying information, including but not limited to a patient's medical condition(s). Upon initial intake and dispensary registration of qualifying patients and/or their primary caregivers, our staff will fully inform them of patient-specific privacy and confidentiality rights through verbal consultation and distribution of written materials clearly detailing both their legal rights and the steps that Green Aloha will follow to fully protect their privacy. Our knowledgeable staff will always address any privacy concerns presented by patients or caregivers.

HIPAA Compliance. The Health Insurance Portability and Accountability Act of 1996, including all rules and regulations promulgated thereunder (HIPAA), will be Green Aloha's primary guiding document for maintaining full confidentiality of its registered patients and caregivers. All staff, even those who do not work directly with qualifying patients, will be fully trained in HIPAA requirements. Our comprehensive privacy training program will be developed and overseen by Dr. Martha Harkey, PhD, RPh, RAP, dispensary Privacy Officer and part-owner of Green Aloha. Dr. Harkey, a Kaua'i resident, was Adjunct Professor for UC Davis, School of Medicine and is a preceptor and consulting pharmacist for the University of Hawai'i College of Pharmacy. She is a licensed pharmacist in Hawai'i and has trained staff on HIPAA requirements in highly regulated pharmacies. Dr. Harkey is highly experienced and uniquely qualified to maintain our patient's privacy.

Our employee patient-privacy training program shall include, at a minimum, group lectures,

multi-media presentations, role-playing scenarios, workbooks, handouts, and web-based teaching tools. Each trainee's understanding of the HIPAA confidentiality rules shall be assessed through a test administered at the end of the training session. If a trainee fails to answer at least 95% of the questions correctly, a re-training will be required. If a trainee fails to master the material after a second training session, that person shall not be re-tained for employment. All Green Aloha staff will be required to participate in a HIPAA training refresher course every 6 months, or sooner if the confidentiality guidelines are changed in any way. Any breach of protected patient information will be grounds for termination.

Privacy Officer and Staffing. Our Privacy Officer, Dr. Harkey, shall ensure the retail staff is well trained in all areas affecting patient and caregiver privacy and confidentiality, and that the Dispensary acts in strict compliance with State law and HIPAA patient confidentiality guidelines. She will oversee the creation, maintenance, and secure storage of patient records (both physical and electronic copies). [REDACTED]

[REDACTED]

[REDACTED] She will provide support to the sales team with regards to individual consultations, particularly when the subject matter is sensitive and should be protected by our confidentiality policies and procedures.

Patient Records. Green Aloha will strictly adhere to Department of Health (DOH) regulations regarding patient records. [REDACTED]

[REDACTED]

[REDACTED] As part of the initial registration process, staff will create an electronic file on our BioTrackTHC inventory tracking and recordkeeping program. This software system is SSL encrypted and password protected so that only authorized personnel may

access confidential patient/caregiver files, including digital purchase records created by BioTrackTHC's POS features. Green Aloha will ensure purchase records will be (i) maintained separately from medical records so sales agents do not have access to medical records unless specifically authorized, (ii) SSL encrypted and password-protected, and (iii) automatically updated in the State's own BioTrackTHC system in real-time.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] Green Aloha will maintain a comprehensive record of each fiscal year's medical and purchase records on separate hard drives. All hard drives will be stored for 7 years from the date the patient last purchased from our Dispensary; then erased.

Facility Privacy. Green Aloha will post signs in the entryway vestibule, Waiting, Private Consultation, and Sales Rooms of our retail dispensing locations that clearly state photography, videography, audio recording or other means of capturing sound or images are strictly prohibited. Any customer who attempts to violate this prohibition will be immediately removed from the facility (and their files will be updated detailing the incident). Exceptions will be made for recordings by Green Aloha's own security system or by DOH representatives acting in their official capacity, law enforcement, or persons with express written DOH authorization.

9. LABORATORY TESTING COMPLIANCE

Internal Testing. Green Aloha's Quality Assurance (QA) Manager, Ray Maki, Co-Chair of the Hawai'i Farmers Union United and permaculture expert with more than 20 years' experience in organic farming specific to Kaua'i giving him intimate familiarity with the island's microclimates and associated plant diseases and pests, will oversee our internal testing protocol at our production facilities to ensure a safe, 100% unadulterated and contaminant-free inventory. By conducting daily spot-checks and regular announced and unannounced site inspections, Mr. Maki will ensure a clean, sterile, and sanitary workplace which promotes healthy plant growth, pharmaceutical-inspired manufacturing protocol, and industry-leading best practices. Upon any indication of mold, mildew, disease, pest infiltration, or other unforeseen contamination, Mr. Maki will immediately develop and implement a remediation plan to address the situation and prevent operational disruptions. This continuous checking of plants will ensure only safe final products are prepared for dispensing and will minimize the risk of any supply disruption.

Our processes are designed to cultivate plants without the use of pesticides or harsh chemicals and to manufacture medical marijuana products without the use of solvents (by virtue of our natural, solvent-free extraction methods using Green Aloha's proprietary rosin presses, designed and built by Kaua'i-based processing consultants 808 Genetics). It should be noted that Hawai'i in particular is prone to mold and mildew issues, which could [REDACTED] harm patients if present on final products. Colorado-based Reach Consultants advised us to build an entirely new, state-of-the-art facility with [REDACTED] climate-controlled environments [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Independent Laboratory Relationship. Green Aloha has incorporated the certified laboratory testing requirements set forth in HAR Chapter 11-850, HRS 329D-7 and HRS 329D-8 into our Laboratory Testing Plan. Once the Hawai'i Department of Health (DOH) has certified an independent laboratory on Kaua'i, we will engage the laboratory and begin testing procedures. Our research and testing expert consultant, Dr. Gary Henderson, a Professor Emeritus of Pharmacology and Toxicology with extensive experience in advanced analytical methods, including an advisory and inspector role for the National Institute of Drug Abuse Quality Assurance and Quality Control program, will liaise with the laboratory and advise us on continually improving our Plan. Dr. Henderson will also develop policies and procedures for statistically representative batch sample selection, sample handling, and sample transportation to ensure an unbroken chain of custody as well as the integrity and accuracy of testing results.

Once a sample has been selected, it will be segregated from its batch and placed in specially designed packaging, and our BioTrackTHC inventory tracking system will be updated accordingly. With Dr. Henderson's oversight, Green Aloha will securely retain extra representative samples in sufficient quantity from every batch for future testing purposes, including verification and stability testing. Such extra samples will be packaged in air-tight, tamper-proof and color-coded containers with clear labels indicating the strain, batch,

harvest/manufacture date, testing date, weight, and other pertinent information. [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED] Samples may only be removed from storage for testing purposes and may never be dispensed to patients or caregivers.

Independent Laboratory Testing. Green Aloha will work with the certified laboratory to ensure each batch sample is tested to produce an accurate Certificate of Analysis with supporting data identifying (i) the chemical profile, including THC, THCA, THCV, CBD, CBDA, CBG, CBN and terpene percentages by weight, and (ii) the presence of contaminants, including heavy metals (e.g., arsenic, lead, cadmium, mercury), pesticides regulated by US EPA (e.g., eagle 20), solvents (eg, CO2, butane, propane, heptane, benzene, toluene, hexane, xylenes), any visible foreign or extraneous material not intended to be part of product (e.g., hair, insects, metal, plastic), moisture content, and microbiological impurities. If qualified, Green Aloha will commission the laboratory to conduct stability testing to assess product degradation over time and establish an expiration date. Green Aloha will maintain all testing results and records for 6+ years.

Certificates of Analysis. Upon receipt of each Certificate of Analysis, pertinent data will be recorded in our tracking system and included on product labels. If a sample fails to conform to testing standards set forth in HAR §11-850-85, or fails to meet our own more stringent quality control standards, the entire batch will be quarantined for destruction in accordance with our DOH-approved Disposal and Destruction Plan. No batch may be released from quarantine without receipt of a new Certificate of Analysis showing the batch conforms to testing standards and express authorization from DOH.

10. SIGNAGE, PACKAGING, LABELING AND CHAIN OF CUSTODY COMPLIANCE

Exterior Signage Compliance: HAR §11-850-91. Green Aloha's retail dispensing locations will only utilize a single exterior sign, which shall be no greater than 1,600 square inches and shall not exceed any more restrictive size limitations set forth by the Kaua'i Comprehensive Zoning Ordinance (CZO) nor applicable lease terms. The sign itself will only identify the business name in text without any pictures or illustrations.

Packaging Compliance: HAR §11-850-92. Green Aloha will package all products at the production centers and inspect the same for integrity and compliance prior to transporting to our retail facilities. Retail packaging will (i) be child-resistant in accordance with Title 16 CFR 1700 of the Poison Prevention Packaging Act, (ii) be opaque, (iii) protect the contents from contamination and not impart any toxic or harmful substance, (iv) contain no more than 10 mg of THC for one dose, serving, or single-wrapped item, and (v) not contain more than 100 mg of THC per pack or container with multiple doses, servings, or single-wrapped items, including any containers of oils.

Once licensed, we will stock compliant product packaging, such as medical-grade polypropylene containers that are airtight, moisture-resistant, and meet ASTM and CPSC standards for child-resistant containers. We will leverage the purchasing power of Have A Heart, an operator of 5 medical marijuana dispensaries in Washington managed by Green Aloha part-owner Ryan Kunkel, to obtain appropriate retail product packaging here in Kaua'i, thereby reducing the cost of goods and passing on savings to our patients.

Labeling Compliance: HAR §11-850-92. All required product package labels will be affixed to our retail packaging at the production centers on the actual date of packaging using our label making software and equipment recommended by BioTrackTHC and will

be inspected for integrity and compliance upon creation (and again prior to dispensing).

Our Quality Assurance Manager will oversee all packaging and labeling procedures to ensure the safe, tamper-free, unadulterated packaging of our products and the unobstructed placement of clear, legible and compliant labels on each product package.

Labels will feature black lettering on a white background only, with no pictures or graphics. At a minimum, labels will include (i) the net weight in ounces and grams or volume, and the equivalent physical weight of the marijuana used to produce the manufactured marijuana product (MMP), if applicable, (ii) the full cannabinoid profile as reported on the Certificate of Analysis, (iii) our license number and name of production center where produced, (iv) the product's batch number and date of packaging, (v) the computer tracking inventory identification number and barcode, (vi) the date of harvest or manufacture and "Use by date," (vii) instructions for use, and (viii) the phrases "For medical use only," "Not for resale or transfer to another person," and "Keep out of reach of children."

Green Aloha will affix a second label to the outside of packaging adjacent to the first label. The additional label will (i) if applicable, disclose the type of extraction method used and state that no solvents were used in the extraction to produce the MMP (since we only use all-natural, solvent-free extraction), (ii) identify the laboratory that performed the testing, and (iii) include the following warnings: "This product may be unlawful outside of the State of Hawai'i and is unlawful to possess or use under federal law," "This product has intoxicating effects and may be habit forming," "Smoking is hazardous to your health," "There may be health risks associated with consumption of this product," "This product is not recommended for use by women who are pregnant or breast feeding," "Marijuana can impair concentration, coordination, and judgment. Do not operate a vehicle or machinery under

the influence of this drug,” and “When eaten or swallowed, the effects of this drug may be delayed by two or more hours.” If the second label cannot fit on the outside of packaging, it will be included on a package insert.

We recognize that protecting minors from diversion is a primary goal of the State’s medical marijuana regulations. Accordingly, all our labels and packaging will include prominent warnings to parents to keep the product out of reach of children.

Chain of Custody Compliance: HAR §11-850-61. Using the BioTrackTHC inventory tracking system, Green Aloha will maintain an unbroken chain of custody for all our inventory from propagation/germination through sale or disposal and destruction and instantly produce accurate chain of custody reports for any item tracked. We plan to use the same tracking system provider as the Department of Health (DOH), so we are guaranteed seamless integration and interfacing capabilities with DOH’s computer tracking software system to allow DOH real-time, 24/7 access to our own tracking system and inventory reports, including historical action logs for each product.

To ensure reporting accuracy and facilitate the unbroken chain of custody, staff will record every action taken to plants or products in the BioTrackTHC system, including but not limited to the date, time, action taken, the plant or product ID, and employee ID of the persons making the entry and taking the action. BioTrackTHC will enhance diversion prevention by facilitating the identification and source of any break in the chain of custody. Note, all operational activities will be monitored and recorded by our surveillance system, providing redundant oversight of inventory custody.

11. DISPOSAL AND DESTRUCTION PLAN

Green Aloha's detailed Disposal and Destruction Plan has been vetted by 808 Genetics and Reach Consultants (respectively, our Kaua'i-based and Colorado-based cultivation consultants), Have A Heart (our Washington-based retail consultants and affiliated Dispensary), Transcend Inc. (our Hawai'i-based security consultant), Ray Maki (Kaua'i Chapter President of Hawai'i Farmers Union United) and our Scientific Advisory Board. Pursuant to HAR §11-850-43, the company will seek the approval of our Disposal and Production Plan from the Hawai'i Department of Health ("DOH") and/or the Department of Public Safety-Narcotics Enforcement Division Administrator before implementation. We will incorporate recommended revisions accordingly and will regularly test and review our Plan to ensure effectiveness and safety are maintained.

Inventory Tracking. To effectively dispose of unused, unsold, recalled, contaminated or expired materials, and waste product from operational activities ("Waste Material"), and to eliminate the potential for diversion of Waste Material to unauthorized persons, Green Aloha will thoroughly train staff to record every action taken to plants or products at all stages of cultivation, manufacture and dispensing (including the date, time, weight/amount, type/nature of waste, recommended disposal procedure, and identification of the person making the entry) using our customized perpetual seed-to-sale inventory tracking system offered by BioTrackTHC. By using the BioTrackTHC system, we are guaranteed full integration with DOH's system allowing 24/7 real-time access to inventory, sales and other tracking information. We will be able to account for our entire physical inventory, including products sold and Waste Material earmarked for destruction and disposal, and can instantly produce accurate reports identifying the location, quantity, status, chain of custody

and other details of our inventory and Waste Material.

Pursuant to protocol, in each instance material is designated as Waste Material, it will be documented in our inventory tracking system, recorded as a unique "batch" for tracking purposes, and subtracted from its original inventory category (e.g., plant, trimmings, in-process extract, product pending test results, product pending sale), thereby maintaining the perpetual accuracy of our records at all times. Failure to record an action is grounds for termination of employment with Green Aloha. With such precision and control over inventory, we will be able to confidently manage our Disposal and Destruction Plan to ensure the integrity of our products and patient safety.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Quarantine Rooms. Prior to destruction, all designated Waste Material, including that from our retail dispensing locations, will be immediately transferred to [REDACTED] [REDACTED] Quarantine Rooms [REDACTED]. These [REDACTED] rooms will separate Waste Material from all other inventory and allow quarantined inspection and analysis in an effort to prevent the spread of contamination and to preserve the integrity of our stock of plants and products.

Quarantine Rooms will be [REDACTED] limited to authorized

personnel highly trained in our quarantine procedures. [REDACTED]

[REDACTED] All personnel will be required to wash hands and forearms with non-alcoholic antiseptic cleanser, wear clean lab coats and disposable shoe covers, [REDACTED] before entering any other part of the facility. All staff handling Waste Material must maintain good hygiene, wear powderless nitrile gloves, and ensure clean uniforms. If uniforms become soiled, the employee must immediately change clothes and remove the soiled articles from any areas of the facility containing plants or products. Uniforms will be washed daily.

To mitigate the spread of mold, mildew or other harmful contaminants, all Quarantine Rooms will be sealed off from the rest of the facility. Within the rooms will be large, air-tight containers used to store various types of Waste Material pending inspection, destruction or disposal. Each container will be clearly marked to indicate its contents (e.g., "Green Waste," "Recalled Products," "Pending Retest," "Expired Products," "Contaminated Plants," etc.). Once a container has been emptied, it will be cleaned, sanitized [REDACTED] and prepared for re-use.

Destruction of Waste Material. Safe, uncontaminated vegetative waste (e.g., leaves, stems) will be composted, if authorized. Unsafe and unusable Waste Material will be disposed of consistent with Schedule 1 substances. We will seek any necessary disposal permits from the County of Kaua'i, the Department of Health and the Department of Public Safety. Upon a determination that Waste Material must be destroyed, authorized employees will update our BioTrackTHC inventory system accordingly, then pulverize the material [REDACTED] to render it inert. The resulting mixture will be placed in an

air-tight container and discarded in a manner approved by DOH.

Pursuant to Green Aloha's Disposal and Destruction Plan, all quarantine, destruction, and disposal activities must take place within the unobstructed view of the facility's video surveillance system and be witnessed by at least 2 authorized staff members whose identifications must be indicated in disposal records. The BioTrackTHC inventory tracking system will always be updated as, or immediately after, each and every step of the disposal and destruction process, including but not limited to the initial designation of the item(s) as Waste Material, transfer to or release from quarantine, and any testing or retesting results.

In the rare circumstances where a product batch sample has undergone independent laboratory testing and the results indicate that the batch does not conform to testing standards set forth in HAR §11-850-85 or does not meet Green Aloha's own quality control standards (as confirmed from a review of the product's historical profile records), the entire affected batch will be immediately transferred to a Quarantine Room for inspection and storage pending retesting. If the retested sample again does not conform to testing standards or to our quality control standards, then the entire batch of the affected product must be destroyed in accordance with protocol. Note: Quarantine for any re-tested batches can only be lifted by DOH upon receipt of a new Certificate of Analysis from an independent laboratory indicating the batch conforms to all standards.

Waste Material Disposal. During our meeting with Kaua'i Police Department (KPD) representatives on January 14, 2016 to address any law enforcement concerns with our operations on the island, we were informed that Kaua'i Humane Society (KHS) handles the destruction of marijuana on behalf of KPD by incinerating the materials in a filtered chamber.

Green Aloha part-owner Daniel Hempey, Esq. is a former member of the Board of Directors of the Humane Society and currently teaches search and seizure law to KHS field officers. He will assist us in securing their incineration services, when necessary.

If Green Aloha cannot utilize KHS services for Waste Material destruction, we propose to treat the unrecognizable and unusable Waste Material mixture as if it were hazardous or medical waste and dispose of it in a safe manner using a local licensed waste removal provider, such as Hawai'i Bio, NCNS Environmental, Cameron Chemical Corp., Enviro Services & Training Center, Oasis Environmental Group, Pacific Commercial Services, or Pacific Environmental Corp. We will vet the various providers and engage their services upon licensure.

Note: Green Aloha is prepared to adopt any alternative disposal processes the DOH requires. These include composting, on-site incineration or off-site incineration.

Composting. Green Aloha prefers to compost Waste Material that would not pose a threat to the quality and integrity of its products or to the safety of the public and patients, subject to the approval of DOH. Composting on-site in a dedicated, secure area of the premises would significantly reduce the overall carbon footprint of Dispensary operations by taking otherwise unusable material and converting it into a beneficial soil amendment for operations.

Rubbish Removal. Green Aloha will discard non-Waste Material rubbish (eg, office trash, dirt/dust, and other refuse) and recyclables in appropriately sized and marked bins on a daily basis as part of closing procedures. Green Aloha intends to utilize municipal refuse and recycling services to dispose of these non-harmful materials.

12. PRODUCT SAFETY PLAN

Green Aloha sought expert advice from its industry consultants to develop an exhaustive Product Safety Plan exceeding the standards set forth in HAR §11-850-75 and provide guidelines for our staff to maintain absolute control over the integrity of our inventory from seed to sale, thereby ensuring our products are safe for use by qualifying patients. With oversight from our legal team, DeCosta Hempey Meyers LLC, the second largest law firm on Kaua'i which includes judges and former prosecutors, our operations will comply with all State and County health, safety, and sanitation regulations at all times. Kaua'i attorney Daniel Hempey, Esq., a Green Aloha part-owner, will serve as Director of Compliance.

Facility Maintenance and Workplace Conditions. Based on best practices adopted from the most sophisticated and professional medical marijuana operators nationwide, including our affiliate, Have A Heart medical dispensaries, and our consultant, Reach Consultants, Green Aloha will ensure clean, sterile, and sanitary facilities. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] Green Aloha will erect entirely new, state-of-the-art production facilities specifically designed for the cultivation and manufacturing of medical marijuana.

Core tenets of our Product Safety Plan to prevent or mitigate product contamination include (i) daily litter and waste removal, (ii) proper personal hygiene, (iii) suitable equipment storage and cleaning protocol, (iv) regular cleaning and inspections of all floors, walls, ceilings and equipment, (v) proper use, maintenance and separate storage of [REDACTED] [REDACTED] cleaning compounds, sanitizing agents, and pest control measures, (vi) adequate lighting in all areas containing plants or products and in all areas where equipment, tools

or utensils are cleaned, (vii) appropriate [REDACTED] disease prevention protocol, including regular disposal of rubbish, [REDACTED] [REDACTED] climate-controlled rooms, [REDACTED] dehumidification, [REDACTED] products for marijuana pest and disease prevention, and other protections, (viii) a prohibition against animals, except service animals pursuant to HRS 347-2.5, and other sanitary measures.

To facilitate the sanitary condition of our premises, Green Aloha will install an ideal number of hand-washing facilities throughout the production centers and retail locations. Staff will be required to wash their hands before and after work, before and after handling plants/products, after touching another person's exposed skin, after coughing or sneezing, eating food, using the restroom, and any other instance of soiling or contaminating any part of their body. Moreover, we will install [REDACTED]

[REDACTED] showers in the staff locker rooms in our production centers. Staff will be required to wear clean uniforms at all times, including powderless nitrile gloves, hair nets, scrubs, booties, etc. Green Aloha will provide laundry service for employees.

Green Aloha has developed an Employee Injury and Illness Prevention Plan to complement our sanitary practices, which include excluding from the facility any person with a contagious illness, open lesion, or other potential source of contamination. Staff must immediately report any health condition that may affect the sanitary condition of the workplace, and management must make conservative decisions to protect product integrity and employee safety. Dismissed staff may require a physician's note to return to work.

Standard Operating Procedures. Product safety starts with the ability to accurately track inventory at all stages of production, manufacturing, transport, and dispensing.

Accordingly, Green Aloha plans to utilize the BioTrackTHC inventory tracking system, which uses integrated hardware and software to track all inventory (using a barcoding system) from seed-to-sale. Precise historical reports can be instantly produced by individual plant/product or by batch. With BioTrackTHC, we can search our inventory records to quickly determine which, if any, plants or products must be inspected and/or quarantined in the event of a discovered contamination or other event affecting product safety. All staff will be trained on the proper use of BioTrackTHC and our tracking policies and procedures.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] Green Aloha will also consult with Hawai'i-based 808 Genetics to develop a list of pest, mold and mildew-resistant medical marijuana strains with cannabinoid and terpene profiles appropriate for our patients. With strict adherence to our Cultivation Plan, and a comprehensive chemical-free Pest Prevention and Control Plan, Green Aloha will maintain a safe, contaminant-free environment.

Green Aloha will strictly avoid the potential hazardous health risks associated with solvent-based extraction techniques popular with medical marijuana manufacturers. Residual solvents left in any product consumed by patients may cause severe illness or other physical harm. In the spirit of product safety assurance, we have sought the expert advice of 808 Genetics to implement all-natural, solvent-free extraction techniques using proprietary methods (e.g., controlled temperature and pressure) and equipment (e.g., an 808 Genetics designed rosin press) which produce safe extracts containing the full spectrum of terpenes and cannabinoids that can either be (i) dispensed as a final product or

(ii) manufactured into a capsule, lozenge, pill, tincture, ointment, skin lotion, or other permissible product (preferably smoke/vapour free medicine).

Packaging materials and storage conditions are important considerations for product safety. Accordingly, we will only use C-vaults — stainless steel containers specifically designed for storing marijuana — to store bulk amounts of trimmings, extracts, in-process products and products pending testing. All bulk storage packaging will be clearly labeled to indicate the contents and status of the container, date packaged, weight/quantity of material within, batch ID number, and other pertinent information. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

To verify the integrity and safety of our products prior to dispensing, Green Aloha will engage a certified independent laboratory to perform an assortment of profile and contaminant testing for each batch of medicine produced. Once a batch of final products has passed independent testing and been released for dispensing (as determined by our Quality Assurance Manager after verification that the batch meets our own more stringent quality control standards), it will be packaged at the production center and prepared for retail dispensing. Such retail packaging will be affixed with unobstructed, compliant labels and will be designed to (i) be child-resistant in accordance with Title 16 CFR 1700 of the Poison Prevention Packaging Act, (ii) be opaque, (iii) protect the contents from contamination without imparting any toxic or harmful substance, (iv) contain no more than 10 mg of THC for one dose, serving, or single-wrapped item, and (v) contain no more than 100 mg of THC per pack or container with multiple doses, servings, or single-wrapped items,

including any containers of oils. Furthermore, our retail packaging will be pharmacy inspired medical-grade containers that are airtight, moisture-resistant, and meet ASTM and CPSC standards for child-resistant containers. All retail packaging will be plain in appearance and designed in a way that is not attractive to children.

At the retail location, staff will be trained to properly handle all packages in order to maintain the integrity and safety of the products. Any containers that have been damaged, mishandled or otherwise tampered with shall be quarantined for inspection and sent back to a production center for re-packaging or destruction and disposal, as the case may be.

Green Aloha will never alter our plants or products to change their appearance, flavor or smell in a way that would appeal to minors or detrimentally effect patient safety.

Quality Assurance and Quality Control. Throughout the production, manufacturing and dispensing processes, Green Aloha will maintain absolute control over our products through our Quality Assurance (QA) and Quality Control (QC) Plan. The QA and QC Plan will be overseen and managed by our QA Manager, Ray Maki (Co-Chair of the Hawai'i Farmer's Union United and part-owner of Green Aloha), who will provide independent supervision over staff to assure compliance with our standards. Employees found violating company protocol with regard to product safety are subject to immediate termination.

Our QA and QC Plan includes regular spot checks of live plants (looking for pests, diseases, etc.), internal and independent testing for contaminants, announced and unannounced inspections (particularly of extraction, packaging, transport, stocking, and storage procedures), First-In-First-Out inventory control system (assuring safe, fresh product), redundant inspections of all product packaging and labeling, and a prohibition against employees from entering facility areas not directly associated with their specific tasks.

13. BUSINESS LICENSE REVOCATION HISTORY

Neither Green Aloha, nor any of its owners, investors, proposed managers or prospective employees, has ever had a business license revoked for any reason in any jurisdiction. Our attorneys, DeCosta Hempey Meyers LLC, and security consultant, Transcend, Inc. (led by Honolulu Police Department Maj. Jeff Owens (Ret.)) carefully vetted all personnel at all levels to ensure only persons with the utmost integrity, honesty, professionalism, and morals were invited to participate in our proposed business.

Many of our owners have impressive histories operating successful licensed businesses in highly regulated industries, including dispensaries, medicine, pharmacy and law.

Applicant Biography. *Justin Britt*, was raised on Kaua'i attended Aloha Preschool, Hanalei Elementary, Kapa'a Intermediate and Kapa'a High School before graduating from Occidental College in Los Angeles, CA. Mr. Britt returned home to the Garden Island and operated, and consulted for, several successful business before founding Hawai'i Life, one of the largest and fastest growing companies in the State with 13 retail office across all major islands. Justin has a great respect for Kaua'i and strong ties to the community in which his family lives, works and plays.

Inline with Mr. Britt's generosity and past contributions to the place he calls home, Green Aloha will donate \$10,000 to The Drug Policy Forum of Hawai'i to be used towards medical marijuana Continuing Education courses for Doctors, regardless of being awarded a license. If selected by the Hawai'i Department of Health (DOH) as a winning applicant, Green Aloha will (i) dedicate 5% of profits (up to \$500,000 per year) to the proposed Residential Substance Abuse Treatment and Healing Facility for Adolescents on Kaua'i, (ii) create a program to subsidize medicine for underprivileged patients in need, and (iii) provide

subsidized medicine to end of life patients, cancer patients, patients with debilitating medical conditions and children-patients with epilepsy.

During this application process, Mr. Britt contacted several government offices and entities for input, including the Mayor of Kaua'i and the Kaua'i Police Department, in an attempt to best understand how to introduce and integrate the island's sole Dispensary into such a small and family oriented community. As a long-time resident with a child who attends the same school he did when he was young, Justin is sensitive to local residents who can be severely affected by the slightest change in their surroundings. To minimize the community and environmental impact, careful consideration was taken when choosing an appropriate location for our retail and production facilities.

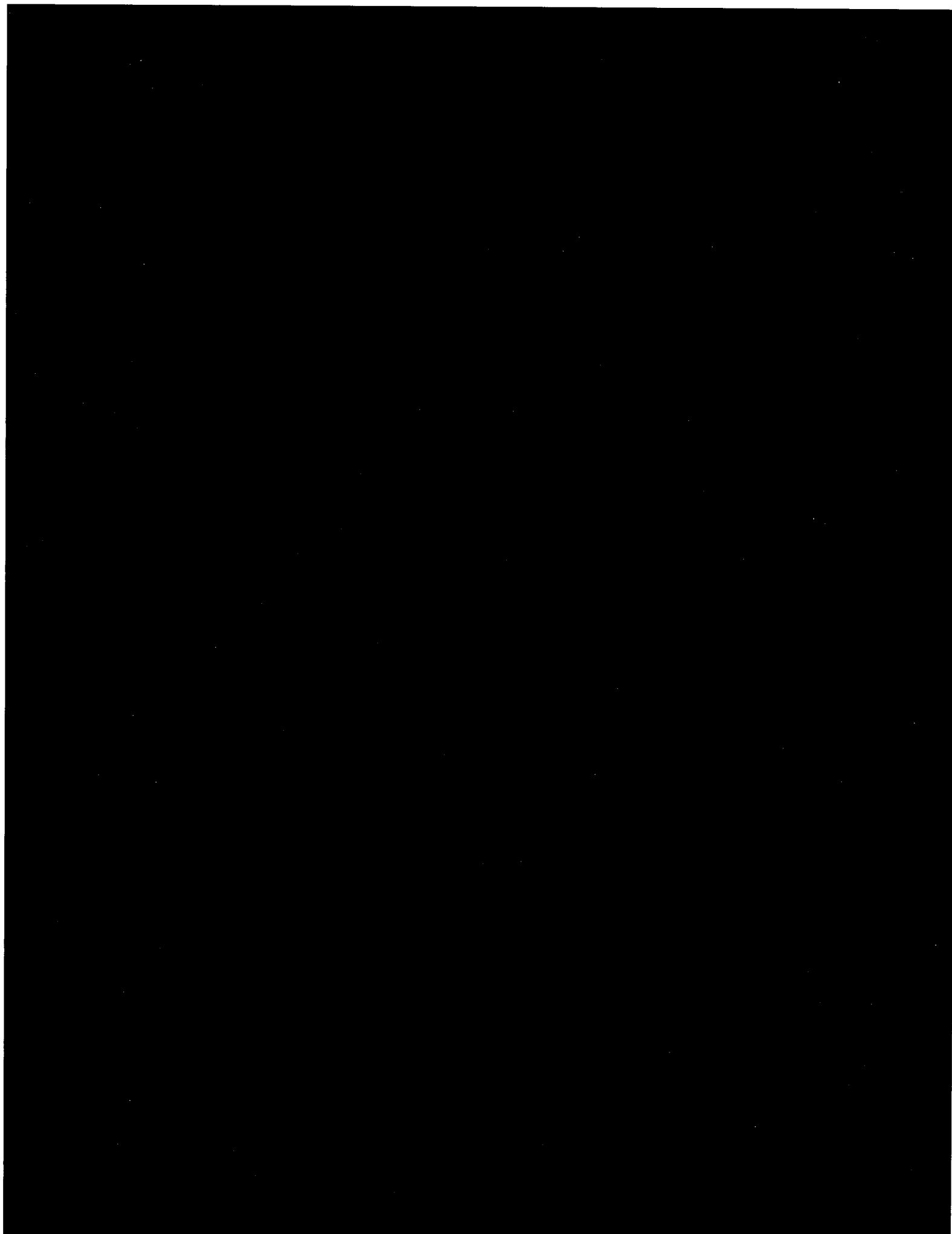
Justin Britt has taken the time to study, listen and learn about the medical marijuana business from top industry experts and is uniquely positioned to lead a team that understands both the benefits and dangers of this polarizing medicine and how it can adversely affect the community.

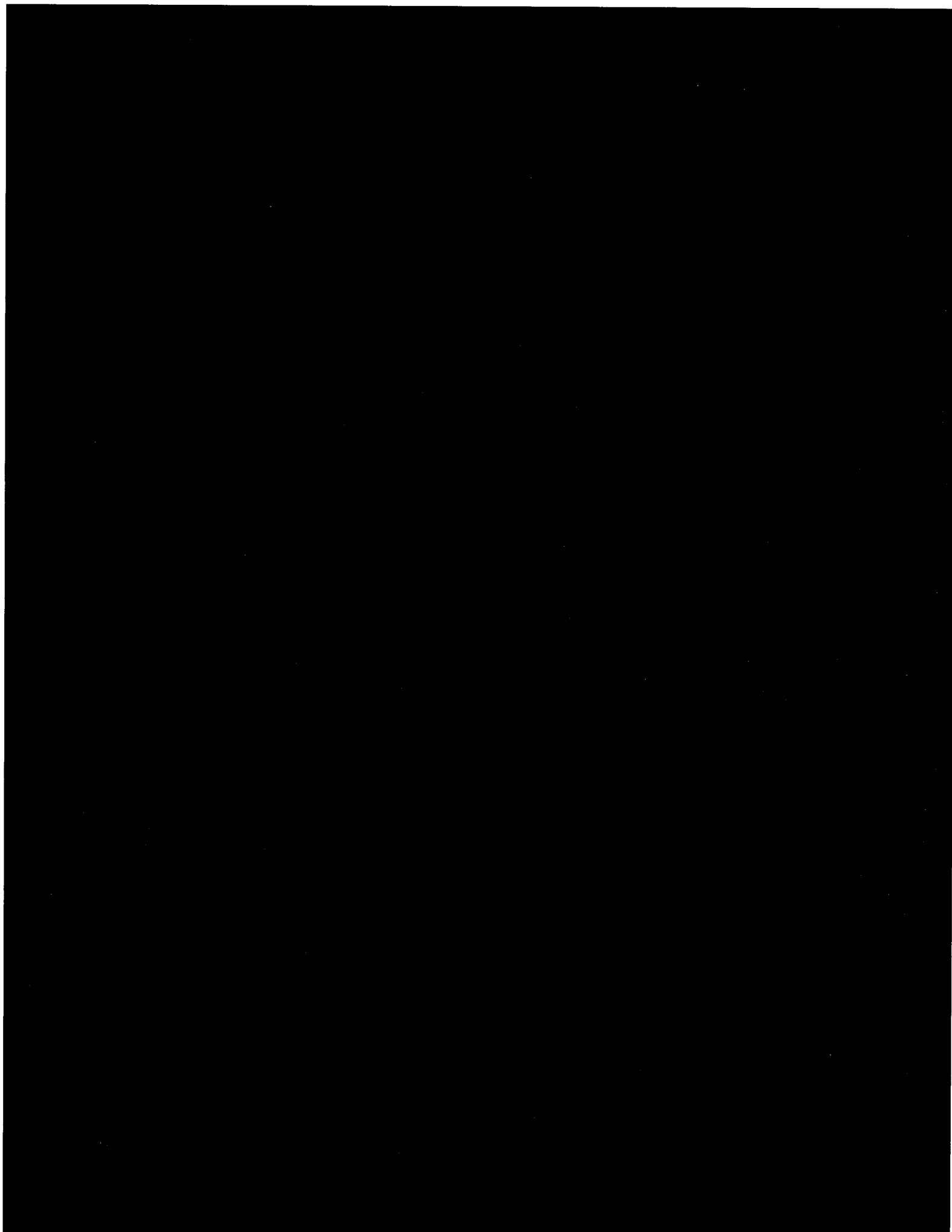
Employing a licensed pharmacist shows Mr. Britt's serious consideration for the professional nature of this program. Moreover, choosing native, organic and sustainable cultivation techniques is in line with his vision to deliver clean, safe and environmentally friendly medicinal products to the people of Kaua'i.

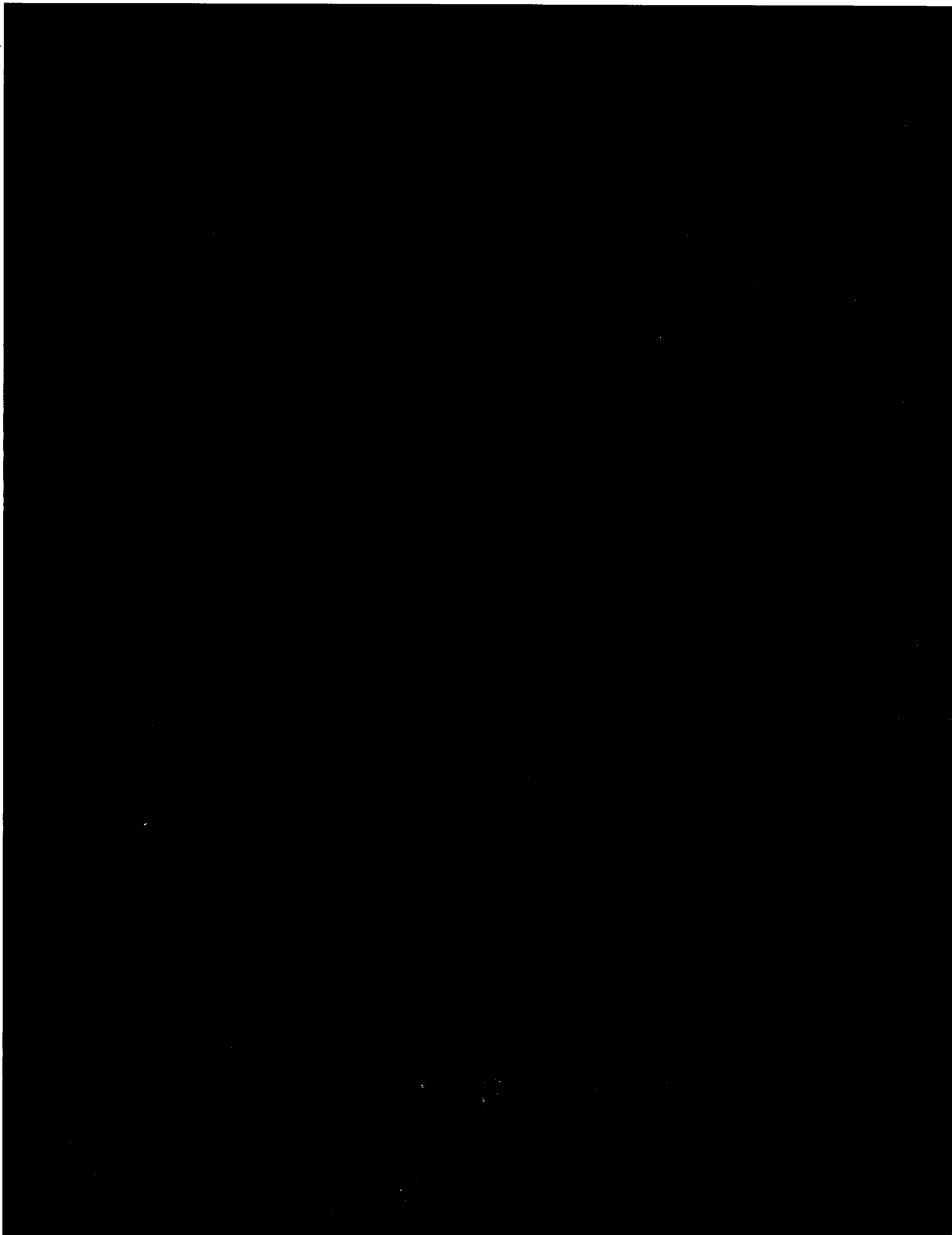
Green Aloha hopes to work with the DOH as an active partner in the advancement of Hawai'i's Medical Marijuana program. Green Aloha's patient first approach prioritizes patient and product safety as well as regulatory compliance and transparency. Our Kaua'i based team will strive to exceed all patient, caregiver, community and DOH expectations. Mahalo for your consideration.

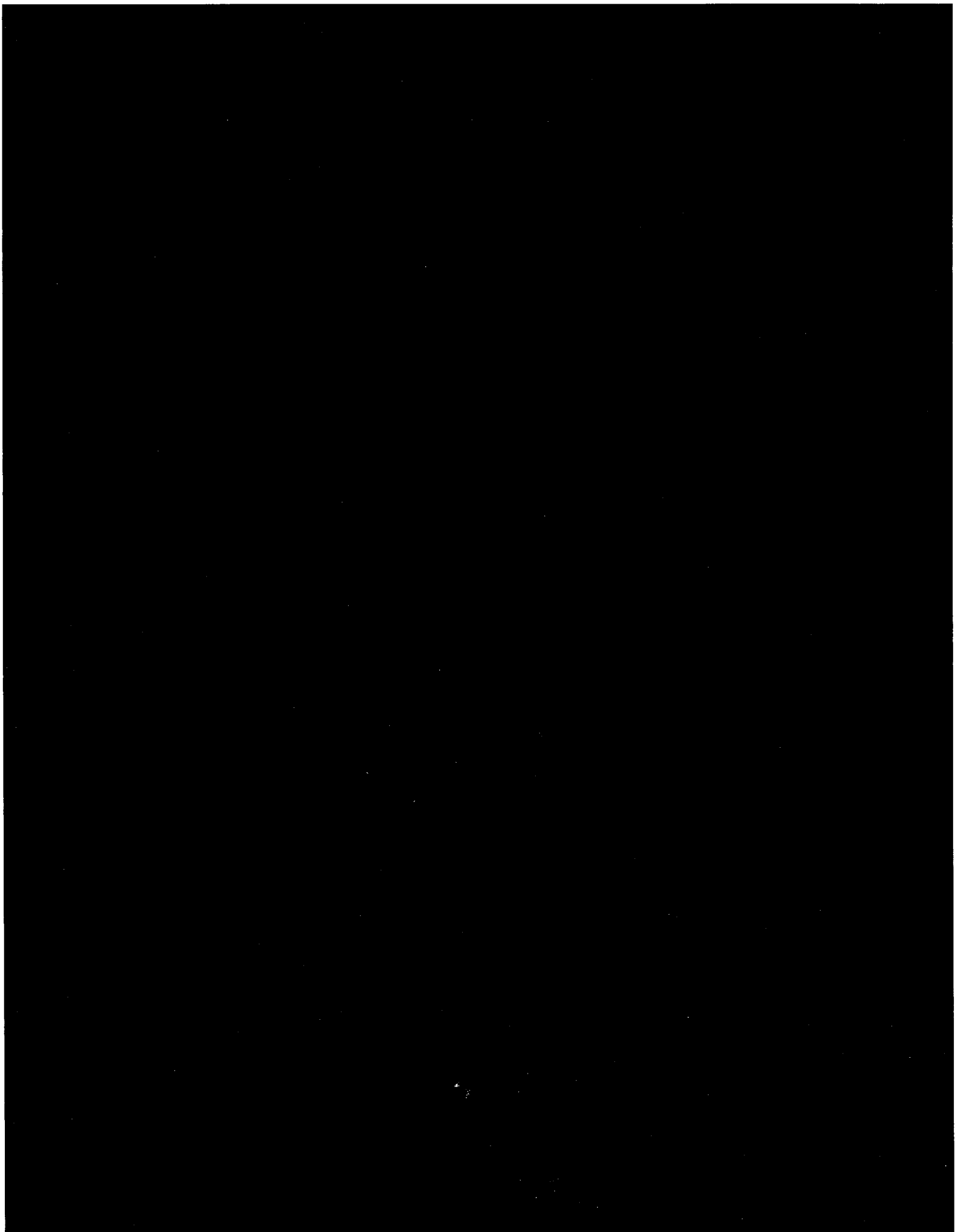
**BYLAWS
OF
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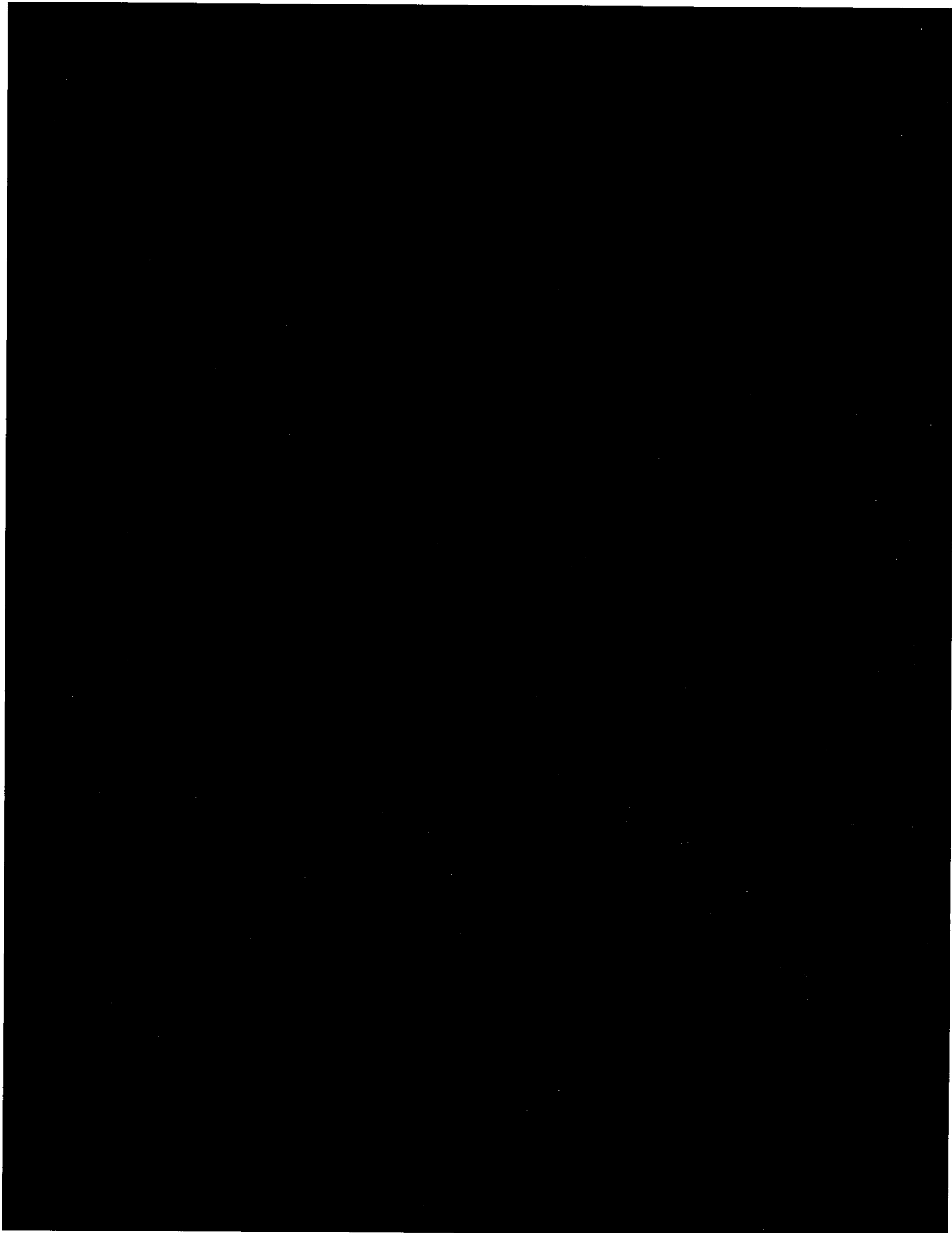
These Bylaws (the “Bylaws”) of Green Aloha Ltd., a Hawaii corporation (the “Corporation”), are effective as of January 14, 2016.

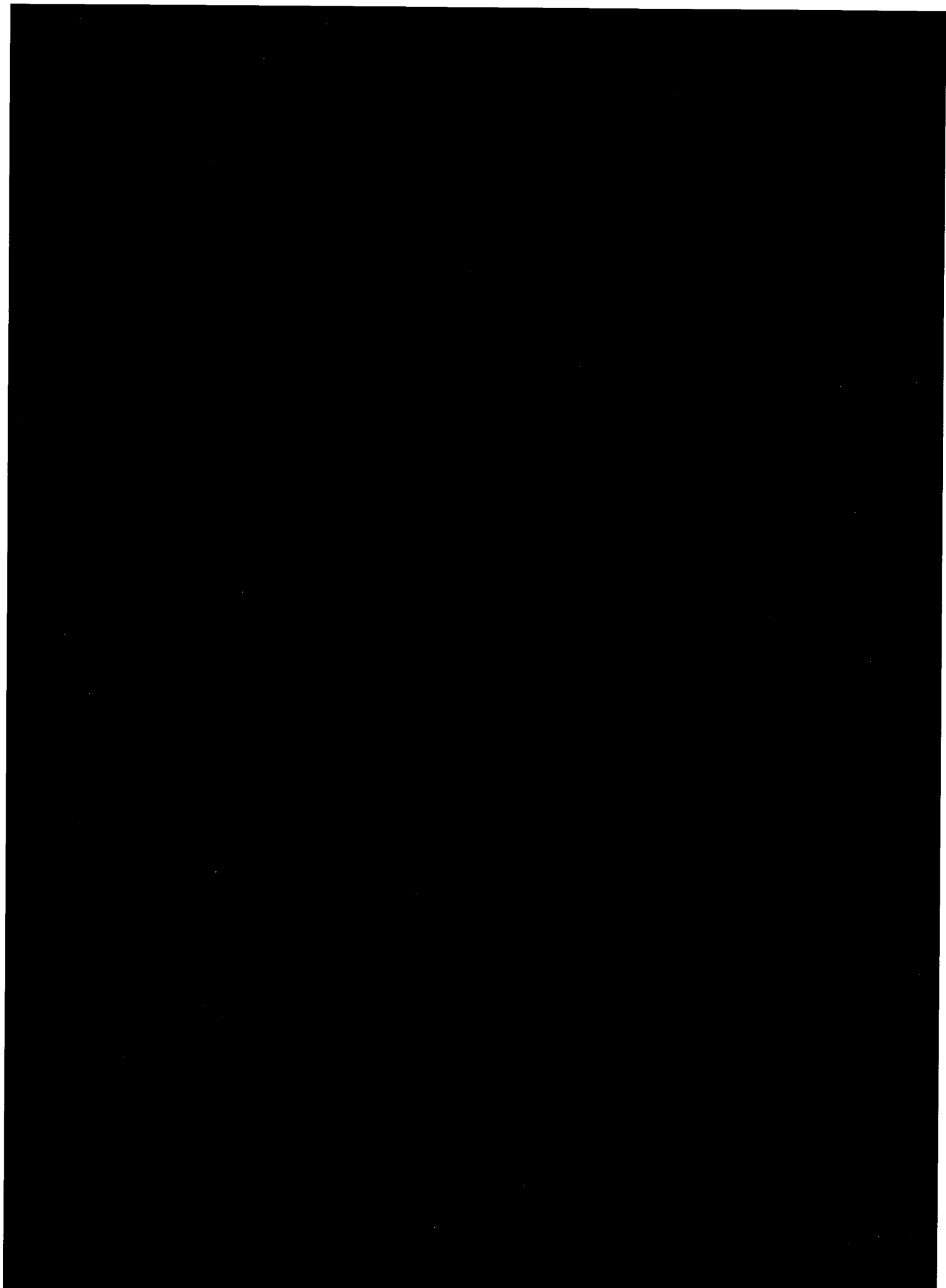


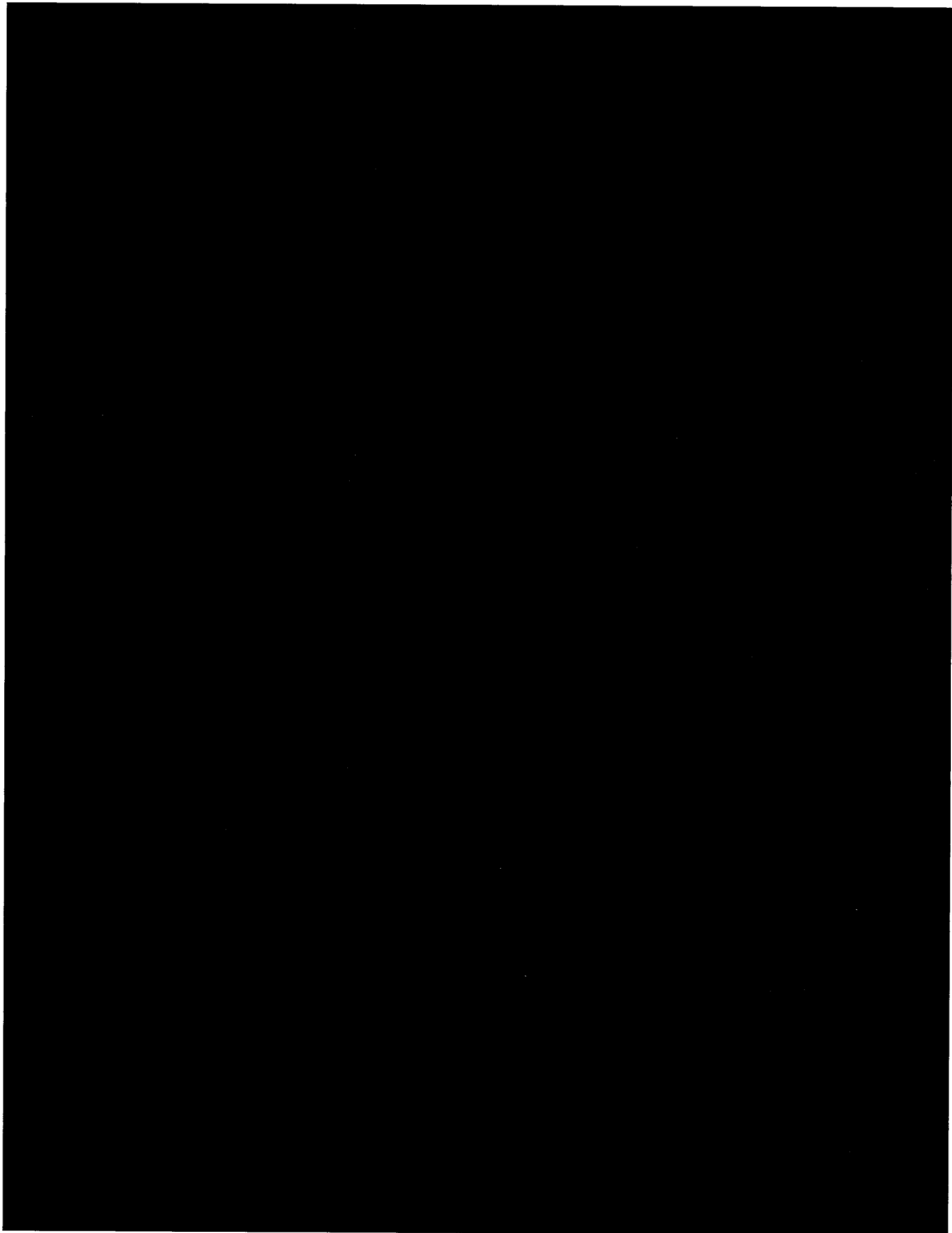












the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There are a number of reasons why the world's population is becoming more undernourished. First, the world's population is growing rapidly, and the number of mouths to feed is increasing. Second, the world's population is becoming more urbanized, and the demand for food is increasing. Third, the world's population is becoming more affluent, and the demand for food is increasing. Fourth, the world's population is becoming more mobile, and the demand for food is increasing. Fifth, the world's population is becoming more educated, and the demand for food is increasing.

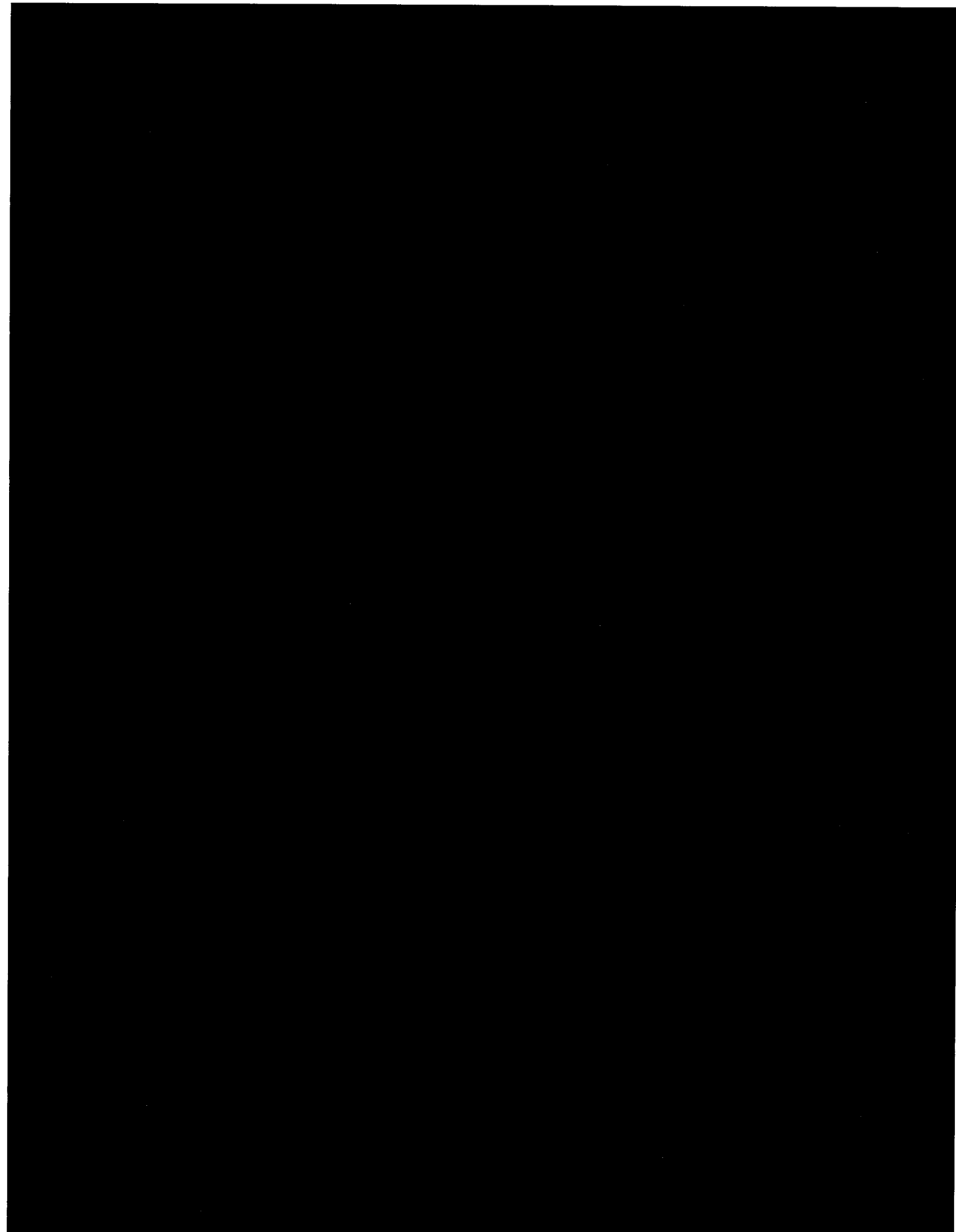
There are a number of ways in which the world's population can be fed. First, the world's population can be fed by increasing the production of food. Second, the world's population can be fed by increasing the distribution of food. Third, the world's population can be fed by increasing the consumption of food. Fourth, the world's population can be fed by increasing the quality of food. Fifth, the world's population can be fed by increasing the quantity of food.

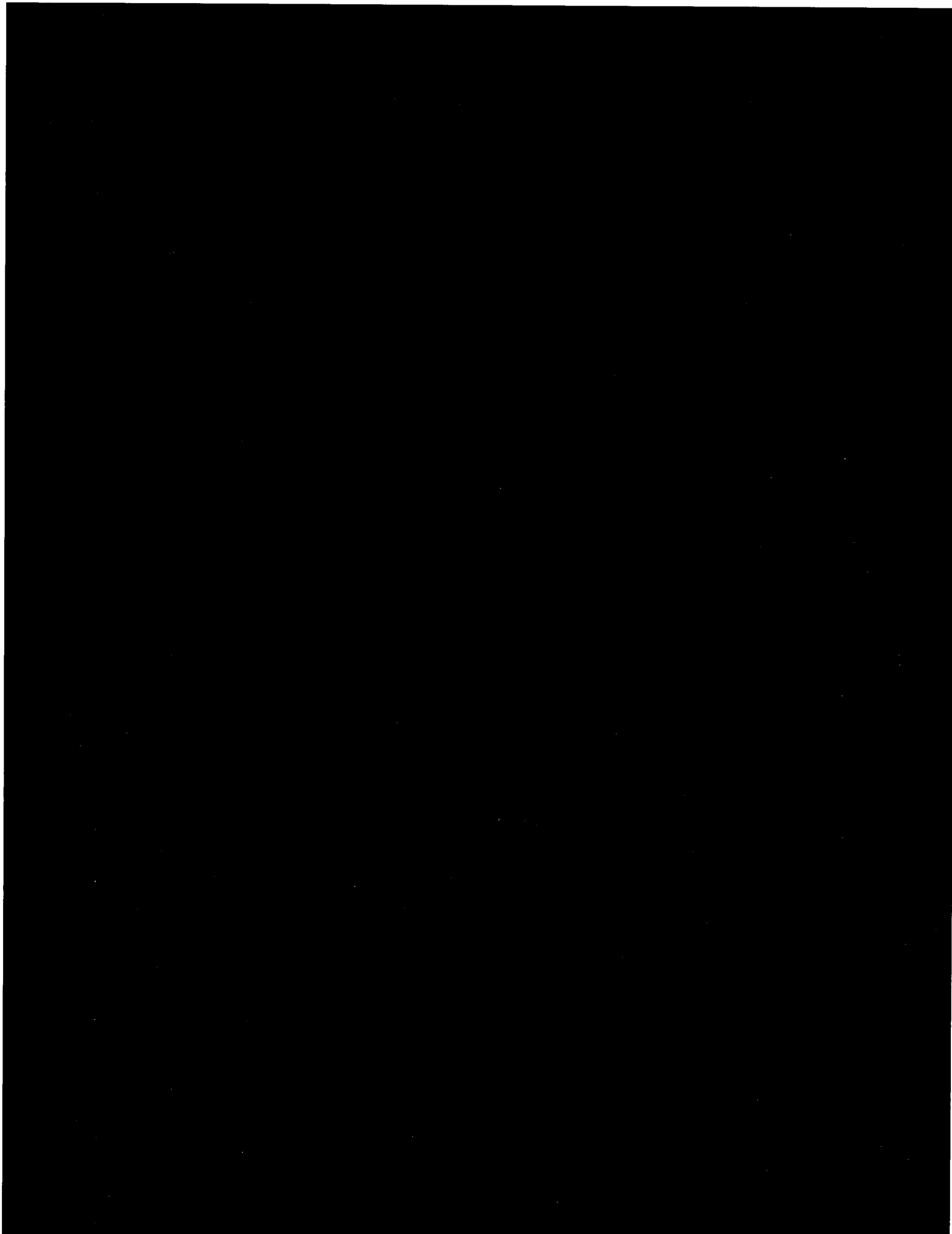
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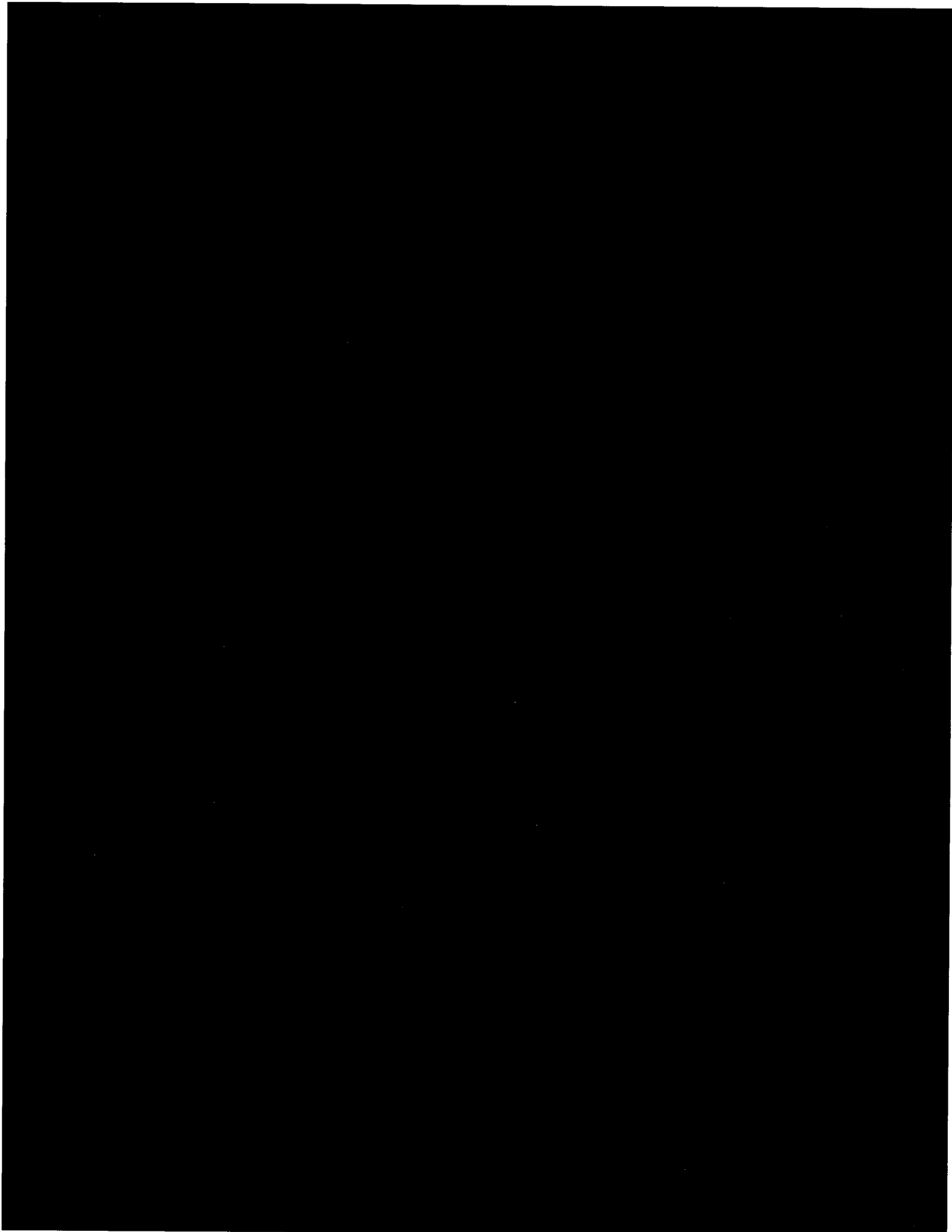
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the 'information' and 'communication' fields. The 'information' field is defined as:

...the study of the nature, sources, uses, and management of information, and the study of the communication of information. The field includes the study of the history, theory, and practice of information science, and the study of the social, cultural, and economic aspects of information and communication. (p. 1)

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the 1990s, the number of people in the world who are under 15 years of age is expected to increase from 1.2 billion to 1.5 billion.

As the world's population grows, the demand for food and other resources will increase. This will put pressure on the environment and on the world's food supply.

One way to meet this demand is to increase the amount of food that is produced. This can be done by using more land for agriculture or by increasing the productivity of the land that is already being used.

Another way to meet this demand is to reduce the amount of food that is wasted. This can be done by improving the way that food is stored and distributed.

There are many other ways to meet the world's growing demand for food and other resources. It is up to us to decide which way is the best.

The world's population is growing rapidly. This is a challenge for the world's food supply. We need to find ways to meet this demand.

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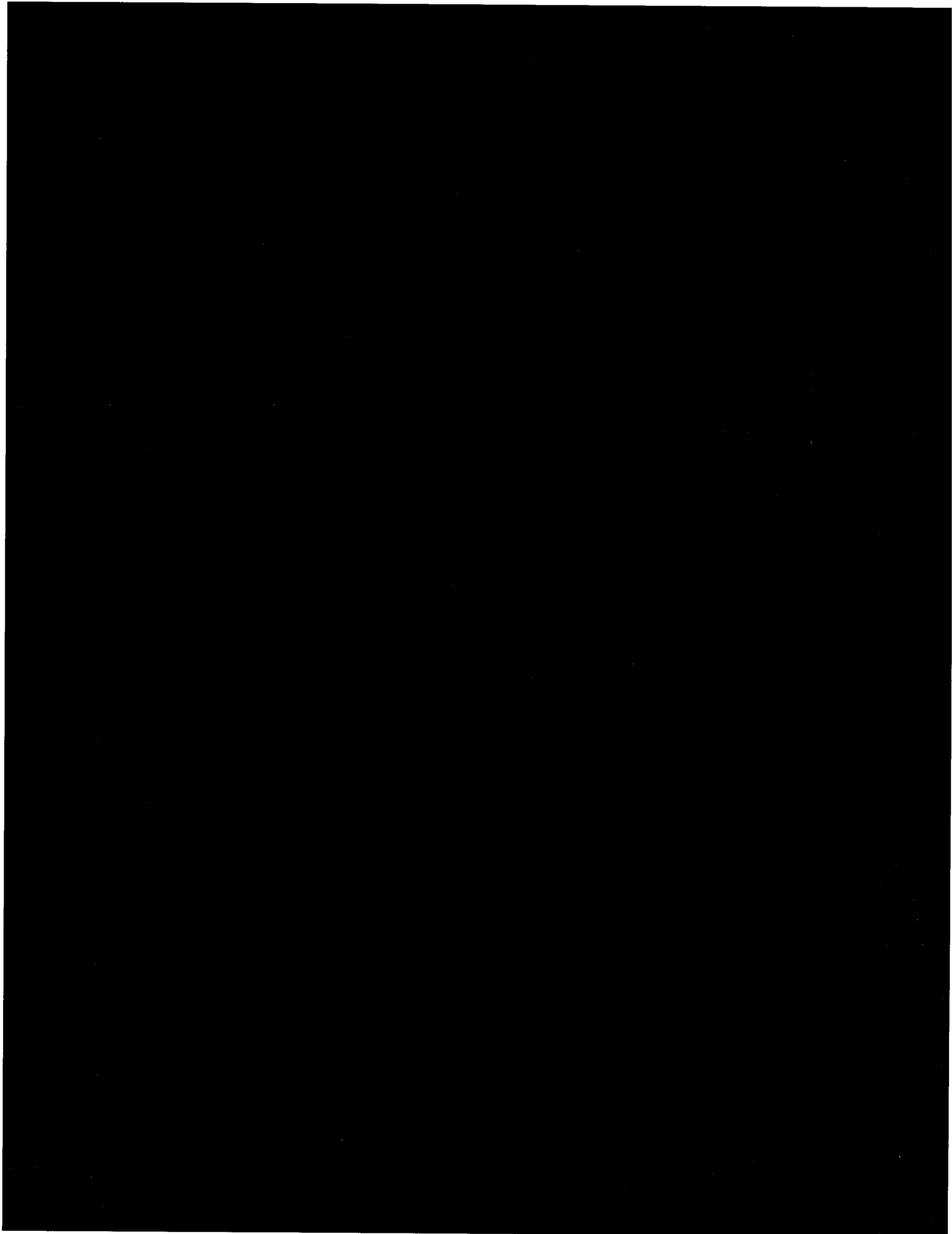
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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office of National Statistics 2000). The number of people aged 65 and over is projected to increase by 2.5 million by 2020 (Office of National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has identified the need to develop a new approach to the care of the ageing population. This approach should be based on the principles of 'active ageing', which is defined as 'the process of optimising the opportunities for health, participation and security in later life' (Department of Health 1999, p. 1).

The Department of Health (1999) has identified a number of key areas for action in order to achieve the goals of active ageing. These include: (1) improving the health of the ageing population; (2) increasing the participation of the ageing population in society; and (3) ensuring the security of the ageing population. The Department of Health (1999) has also identified a number of key areas for action in order to achieve the goals of active ageing. These include: (1) improving the health of the ageing population; (2) increasing the participation of the ageing population in society; and (3) ensuring the security of the ageing population.

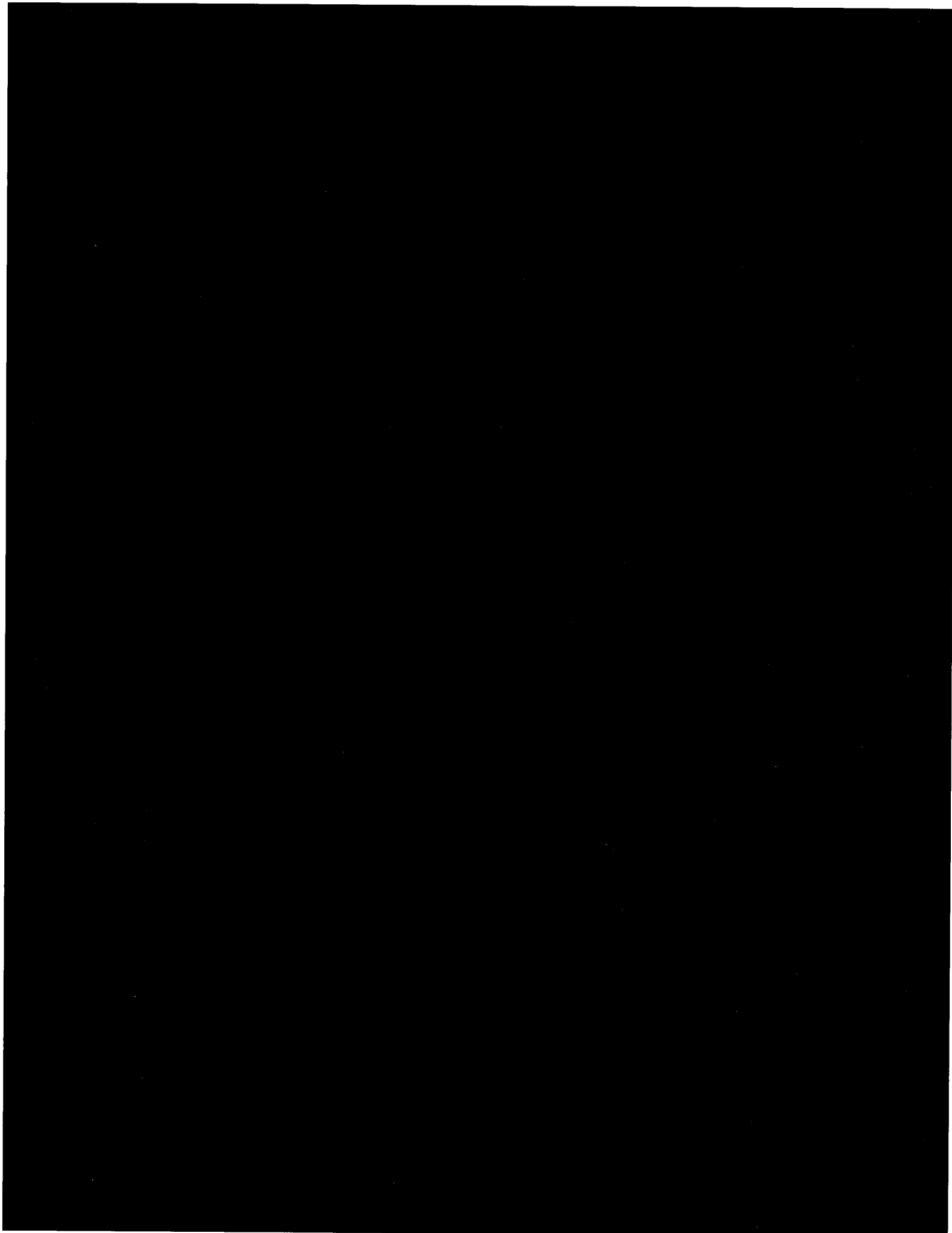
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the 1990s, the number of people in the UK who are employed in the public sector has increased by 1.5 million (1990-1999) (Department of Health 2000).

There is a growing emphasis on the importance of the public sector in the provision of health care services. The public sector is seen as the main provider of health care services, and it is expected that it will continue to play a central role in the future. This is reflected in the fact that the public sector is the largest employer in the health care sector, and it is expected that this role will continue to grow in the future.

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PROOF OF HAWAII RESIDENCY (STATE OF HAWAII TAX RETURN FORM N-11)
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1. Aaron Casey Rothstein - Pages 1-20
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[The page contains a large, dense block of text that is completely illegible due to extreme blurring or redaction. The text appears to be organized into several paragraphs, but no individual words or sentences can be discerned.]

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the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 12.5 million, and the number of people aged 75 and over has increased from 4.5 million to 6.5 million (Office of National Statistics 2000).

There is a growing awareness of the need to address the needs of older people in the community. The Department of Health (1999) has published a strategy for older people, which sets out a vision for the future of older people's services. The strategy is based on the principle of 'active ageing', which is the process of enabling older people to live independently, to participate in social and community life, and to maintain their health and well-being. The strategy also sets out a number of key objectives, including: to improve the health and well-being of older people; to promote social and community participation; to ensure that older people have access to the services and resources they need; and to ensure that older people are treated with respect and dignity.

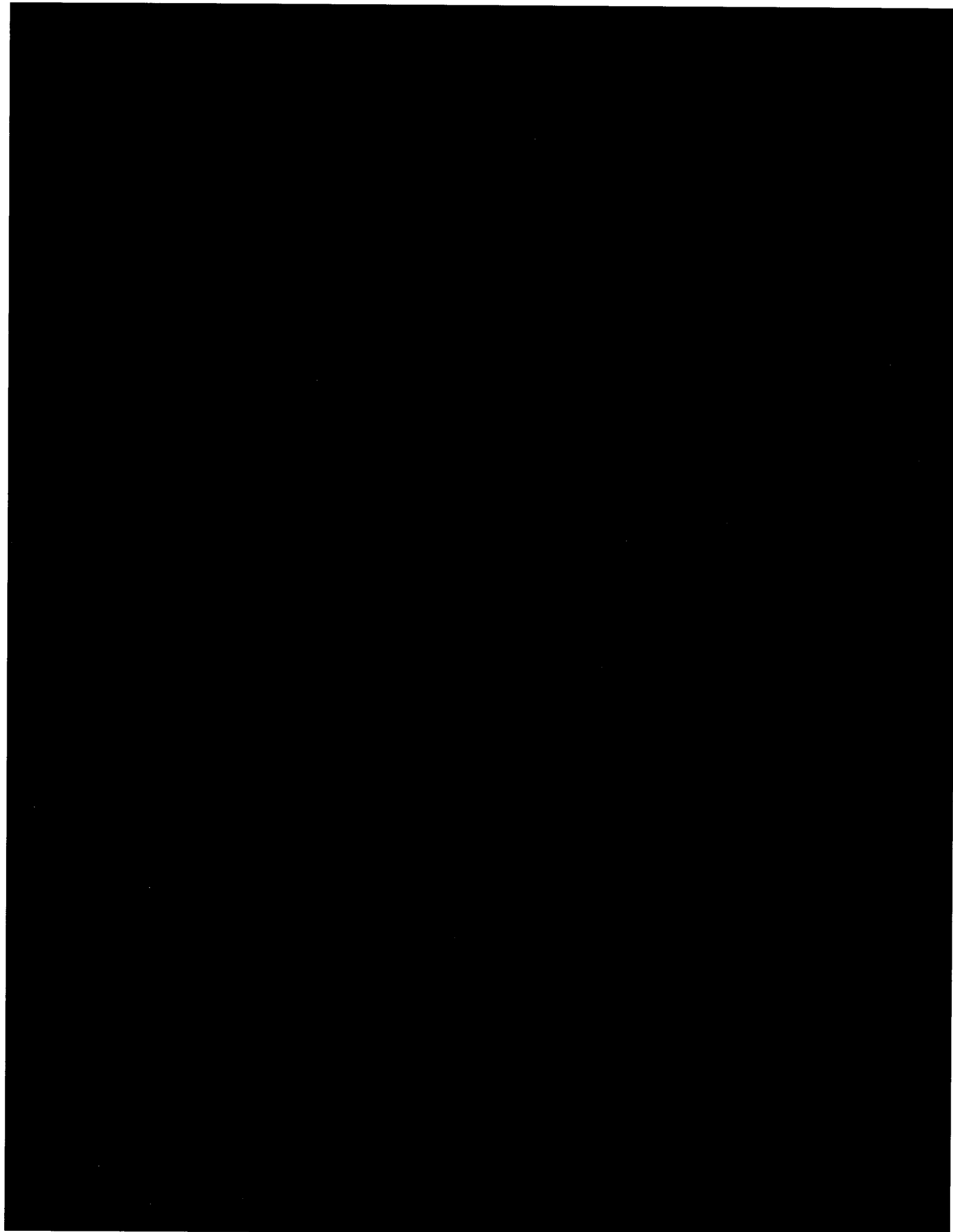
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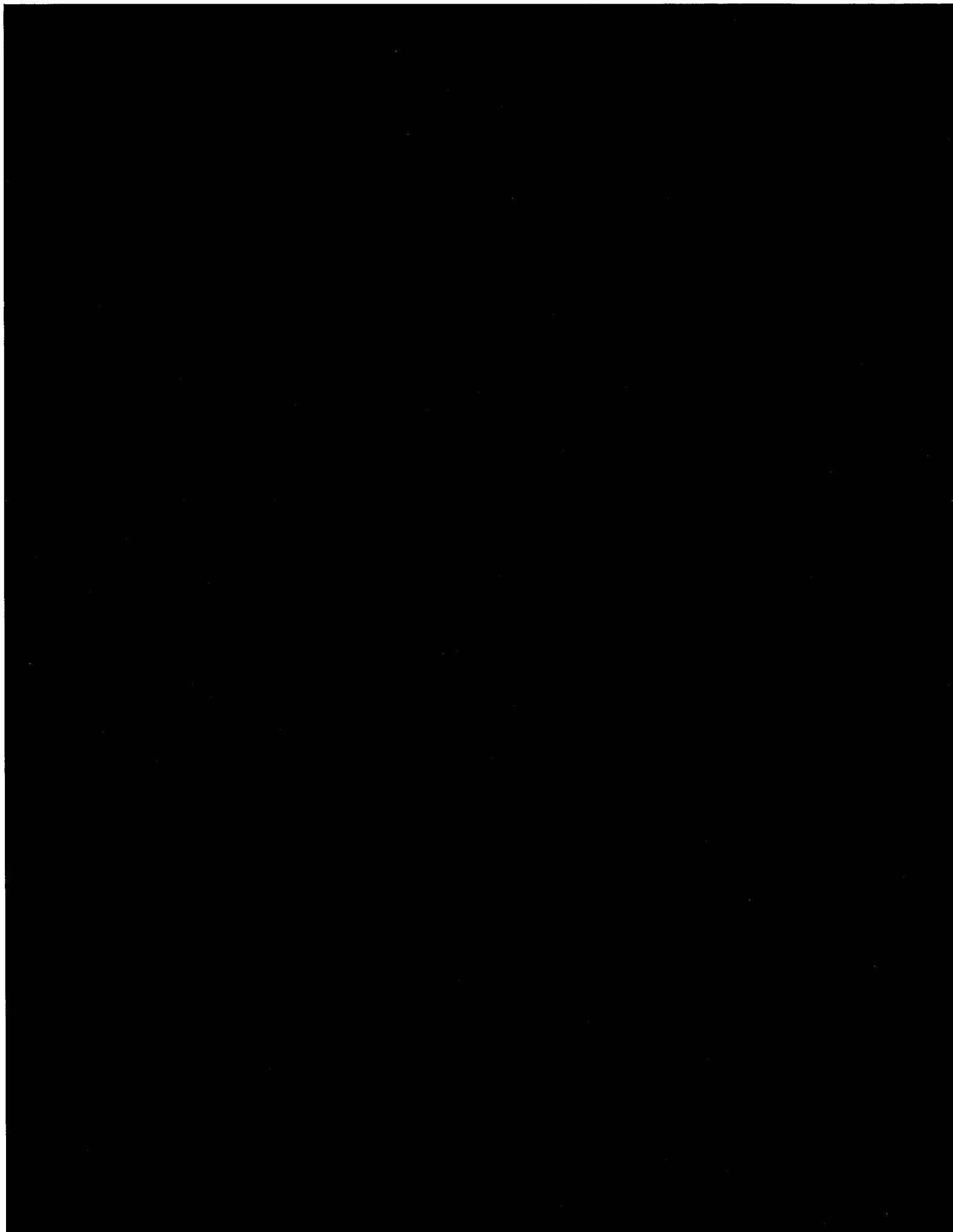
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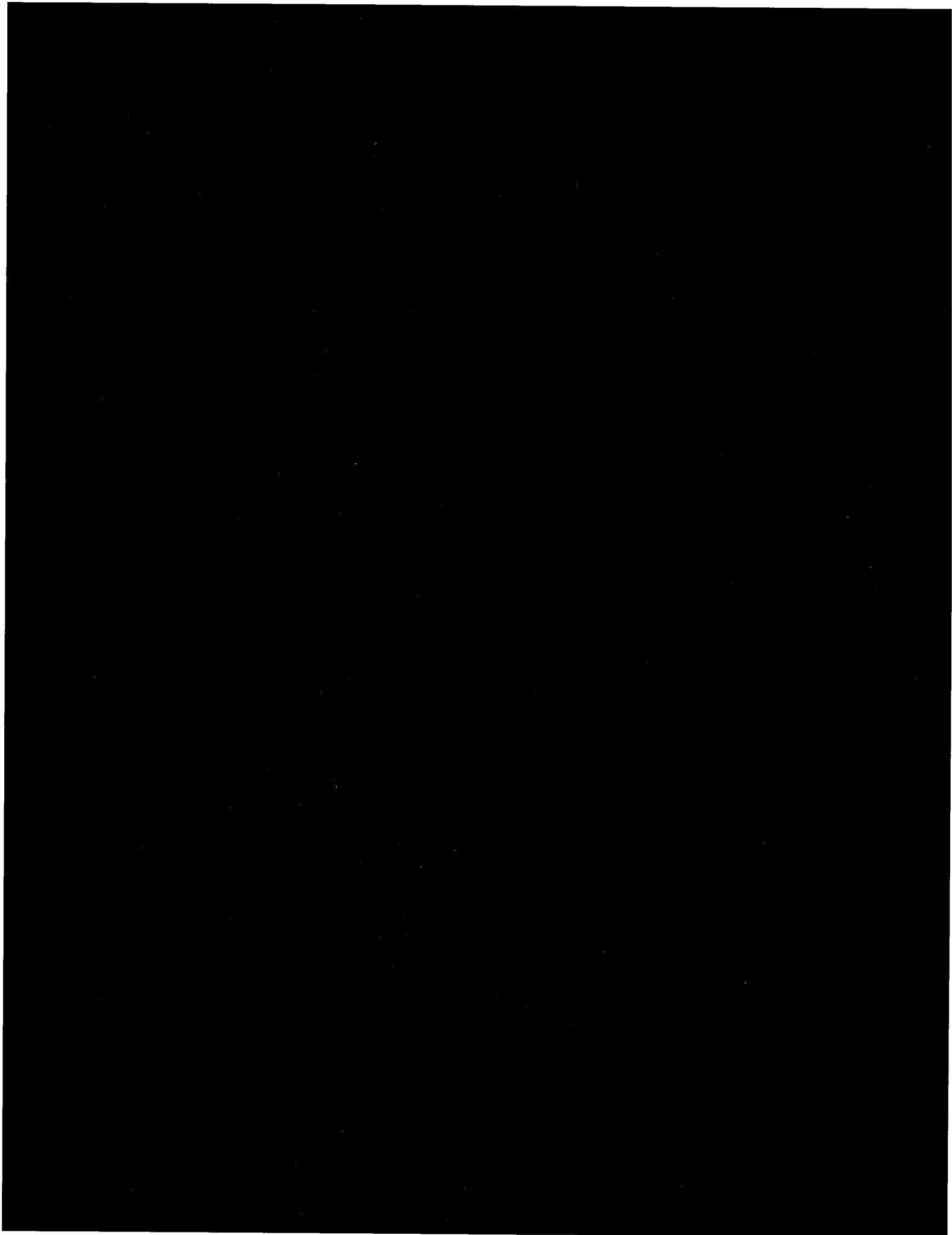


1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text outlines various methods for organizing and storing data, including digital databases and physical filing systems.

2. The second section focuses on the role of technology in modern record management. It highlights how software solutions can streamline processes, reduce errors, and provide real-time access to information. Examples of specific tools and platforms are mentioned, along with their benefits for different types of organizations.

3. The third part addresses the challenges associated with data security and privacy. It discusses the risks of unauthorized access, data breaches, and the importance of implementing robust security protocols. The text also touches upon regulatory requirements, such as GDPR, and provides guidance on how to ensure compliance while maintaining operational efficiency.

4. The final section offers practical advice and best practices for implementing a successful record management system. It encourages a proactive approach, regular audits, and continuous improvement. The document concludes by reiterating the value of a well-maintained record system for long-term success and decision-making.



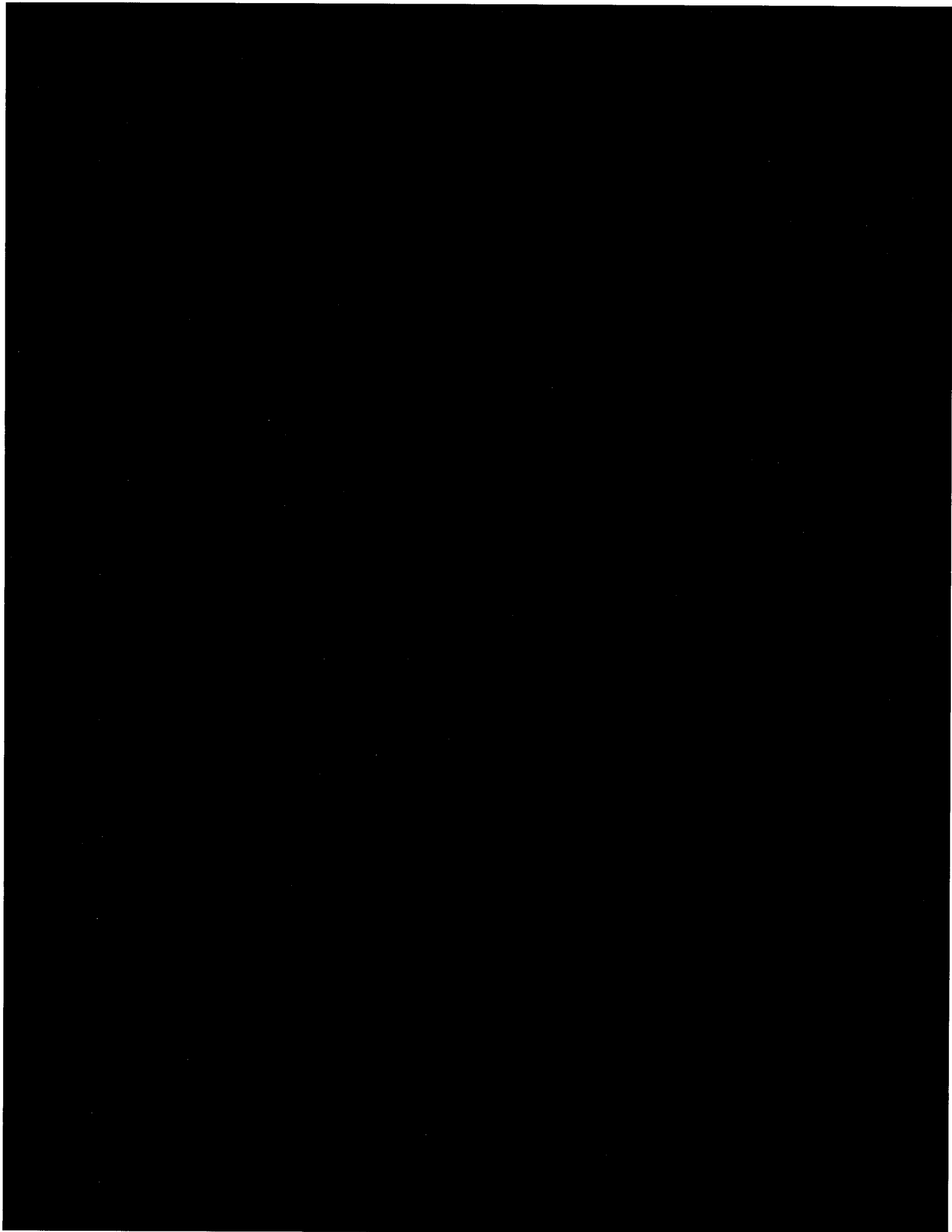
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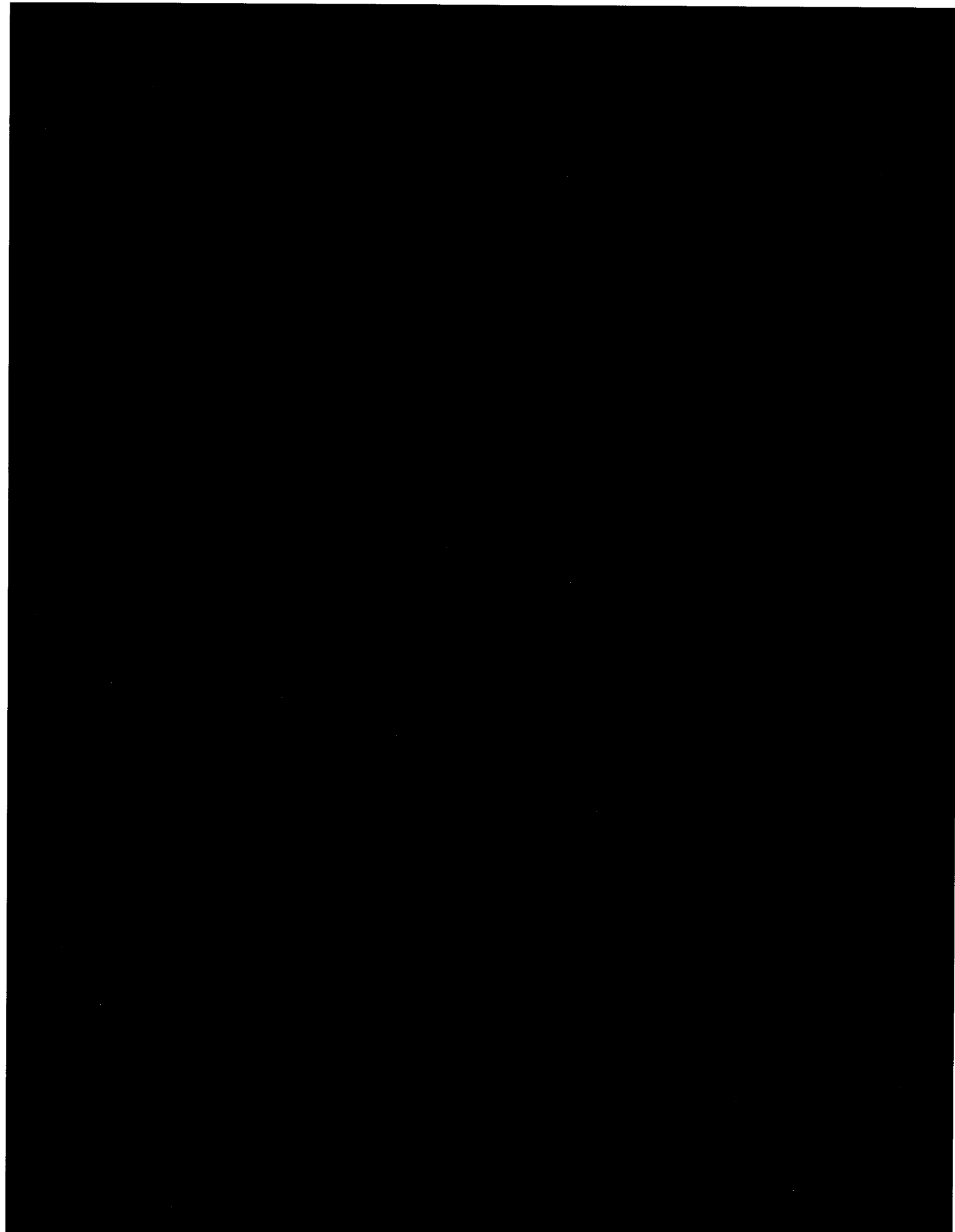
2. The second part of the document outlines the various methods used to collect and analyze financial data, including the use of statistical techniques and the application of mathematical models. It highlights the importance of using appropriate methods to ensure the accuracy and reliability of the results.

3. The third part of the document discusses the challenges faced by organizations in managing their financial resources, such as the need to balance competing interests and the importance of effective communication and collaboration between different departments.

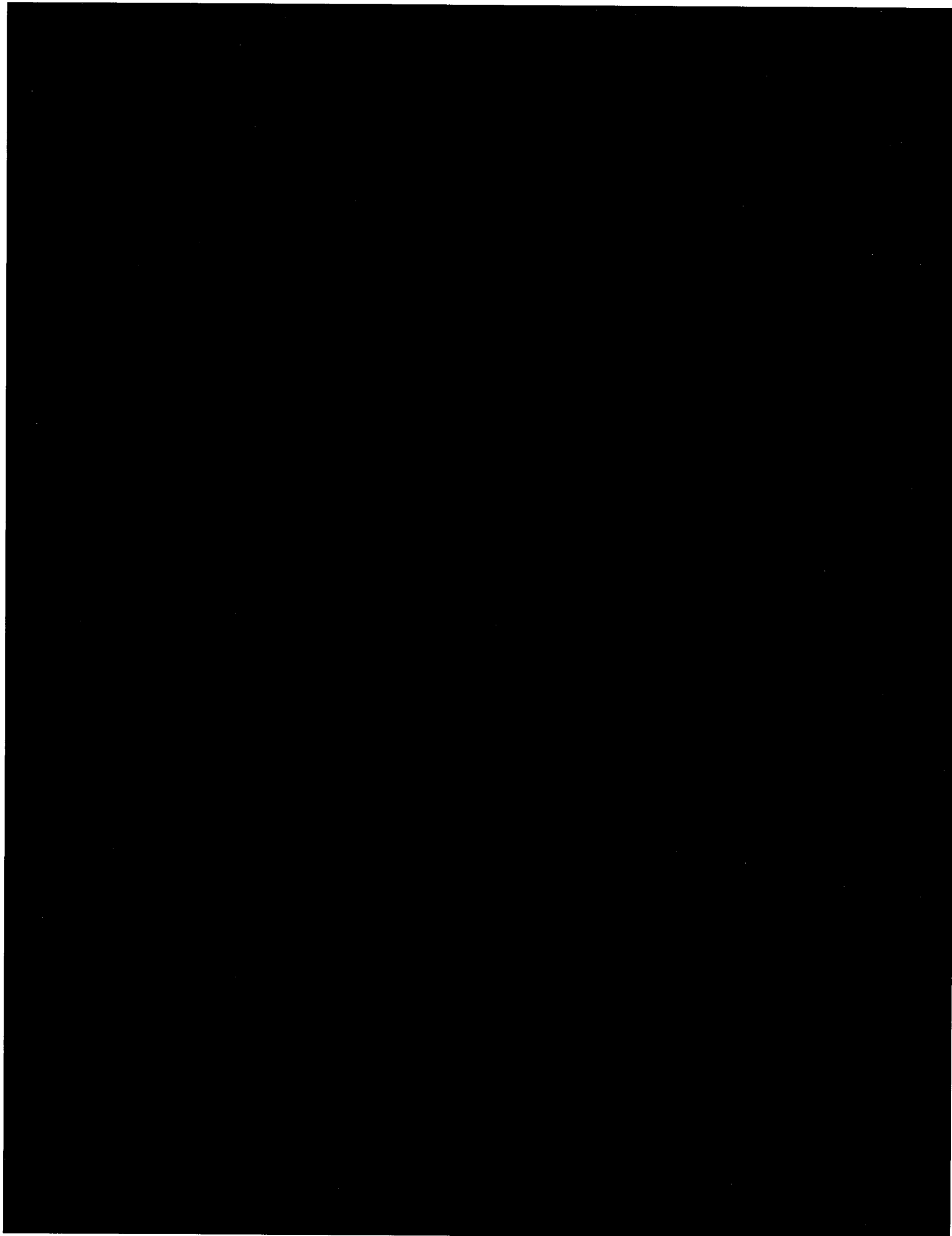
4. The fourth part of the document provides a detailed analysis of the financial performance of the organization, including a comparison of actual results with budgeted figures and a discussion of the factors that have contributed to the observed performance.

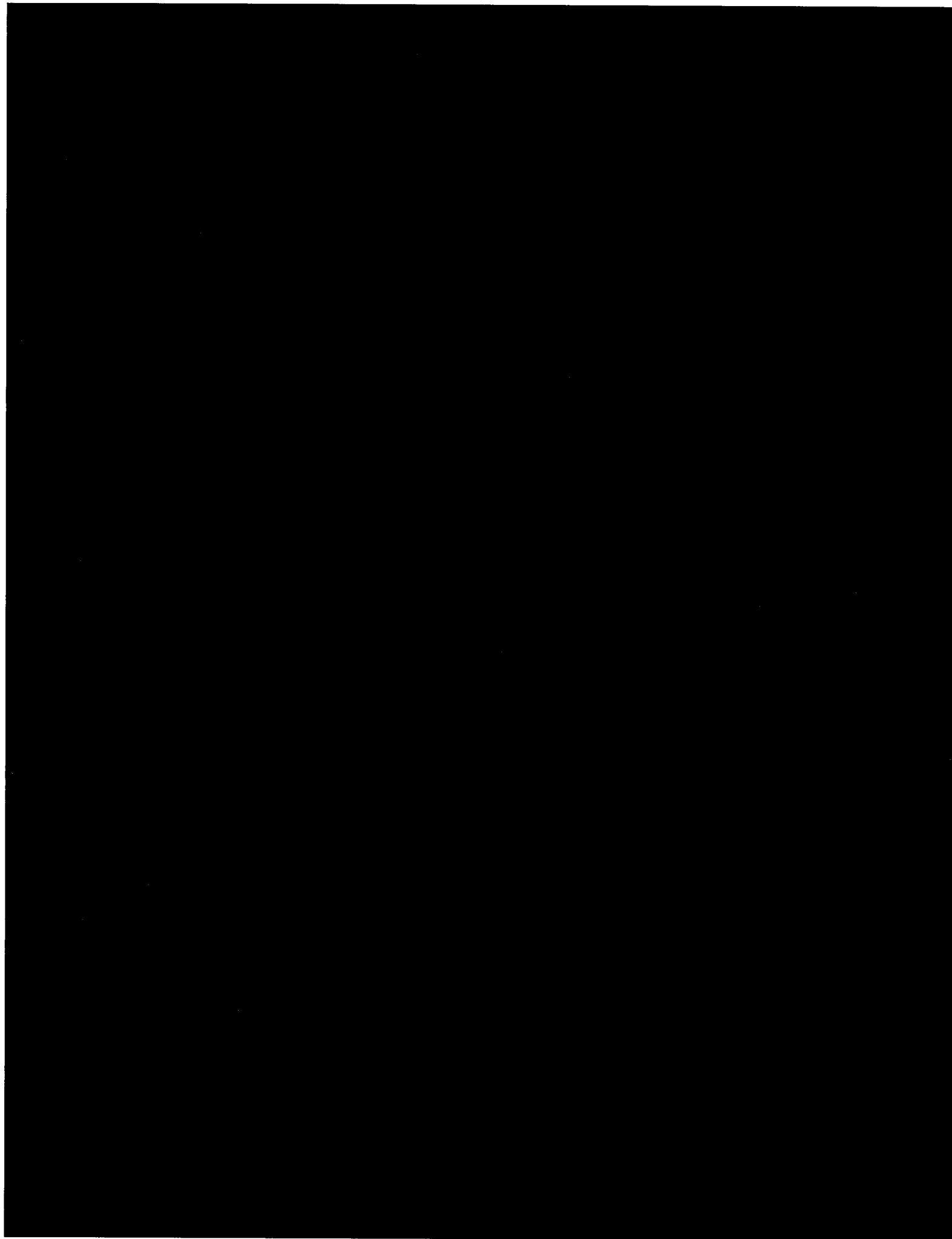
5. The fifth part of the document offers recommendations for improving the organization's financial management, such as the implementation of new systems and the adoption of best practices. It also provides a summary of the key findings of the study and a conclusion on the overall state of the organization's financial health.





1. *Journal of Management Studies*, 1996, 33, 1, 1-14.





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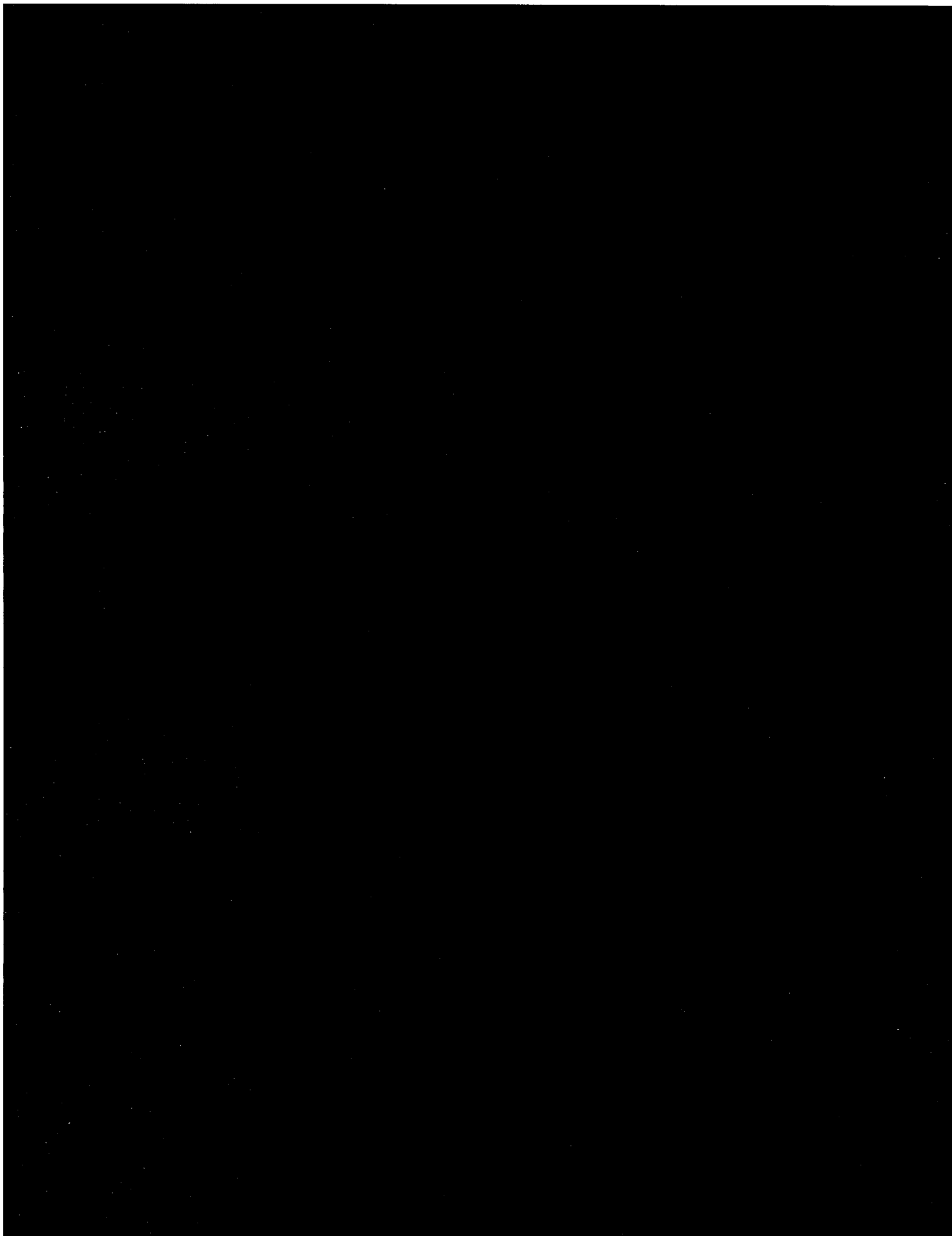
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The first part of the paper discusses the importance of the research and the objectives of the study. It then presents a literature review of the existing research on the topic. The second part of the paper describes the methodology used in the study, including the data collection and analysis techniques. The third part of the paper presents the results of the study, and the fourth part discusses the implications of the findings and provides conclusions.

The results of the study show that there is a significant positive correlation between the variables studied. This finding is consistent with the previous research in the field. The study also found that the relationship between the variables is mediated by the third variable. These findings have important implications for the understanding of the phenomenon being studied and for the development of future research.

In conclusion, the study has provided valuable insights into the relationship between the variables studied. The findings suggest that there is a need for further research in this area to explore the underlying mechanisms and to develop effective interventions. The study also highlights the importance of considering the mediating role of the third variable in future research.

10. *Journal of the American Medical Association*, 2000; 284: 1039-1044.



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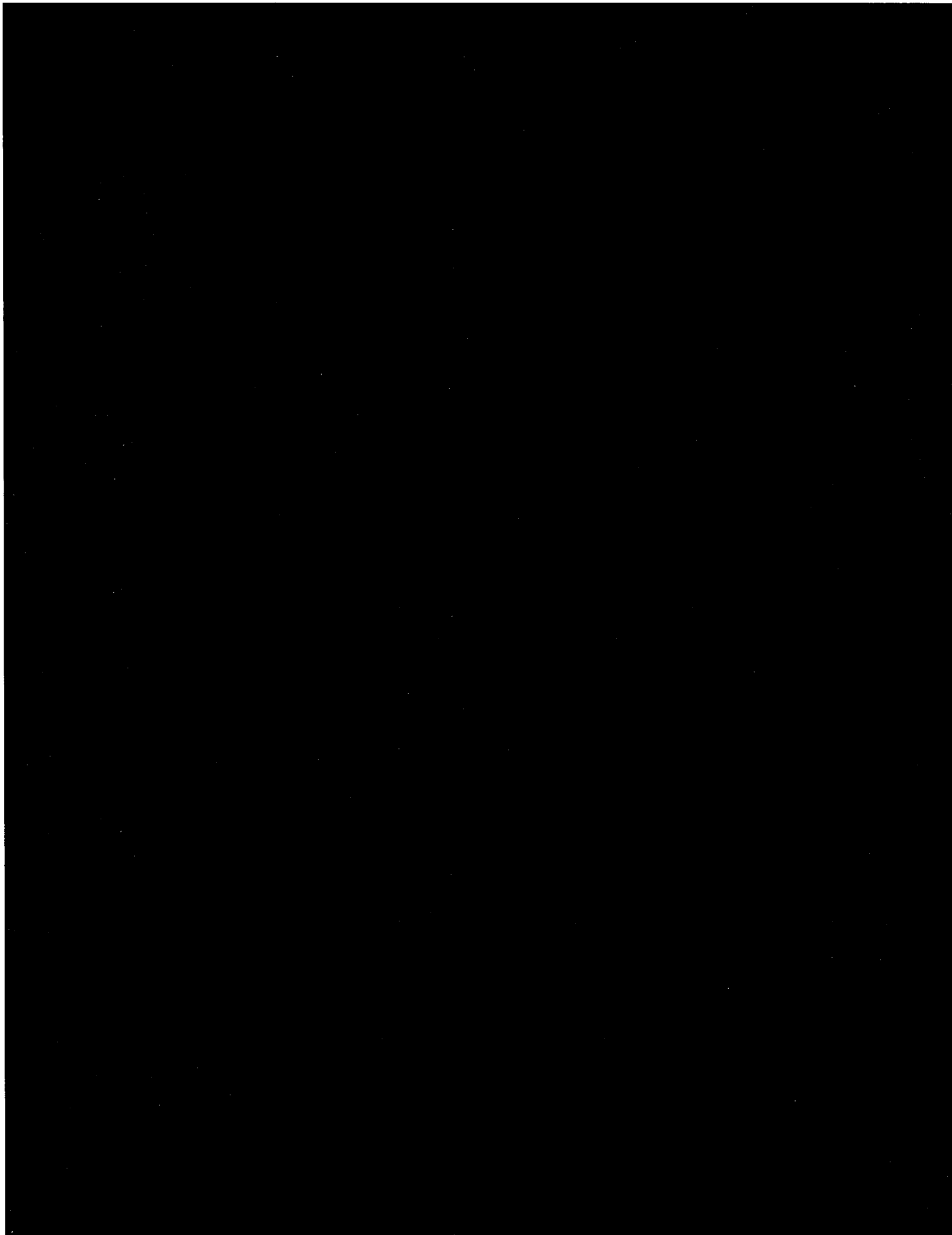
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the 1990s, the number of people in the world who are under 15 years of age is expected to increase by 1.5 billion (United Nations 1994).

There is a growing awareness of the need to address the needs of children in the 1990s. The United Nations Children's Fund (UNICEF) has been instrumental in this regard, and has produced a series of reports on the state of the world's children (UNICEF 1990, 1991, 1992, 1993, 1994). These reports have highlighted the need for a new approach to children's rights, one that is based on the principle of the best interests of the child.

The United Nations Convention on the Rights of the Child (UNCRC) is a landmark document in this regard. It was adopted by the United Nations General Assembly in 1989, and is the first international treaty to be ratified by more than 100 countries. The UNCRC sets out a comprehensive framework of rights for children, and is a key reference point for child protection work.

The UNCRC is based on the principle of the best interests of the child. This principle is enshrined in Article 3 of the Convention, which states that 'in all actions concerning children, the best interests of the child shall be a primary consideration'. This principle is the cornerstone of child protection work, and is the basis for the development of child protection policies and procedures.

The UNCRC also sets out a range of specific rights for children, including the right to life, the right to a name and nationality, the right to a family, the right to education, and the right to be heard. These rights are the basis for the development of child protection policies and procedures, and are the focus of child protection work.

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the 1990s, the number of people in the UK who are obese has increased by 50% (Health Survey for England 1995, 1997, 1999, 2001, 2003, 2005, 2007, 2009, 2011, 2013, 2015, 2017, 2019, 2021). The prevalence of obesity in the UK is 28.5% (Health Survey for England 2021).

Obesity is a complex condition with many causes, including genetics, environment, and lifestyle. It is a leading cause of death and disability in the UK, and is associated with a range of health problems, including heart disease, diabetes, and cancer. Obesity is also a major cause of social and economic inequality, and is a significant public health problem. The prevalence of obesity in the UK is 28.5% (Health Survey for England 2021). The prevalence of obesity in the UK is 28.5% (Health Survey for England 2021).

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The study was conducted in a laboratory setting, and the participants were all students from a university. The data was collected using a series of questionnaires and interviews. The results of the study show that there is a significant relationship between the variables being studied. The findings suggest that the research has important implications for the field of study.

The research was supported by a grant from the National Science Foundation. The authors would like to thank the participants for their contribution to the study and the reviewers for their helpful comments.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting system in providing reliable financial information. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various components of the accounting system, including the general ledger, subsidiary ledgers, and the trial balance. It explains how these components work together to ensure the accuracy and integrity of the financial data.

3. The third part of the document describes the process of preparing financial statements, including the income statement, balance sheet, and cash flow statement. It provides a detailed explanation of the accounting principles and methods used in the preparation of these statements.

4. The fourth part of the document discusses the role of the accounting system in managing the company's financial resources. It highlights the importance of budgeting, cost accounting, and financial analysis in making informed decisions about the company's financial future.

5. The fifth part of the document concludes by summarizing the key points discussed and emphasizing the overall importance of the accounting system in the success of the company. It encourages the company to continue to improve its accounting practices and maintain the highest standards of financial reporting.

the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996). The number of people who are malnourished has increased from 1.2 billion to 1.5 billion (FAO 1996).

There is a growing awareness of the need to improve the nutritional status of the world's population. The World Bank (1992) has estimated that the cost of malnutrition to the world economy is \$100 billion per year. The World Health Organization (WHO) has estimated that the cost of malnutrition to the world economy is \$100 billion per year.

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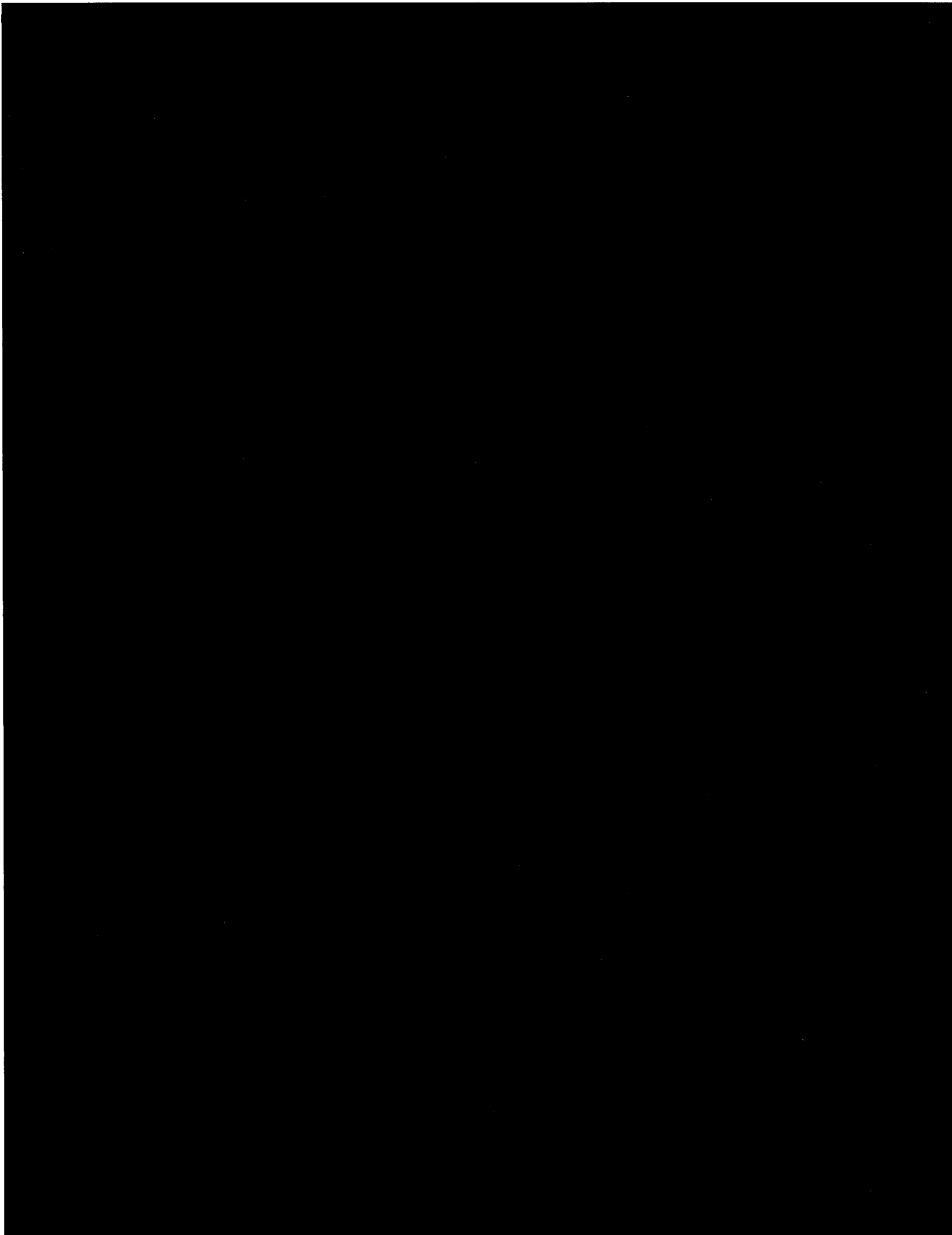
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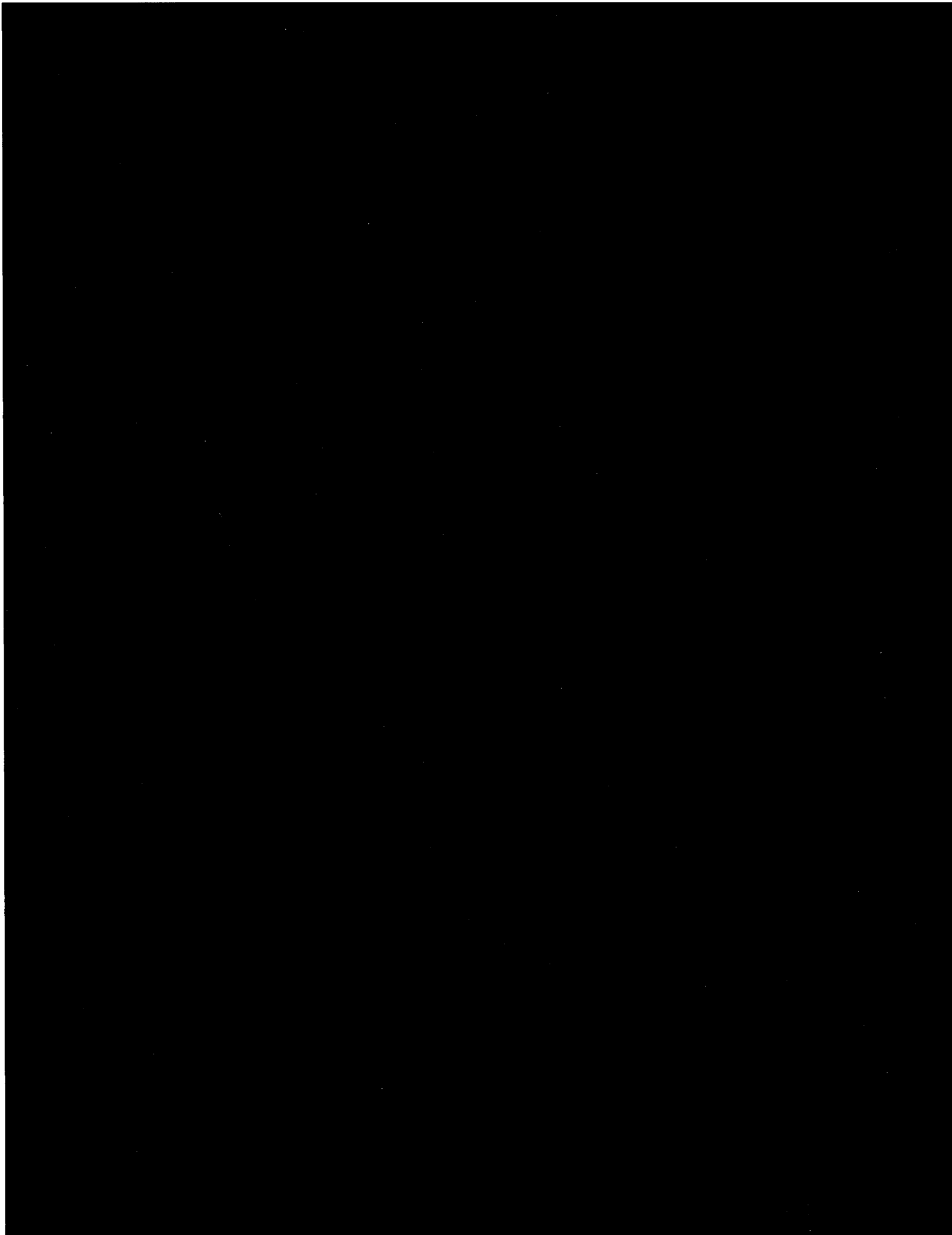
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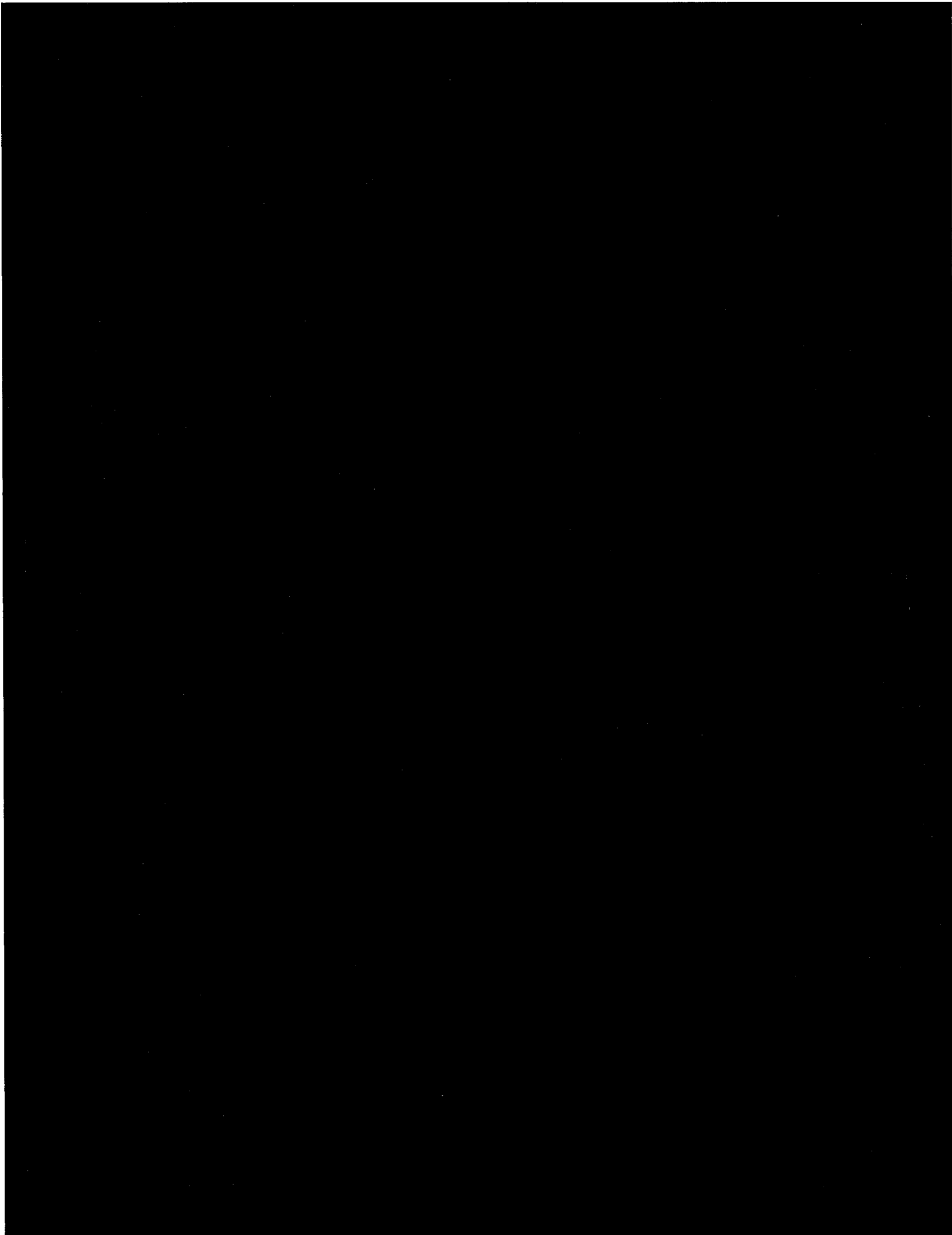
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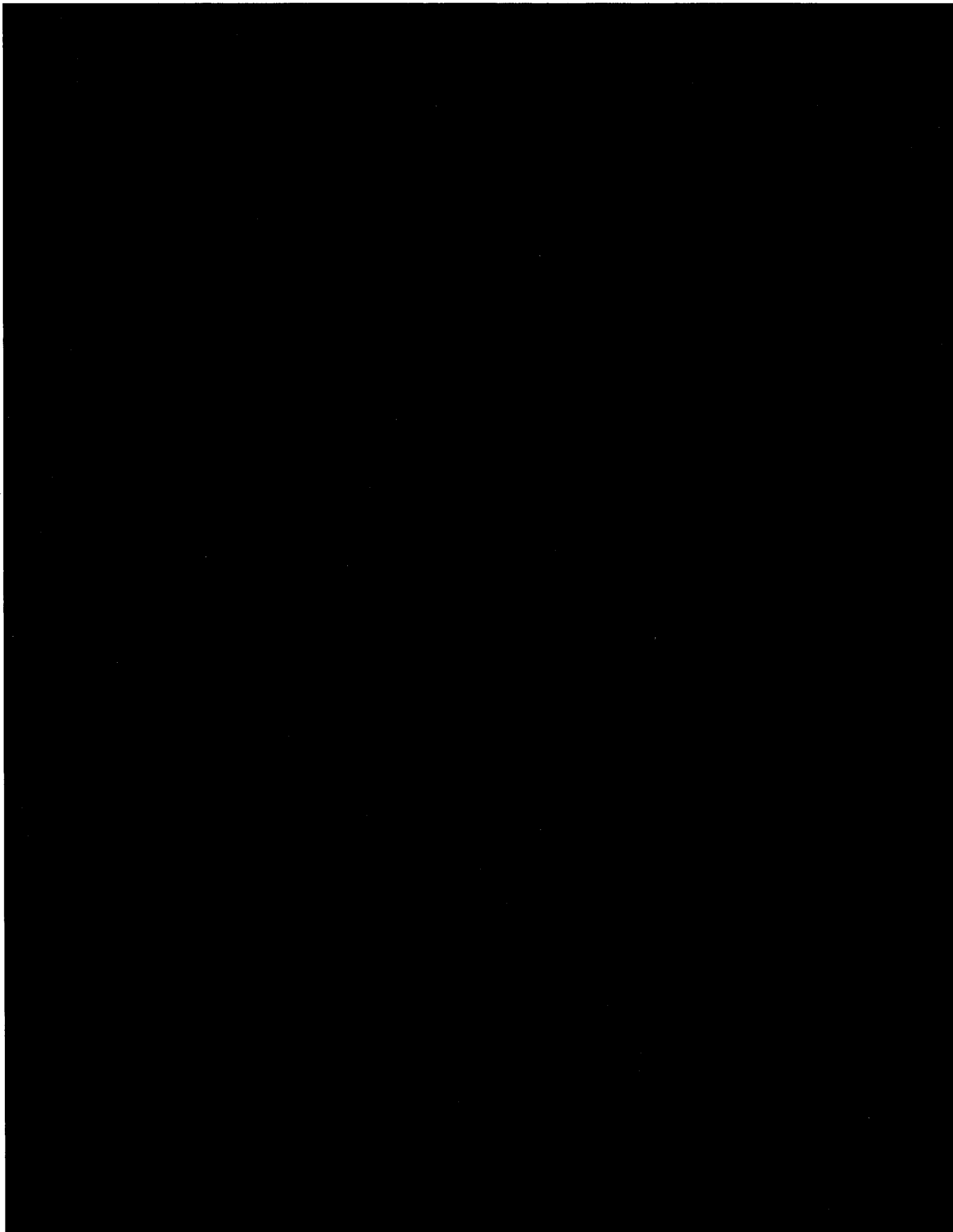
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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (2000) has identified the need to develop a 'new paradigm' for the care of the elderly, one that is based on the principles of 'active ageing' and 'positive ageing'. This paradigm is based on the idea that ageing is a process, not a state, and that the quality of life in old age is determined by the extent to which individuals are able to maintain their physical, mental and social functioning.

The Department of Health (2000) has identified a number of key areas for action in order to achieve this paradigm. These include: (1) the need to develop a 'new paradigm' for the care of the elderly, one that is based on the principles of 'active ageing' and 'positive ageing'; (2) the need to develop a 'new paradigm' for the care of the elderly, one that is based on the principles of 'active ageing' and 'positive ageing'; (3) the need to develop a 'new paradigm' for the care of the elderly, one that is based on the principles of 'active ageing' and 'positive ageing'.

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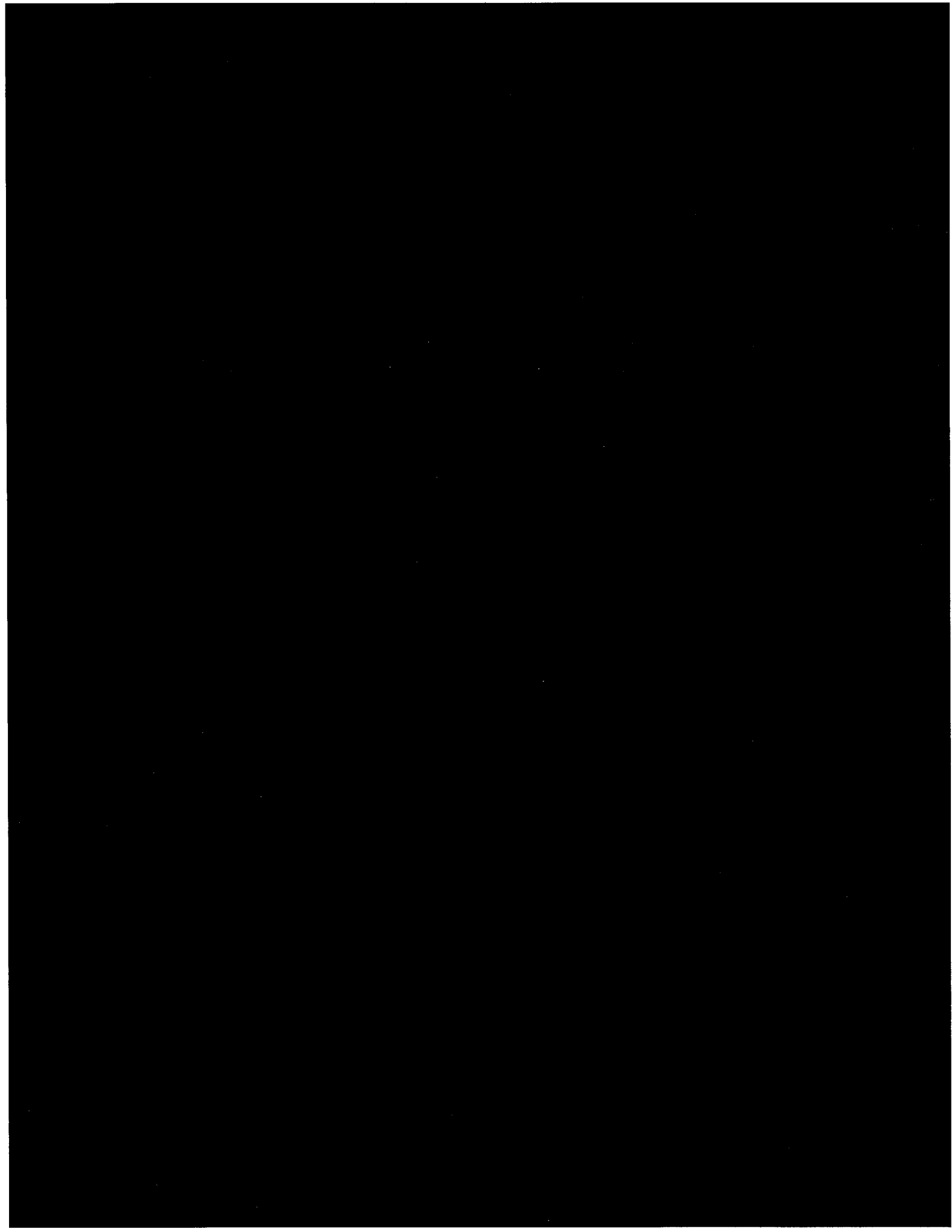
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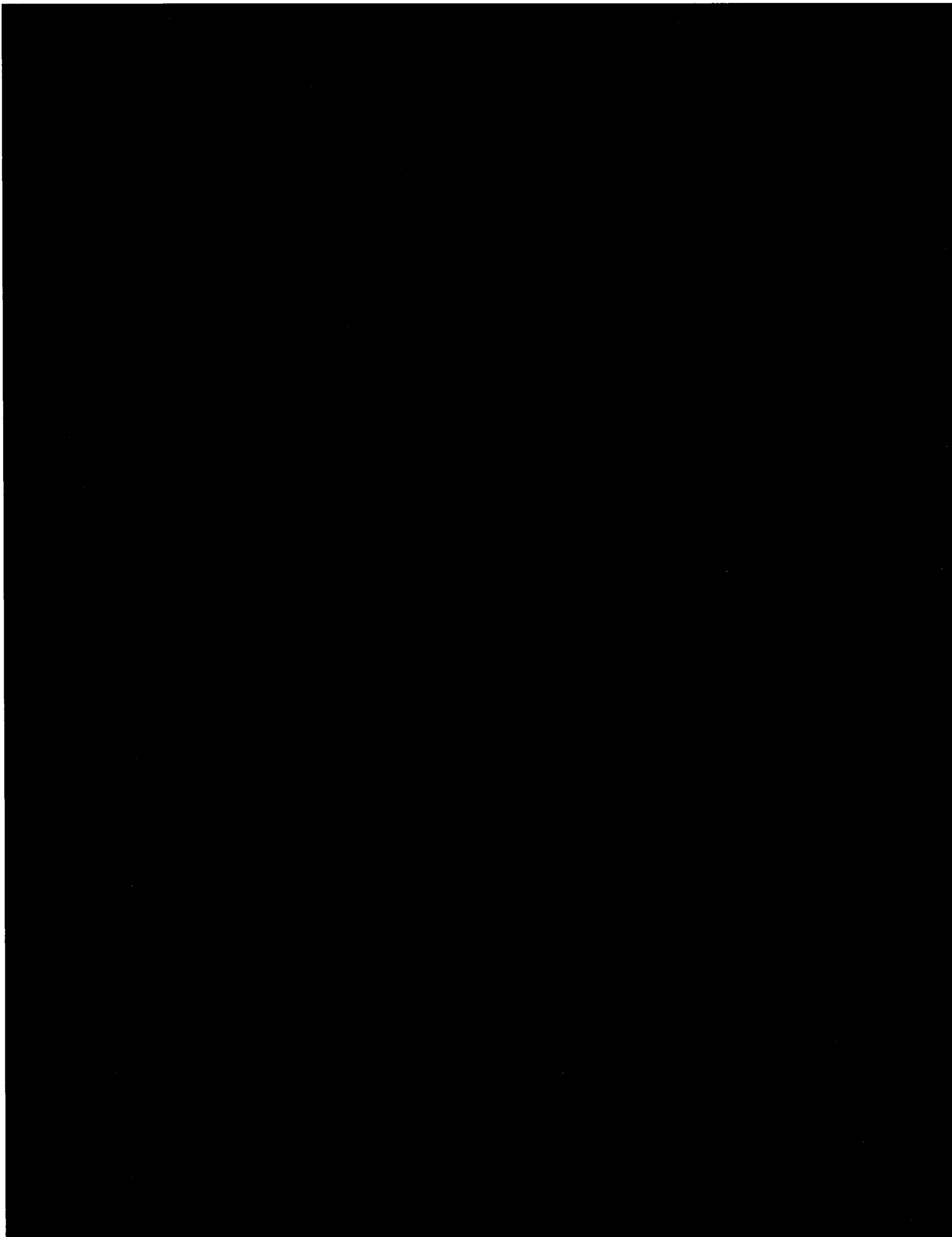
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the 'information' and 'communication' fields, and the 'information science' field.

It is important to note that the 'information science' field is not a new field, but a field that has been developing since the 1960s.

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The first part of the paper discusses the importance of the research and the objectives of the study. It then proceeds to a literature review, followed by a description of the methodology used. The results of the study are presented in the next section, followed by a discussion of the findings and their implications. The paper concludes with a summary of the main points and a list of references.

The research was conducted in a laboratory setting, using a series of experiments to measure the effects of the treatment. The results showed that the treatment had a significant effect on the outcome, with the treated group performing better than the control group. This finding is consistent with the hypothesis that the treatment is effective. The implications of this research are discussed in the next section, where it is argued that the treatment should be used in clinical practice.

The study was limited by a number of factors, including the small sample size and the lack of a long-term follow-up. However, the results are promising and warrant further research. The authors hope that this paper will encourage other researchers to conduct similar studies and that the treatment will be widely adopted in clinical practice.

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting system in providing reliable financial information. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various components of the accounting system, including the general ledger, subsidiary ledgers, and the trial balance. It explains how these components work together to ensure the accuracy and integrity of the financial data.

3. The third part of the document describes the process of preparing financial statements, including the income statement, balance sheet, and cash flow statement. It provides a detailed explanation of the accounting principles and methods used in the preparation of these statements.

4. The fourth part of the document discusses the role of the accounting system in managing the company's financial resources and controlling costs. It highlights the importance of budgeting and cost accounting in achieving the company's financial goals.

5. The fifth part of the document concludes by summarizing the key points discussed and emphasizing the overall importance of the accounting system in the success of the company. It encourages the company to continue to improve its accounting practices and maintain the highest standards of financial reporting.

the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase by 2.5 million by 2020 (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has published a strategy for the ageing population, which sets out the government's commitment to improve the health and quality of life of older people. The strategy is based on the following principles: (1) to ensure that older people have access to the services they need; (2) to ensure that older people are able to live independently; (3) to ensure that older people are able to participate in the community; and (4) to ensure that older people are able to live in dignity and respect.

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the 1990s, the number of people in the world who are undernourished has increased from 250 million to 800 million (FAO 1996).

There is a growing awareness of the need to improve the nutritional status of the world's population. The United Nations World Food Programme (WFP) has been instrumental in the development of the World Food Summit (WFS) in 1996, which was the first time that world leaders have met to discuss the issue of food security. The WFS was held in Rome, Italy, and was attended by 180 heads of state and government. The summit was a landmark event in the history of international food security.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office of National Statistics 1999).

There is a growing awareness of the need to address the needs of older people in the community. The Department of Health (1999) has published a strategy for older people, which sets out a vision for the future of older people's services. The strategy is based on the following principles: older people should be able to live independently in their own homes; older people should be able to access the services they need; older people should be able to participate in the decisions that affect their lives; and older people should be able to live in a safe and secure environment.

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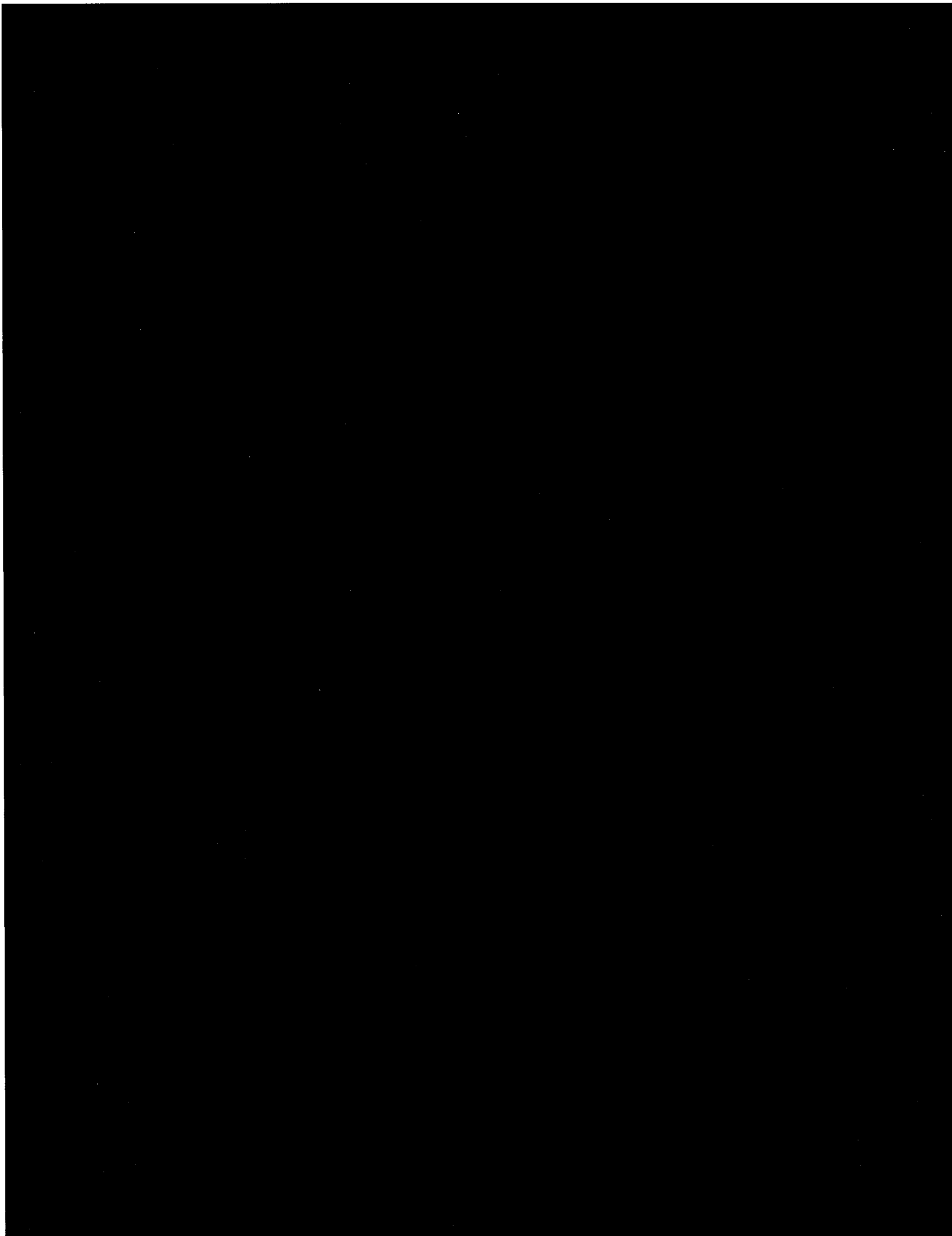
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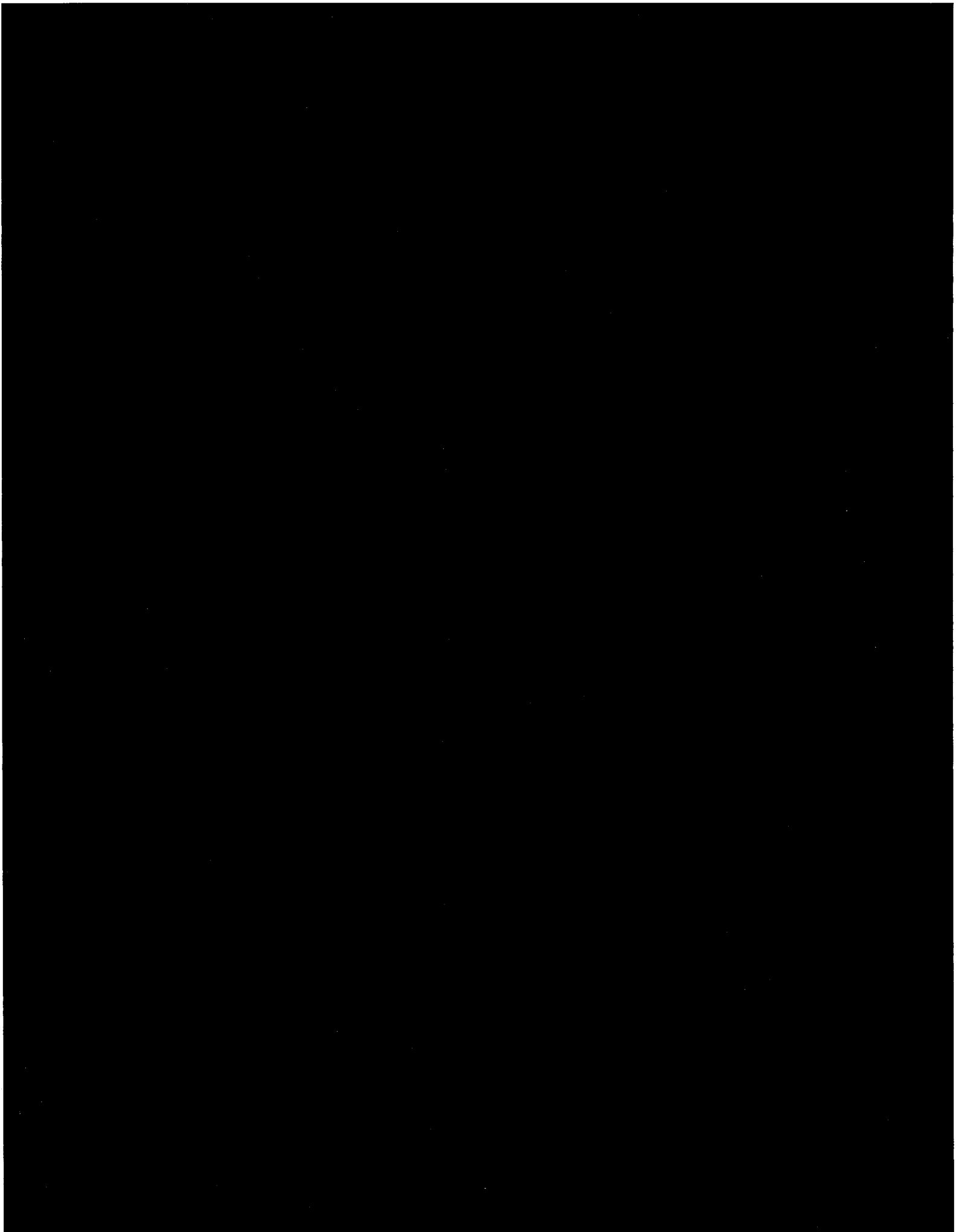
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1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text outlines various methods for organizing and storing records, including digital databases and physical filing systems. It also mentions the need for regular audits and reviews to ensure the integrity of the data.

2. The second part of the document focuses on the role of communication in achieving organizational goals. It highlights the importance of clear and concise communication, both internally and externally. The text provides guidelines for effective communication, such as using appropriate language, listening actively, and providing feedback. It also discusses the benefits of open communication, including improved collaboration and decision-making.

3. The third part of the document addresses the issue of risk management. It defines risk as the potential for loss or damage and explains how to identify, assess, and mitigate risks. The text provides a framework for risk management, including the identification of risks, the assessment of their likelihood and impact, and the implementation of control measures. It also discusses the importance of monitoring and reviewing risks over time.

4. The fourth part of the document discusses the importance of training and development. It emphasizes that ongoing training and development are essential for maintaining a skilled and motivated workforce. The text outlines various training and development methods, including classroom training, on-the-job training, and self-directed learning. It also discusses the importance of setting clear learning objectives and evaluating the effectiveness of training programs.

5. The fifth part of the document discusses the importance of innovation and creativity. It emphasizes that innovation and creativity are essential for staying competitive in a rapidly changing market. The text provides guidelines for fostering innovation and creativity, such as encouraging open communication, providing resources for experimentation, and rewarding creative ideas. It also discusses the importance of protecting intellectual property and managing innovation risks.

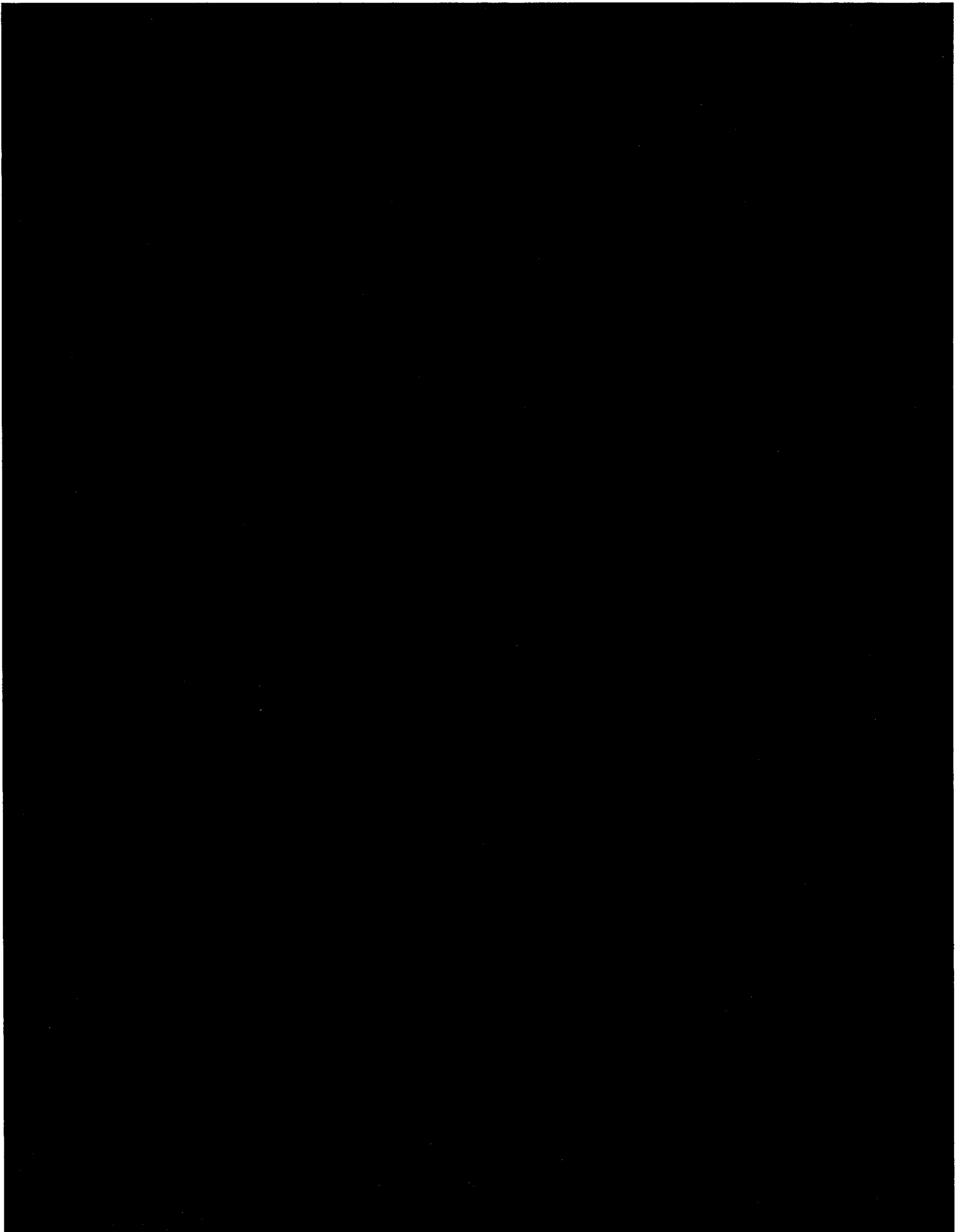
6. The sixth part of the document discusses the importance of sustainability. It defines sustainability as the ability to meet the needs of the present without compromising the ability of future generations to meet their own needs. The text outlines various sustainability initiatives, including energy conservation, waste reduction, and social responsibility. It also discusses the importance of measuring and reporting on sustainability performance.

7. The seventh part of the document discusses the importance of ethics and governance. It emphasizes that ethics and governance are essential for building trust and credibility. The text provides guidelines for ethical behavior, such as being honest, transparent, and respectful. It also discusses the importance of establishing a strong governance structure and implementing effective controls.

8. The eighth part of the document discusses the importance of customer service. It emphasizes that excellent customer service is essential for retaining customers and attracting new ones. The text provides guidelines for providing excellent customer service, such as listening to customer needs, responding promptly, and resolving problems effectively. It also discusses the importance of measuring and improving customer satisfaction.

9. The ninth part of the document discusses the importance of financial management. It emphasizes that sound financial management is essential for the long-term success of an organization. The text outlines various financial management practices, including budgeting, forecasting, and financial reporting. It also discusses the importance of maintaining accurate financial records and seeking professional advice when needed.

10. The tenth part of the document discusses the importance of strategic planning. It emphasizes that strategic planning is essential for setting clear goals and determining the best way to achieve them. The text provides a framework for strategic planning, including the identification of opportunities and threats, the setting of strategic goals, and the development of action plans. It also discusses the importance of monitoring and reviewing progress and making adjustments as needed.



the 1990s, the number of people in the world who are under 15 years of age is expected to increase from 1.1 billion to 1.5 billion.

As the world's population grows, the demand for food and other resources will increase. This will put pressure on the environment and on the world's resources.

One of the main reasons for the increase in the world's population is the increase in the life expectancy of people. This is due to a number of factors, including:

• Improvements in medical care and technology, which have helped to reduce the number of deaths from disease and injury.

• Improvements in nutrition, which have helped to reduce the number of deaths from malnutrition.

• Improvements in living conditions, which have helped to reduce the number of deaths from disease and injury.

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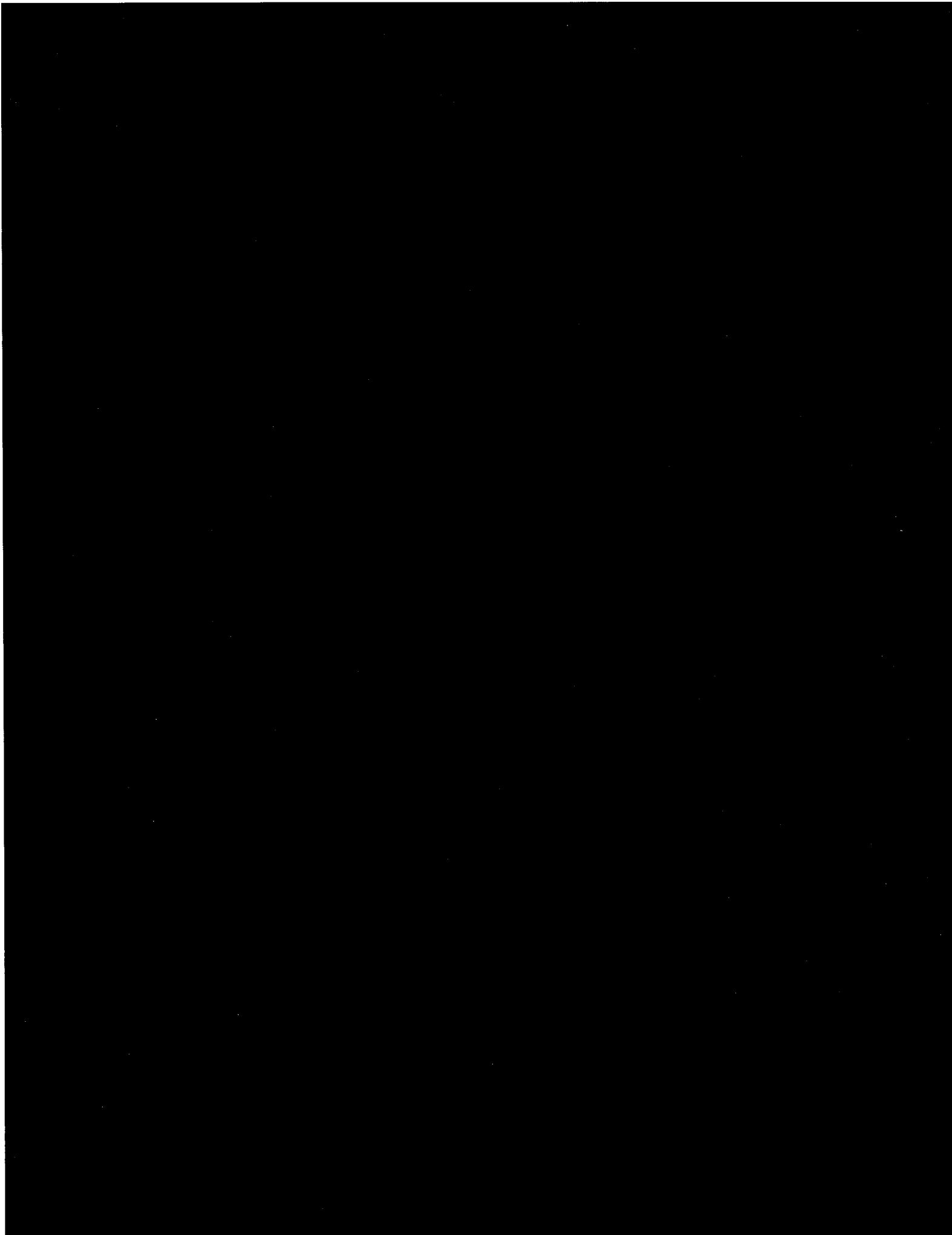
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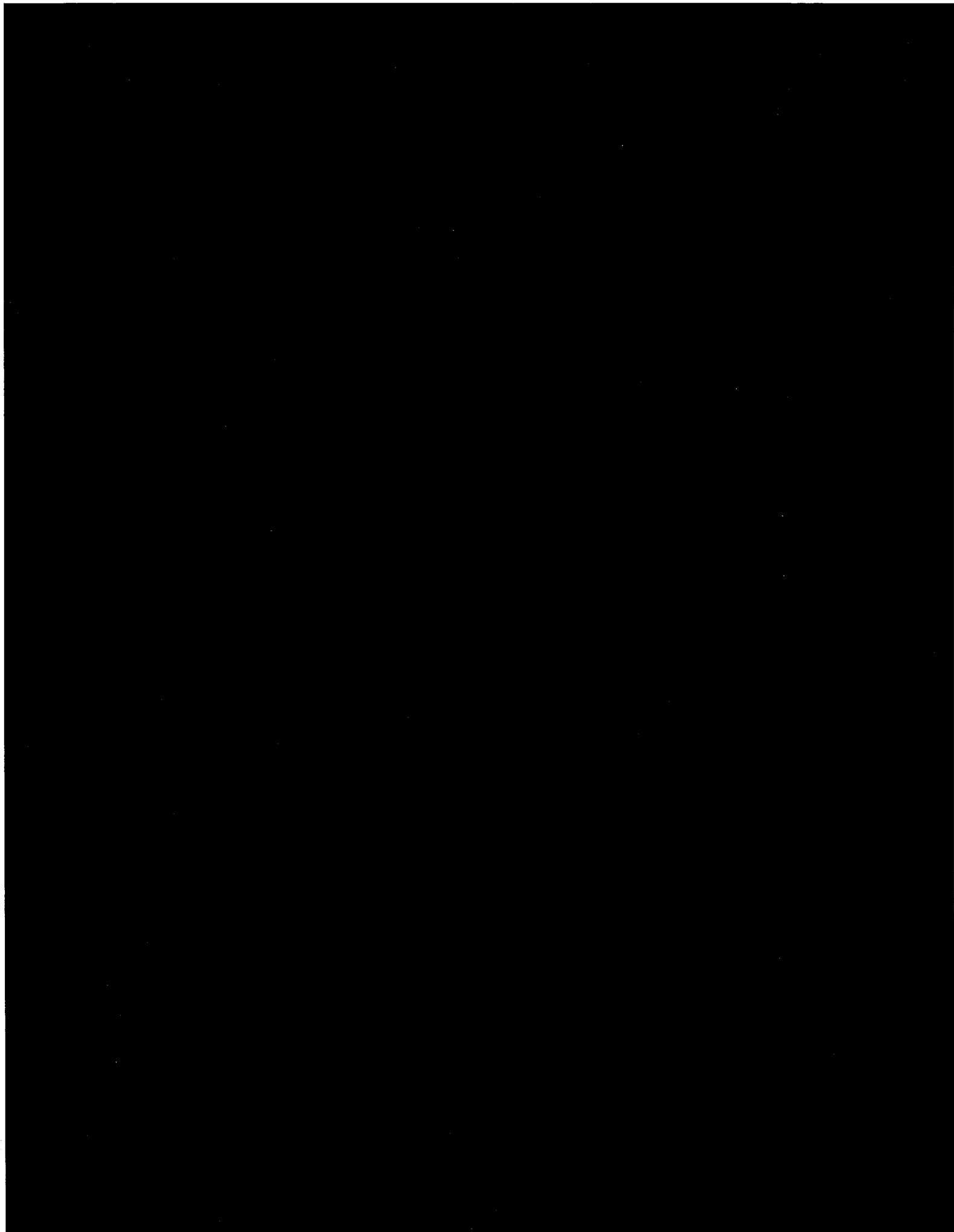
• Improvements in medical care and technology, which have helped to reduce the number of deaths from disease and injury.

• Improvements in nutrition, which have helped to reduce the number of deaths from malnutrition.

• Improvements in living conditions, which have helped to reduce the number of deaths from disease and injury.



The first of these is the fact that the
 government has been unable to
 maintain a stable currency. This
 has led to a loss of confidence
 in the government and a
 consequent loss of support
 from the people. The second
 is the fact that the government
 has been unable to maintain
 a stable economy. This has
 led to a loss of confidence
 in the government and a
 consequent loss of support
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 is the fact that the government
 has been unable to maintain
 a stable society. This has
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 consequent loss of support
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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase by 2.5 million by 2020 (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has identified the need to develop a 'new paradigm' for the care of the elderly. This paradigm is based on the principle of 'active ageing', which is the process of maintaining and enhancing the functional ability of older people to live independently and to participate in social and economic activities. The Department of Health (1999) has identified a number of key areas for action in order to achieve this paradigm, including: (1) the development of a 'new paradigm' for the care of the elderly; (2) the development of a 'new paradigm' for the care of the elderly; (3) the development of a 'new paradigm' for the care of the elderly.

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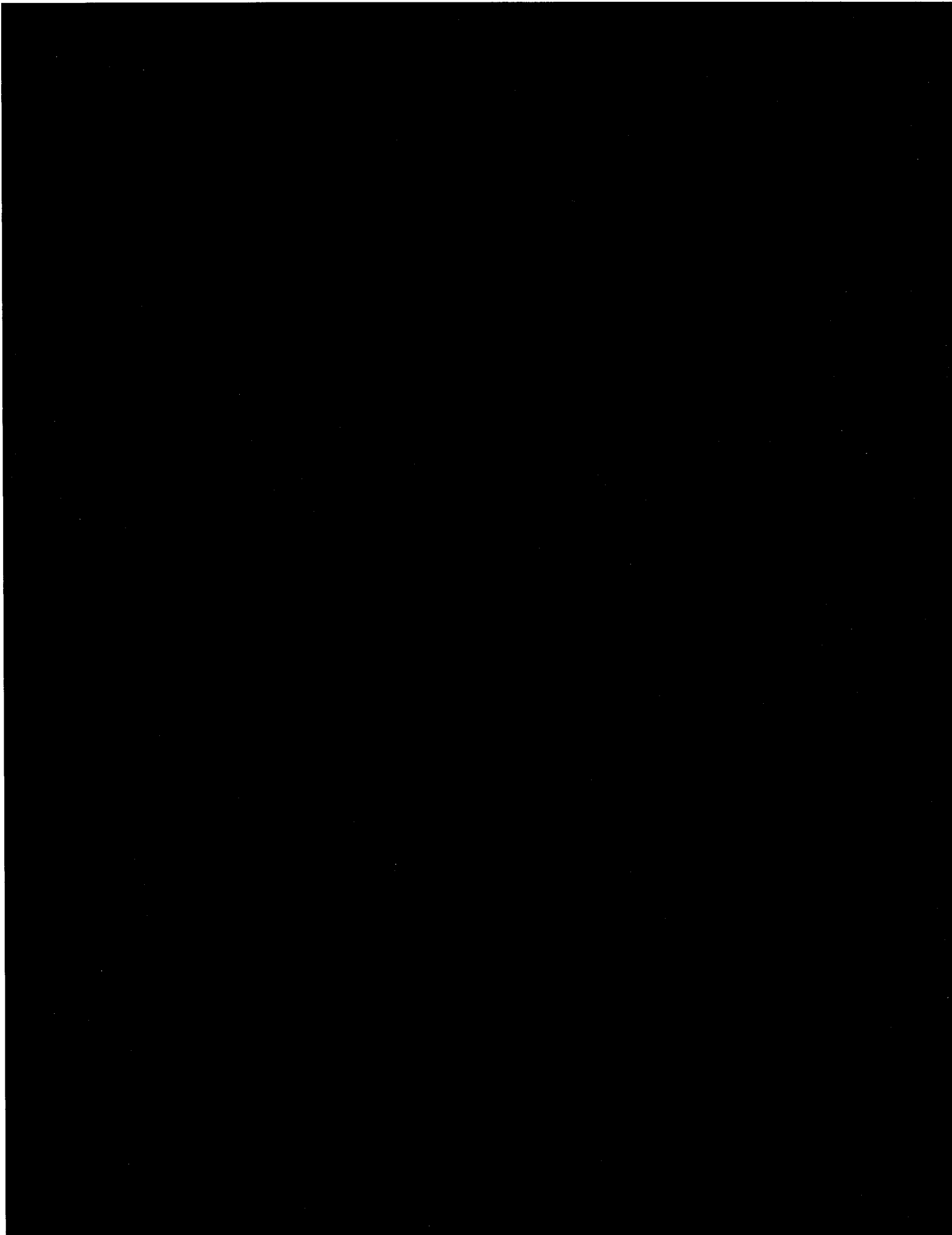
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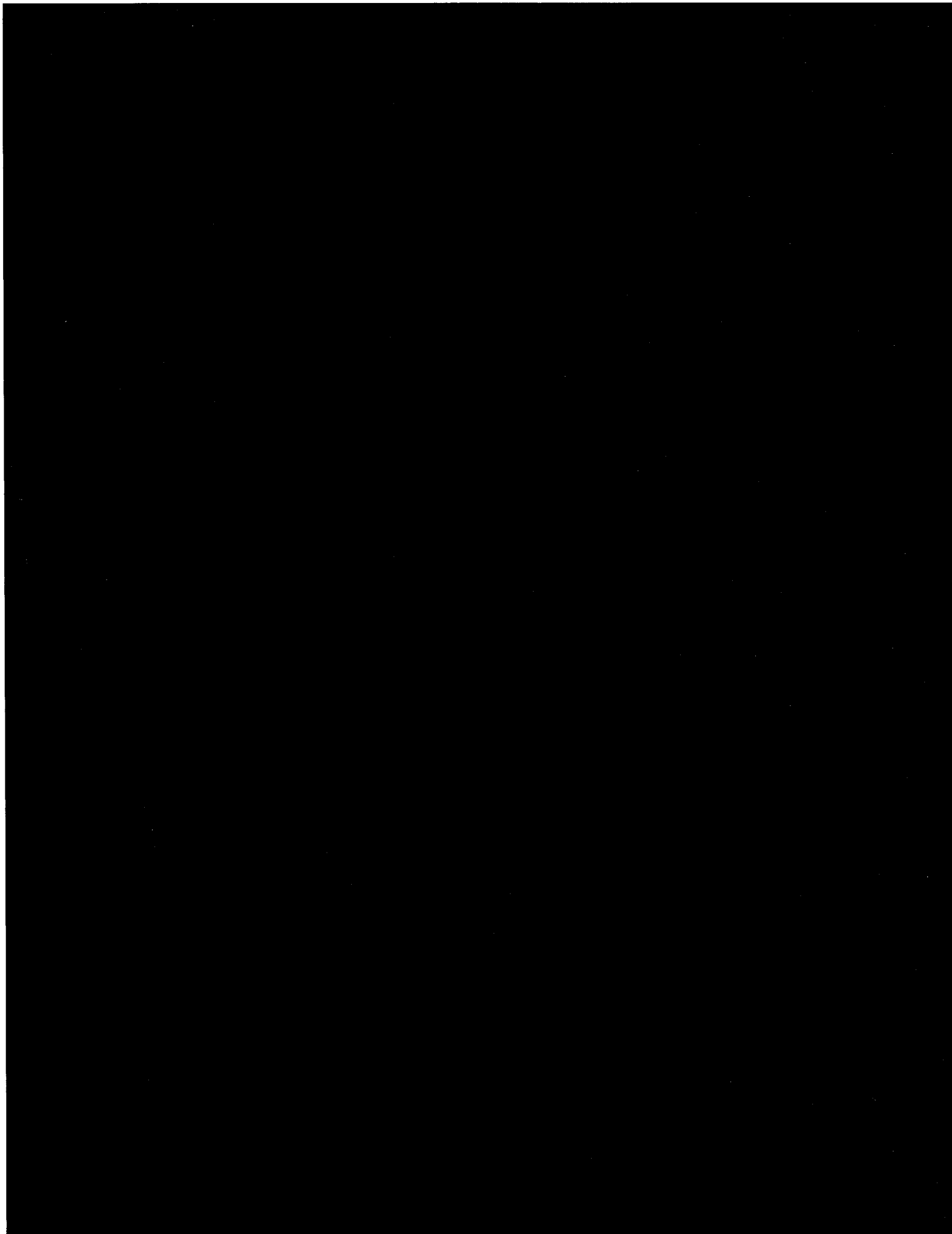
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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office for National Statistics 1999). The number of people aged 65 and over is projected to increase to 6.5 million by 2011, and the number of people aged 75 and over to 4.5 million (Office for National Statistics 1999).

There is a growing awareness of the need to address the health care needs of the elderly population. The Department of Health (1999) has identified the need to develop a 'new paradigm' of health care for the elderly, which is based on the principles of 'person-centred care'. This paradigm is based on the idea that the elderly person is a 'person' first, and a 'patient' second. It is based on the idea that the elderly person has a right to be involved in decisions about their care, and that the health care system should be organized to meet the needs of the elderly person.

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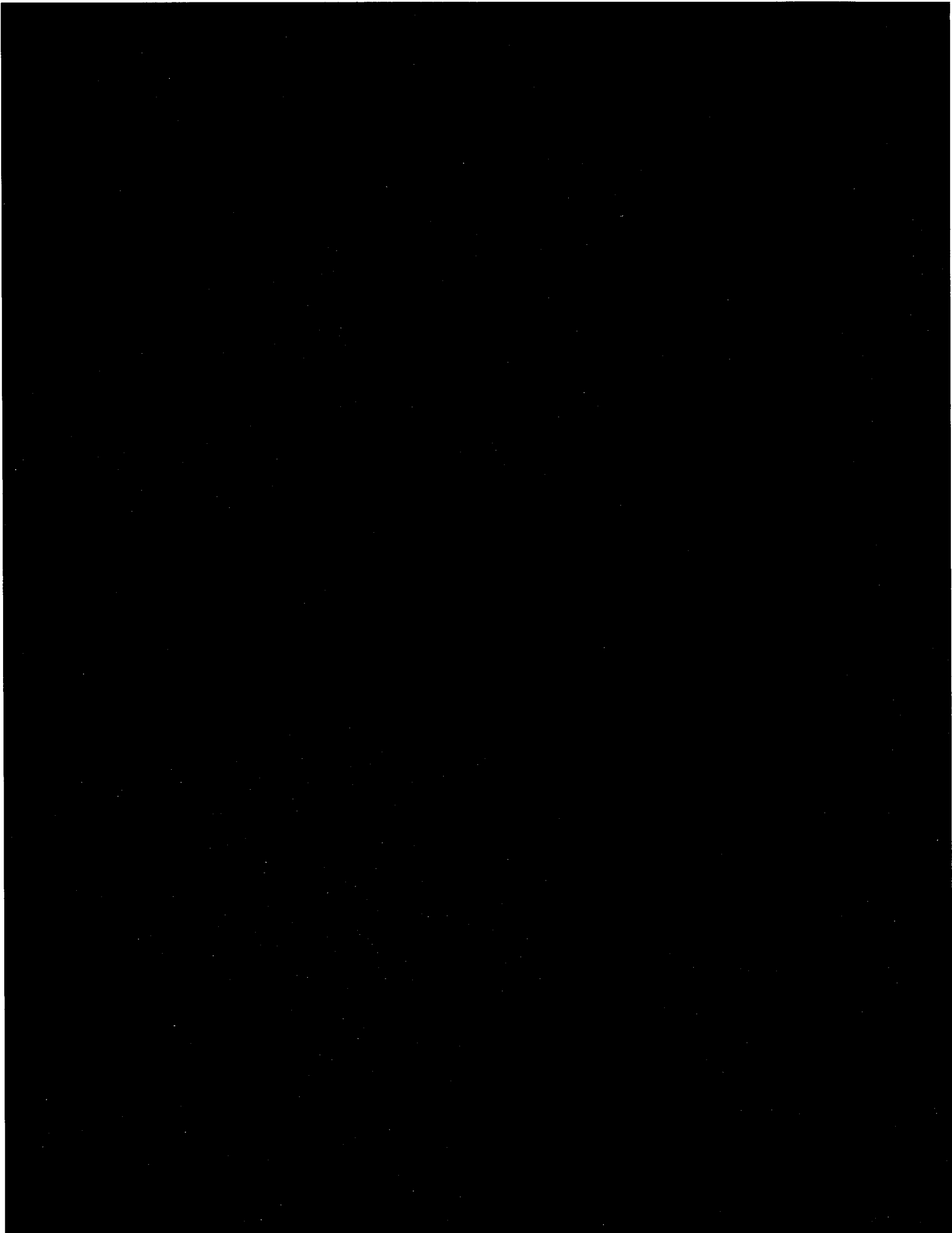
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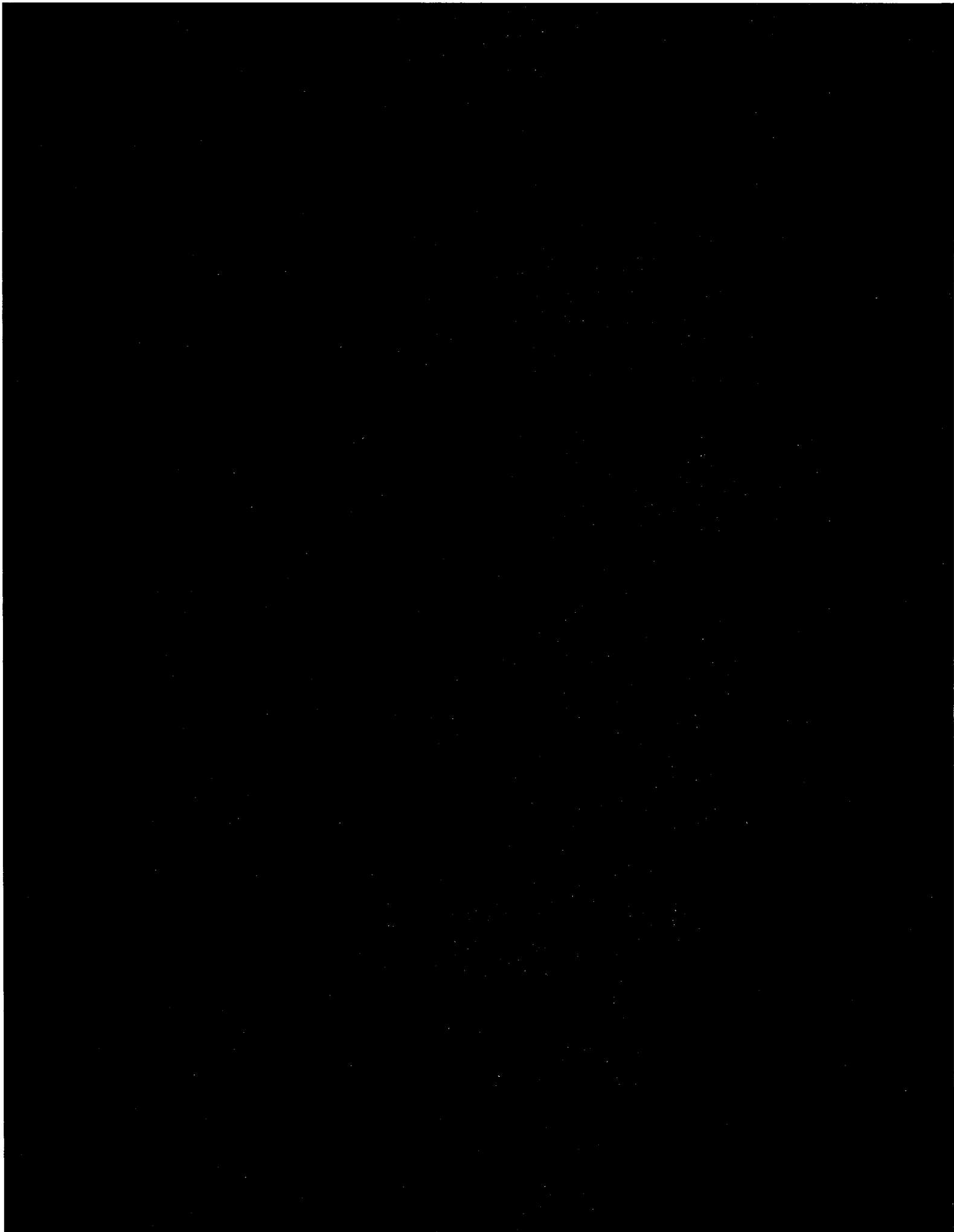
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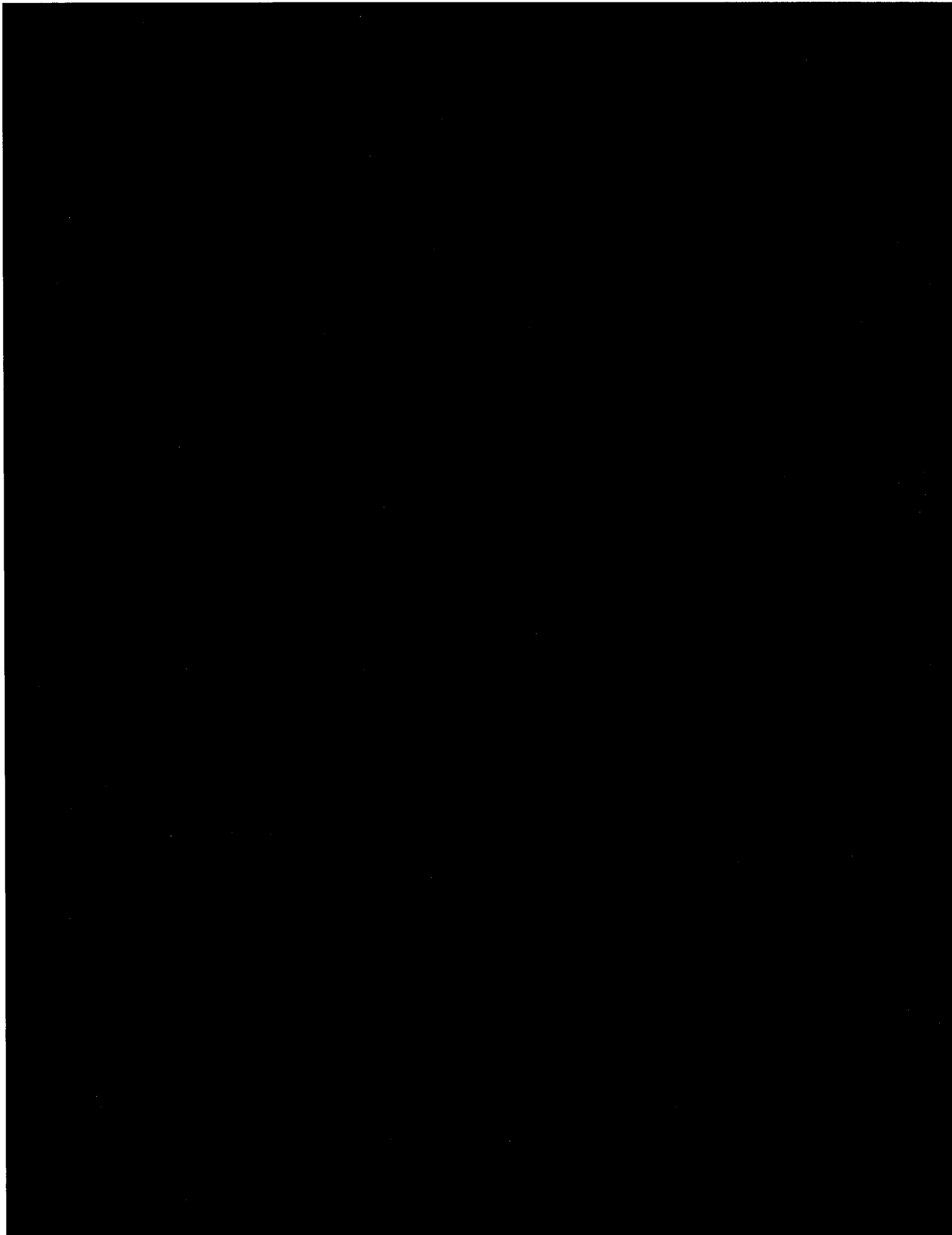
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1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting department in ensuring the integrity of the financial statements. It emphasizes the need for transparency and accountability in all financial reporting.

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3. The third part of the document focuses on the role of the accounting department in managing the company's financial resources and ensuring that all financial obligations are met. It discusses the importance of budgeting and the need for regular monitoring of the company's financial performance.

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the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 12.5 million, and the number of people aged 75 and over has increased from 4.5 million to 6.5 million (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase to 15.5 million by 2020, and the number of people aged 75 and over to 8.5 million (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of older people, and to ensure that they are able to live independently and actively in their own homes for as long as possible. This has led to a number of initiatives, including the development of age-friendly communities, and the establishment of local authority services to support older people. The aim of this paper is to review the literature on the needs of older people, and to discuss the implications for practice.

Background

The needs of older people are complex and multifaceted, and can vary significantly between individuals. However, there are a number of common themes that have been identified in the literature. These include the need for social contact, the need for a sense of purpose, the need for financial security, and the need for physical and mental health care. The following sections will discuss each of these themes in more detail.

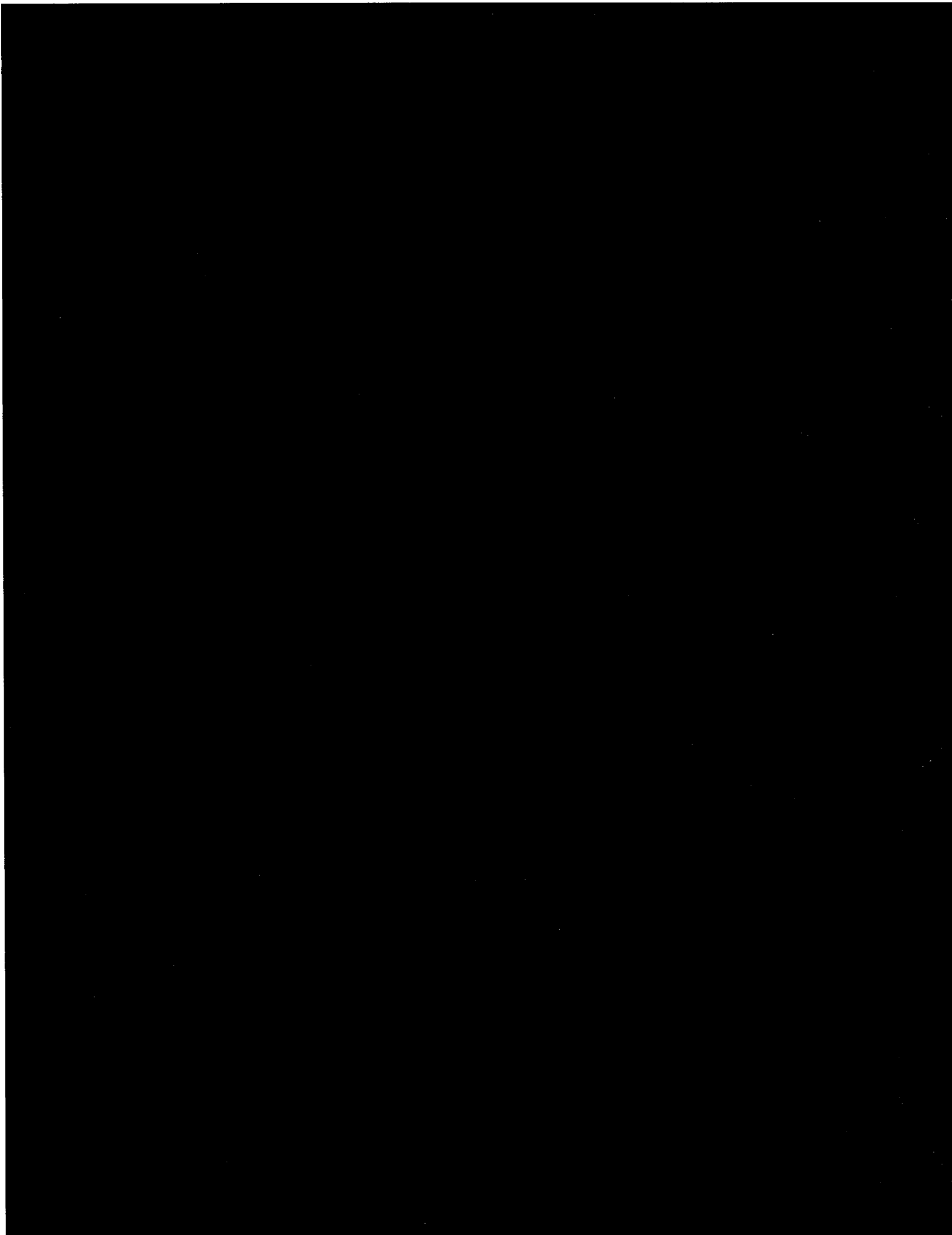
Social contact. One of the most common needs of older people is the need for social contact. This can be provided by family, friends, or community groups. However, many older people live alone, and may not have a regular social network. This can lead to feelings of isolation and loneliness, which can have a negative impact on mental health. It is therefore important to ensure that older people have access to social contact, and that they are able to participate in community activities.

Sense of purpose. Another common need of older people is the need for a sense of purpose. This can be provided by volunteering, or by taking part in hobbies and interests. However, many older people have retired, and may not have a regular routine or a sense of purpose. This can lead to feelings of boredom and frustration, which can have a negative impact on mental health. It is therefore important to ensure that older people have access to activities that give them a sense of purpose.

Financial security. A third common need of older people is the need for financial security. This can be provided by a pension, or by savings. However, many older people have a low income, and may not have enough money to meet their needs. This can lead to financial stress, which can have a negative impact on mental health. It is therefore important to ensure that older people have access to financial resources, and that they are able to meet their needs.

Physical and mental health care. A fourth common need of older people is the need for physical and mental health care. This can be provided by a GP, or by a community health centre. However, many older people have a chronic condition, and may need regular medical attention. This can lead to physical and mental health problems, which can have a negative impact on quality of life. It is therefore important to ensure that older people have access to health care, and that they are able to manage their conditions.

The needs of older people are complex and multifaceted, and can vary significantly between individuals. However, there are a number of common themes that have been identified in the literature. These include the need for social contact, the need for a sense of purpose, the need for financial security, and the need for physical and mental health care.



the 1990s, the number of people in the world who are under 15 years of age is expected to increase by 1.5 billion, from 1.1 billion in 1990 to 2.6 billion in 2010.

As the world's population grows, the demand for food and other resources will increase. This will put pressure on the environment and on the world's resources.

One of the main reasons for the increase in the world's population is the increase in the life expectancy of people. This is due to a number of factors, including:

• Improvements in medical care and technology, which have helped to reduce the number of deaths from disease and injury.

• Improvements in nutrition and health care, which have helped to reduce the number of deaths from malnutrition and disease.

• Improvements in living conditions, which have helped to reduce the number of deaths from disease and injury.

• Improvements in education, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the environment, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the economy, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the social structure, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the culture, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the religion, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the politics, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the law, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the justice system, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the military, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the intelligence community, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the diplomatic corps, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the foreign service, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the consular corps, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the embassy staff, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the local government, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the national government, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the international community, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the world community, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the human community, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the global community, which have helped to reduce the number of deaths from disease and injury.

• Improvements in the universal community, which have helped to reduce the number of deaths from disease and injury.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office of National Statistics 2000). The number of people aged 65 and over in the UK is projected to increase from 10.5 million in 1999 to 12.5 million in 2010, with the number of people aged 75 and over increasing from 4.5 million to 5.5 million in the same period (Office of National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (2000) has identified the need to develop a 'new paradigm' for the care of the ageing population, one that is based on the principles of 'active ageing' and 'positive ageing'. The Department of Health (2000) has identified the need to develop a 'new paradigm' for the care of the ageing population, one that is based on the principles of 'active ageing' and 'positive ageing'.

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The Department of Health (1999) has also identified a number of key areas for research, including: (1) the health and well-being of older people; (2) the needs of older people; and (3) the effectiveness of services for older people. The Department of Health (1999) has also identified a number of key areas for policy, including: (1) the health and well-being of older people; (2) the needs of older people; and (3) the effectiveness of services for older people.

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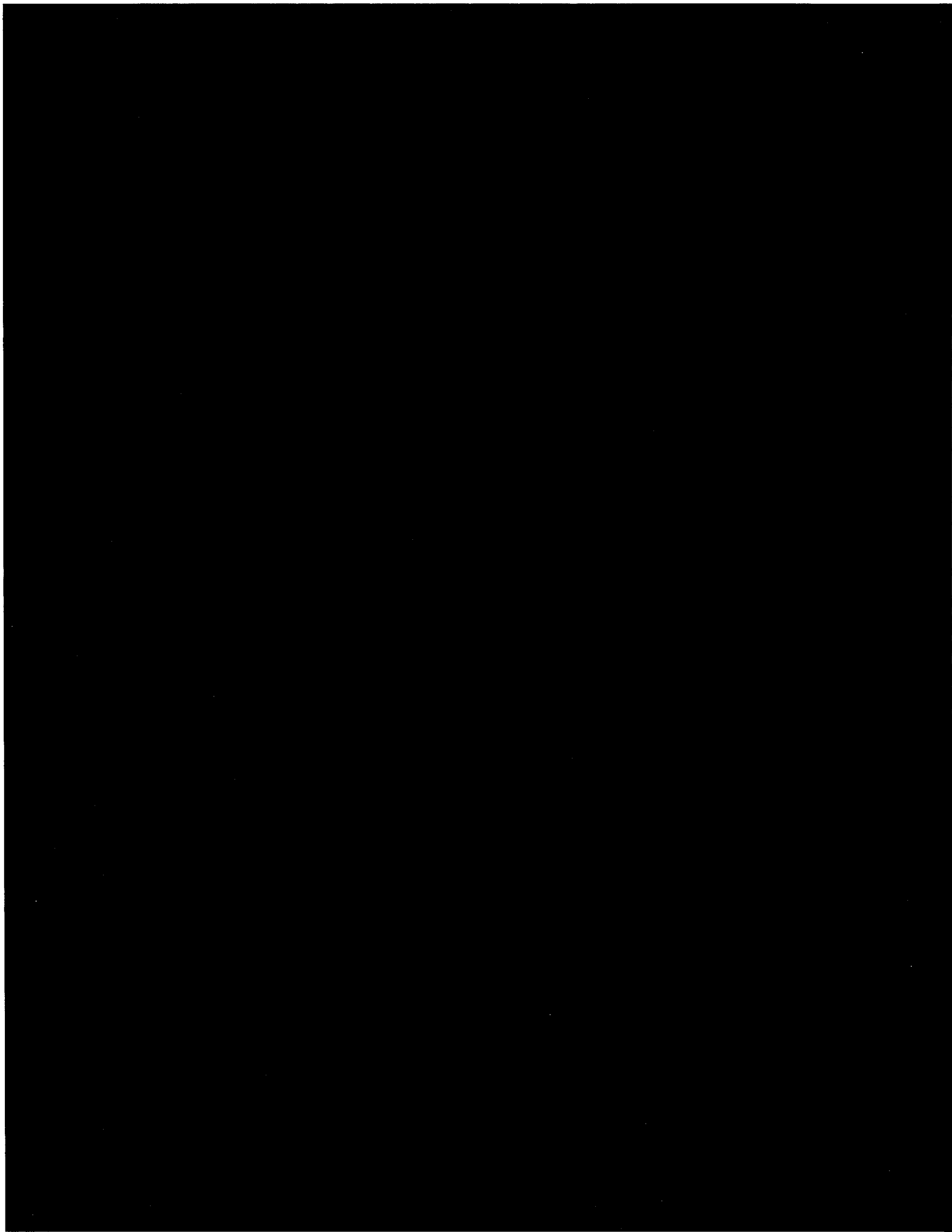
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There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has published a strategy for the ageing population, which sets out the government's commitment to improve the health and social care of older people. The strategy is based on the following principles: (1) to improve the health and social care of older people; (2) to ensure that older people are able to live independently; (3) to ensure that older people are able to participate in society; and (4) to ensure that older people are able to live in their own homes.

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10. *Journal of the American Statistical Association*, 1997, 92, 1023-1032.

the first of these is the fact that the majority of the population of the United States is now living in urban areas. This is a result of the process of urbanization, which has been going on since the beginning of the nineteenth century. The second factor is the fact that the majority of the population of the United States is now living in the eastern half of the country. This is a result of the process of westward expansion, which has been going on since the beginning of the nineteenth century. The third factor is the fact that the majority of the population of the United States is now living in the middle class. This is a result of the process of industrialization, which has been going on since the beginning of the nineteenth century. The fourth factor is the fact that the majority of the population of the United States is now living in the white race. This is a result of the process of racialization, which has been going on since the beginning of the nineteenth century. The fifth factor is the fact that the majority of the population of the United States is now living in the United States. This is a result of the process of nation-building, which has been going on since the beginning of the nineteenth century.

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the 1990s, the number of people in the world who are under 15 years of age is expected to increase from 1.1 billion to 1.5 billion.

As the world's population grows, the demand for food and other resources will increase. This will put pressure on the environment and on the world's food supply. It is important that we find ways to meet this demand without harming the environment.

One way to do this is to use sustainable agriculture. This means using farming methods that do not harm the environment and that can be used over and over again. Sustainable agriculture can help us to meet the world's growing demand for food without harming the planet.

Another way to do this is to use renewable resources. These are resources that can be replaced naturally, such as wind, water, and solar energy. Using renewable resources can help us to meet our energy needs without depleting the earth's resources.

Finally, we can help to protect the environment by using less and recycling more. This means using fewer resources and disposing of waste properly. By doing this, we can help to reduce the amount of waste that ends up in landfills and oceans.

There are many other ways that we can help to protect the environment and meet the world's growing demand for resources. By working together, we can make a difference and create a better world for ourselves and for future generations.

One of the most important things we can do is to educate ourselves and others about the environment. This means learning about the problems we face and the ways we can solve them. By being informed, we can make better choices and take action to protect the planet.

Another important thing we can do is to support organizations that are working to protect the environment. These organizations are doing important work to clean up the planet and protect our natural resources. By supporting them, we can help them to do their work more effectively.

Finally, we can help to protect the environment by making changes in our own lives. This means using less, recycling more, and supporting sustainable products. By making these changes, we can all do our part to protect the planet and create a better world for ourselves and for future generations.

There is no one right way to protect the environment. Everyone has a role to play, and we all need to do our part. By working together, we can make a difference and create a better world for ourselves and for future generations.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office for National Statistics 1999). The number of people aged 65 and over is projected to increase to 6.5 million by 2010, and the number of people aged 75 and over to 4.5 million (Office for National Statistics 1999).

There is a growing awareness of the need to address the health care needs of the elderly population. The Department of Health (1999) has identified the need to develop a 'new paradigm' of health care for the elderly, which is based on the principles of 'person-centred care'. This paradigm is based on the idea that the elderly person is a 'person' first, and a 'patient' second. It is based on the idea that the elderly person has a right to be treated as a 'person', and not as a 'patient'. This paradigm is based on the idea that the elderly person has a right to be treated as a 'person', and not as a 'patient'.

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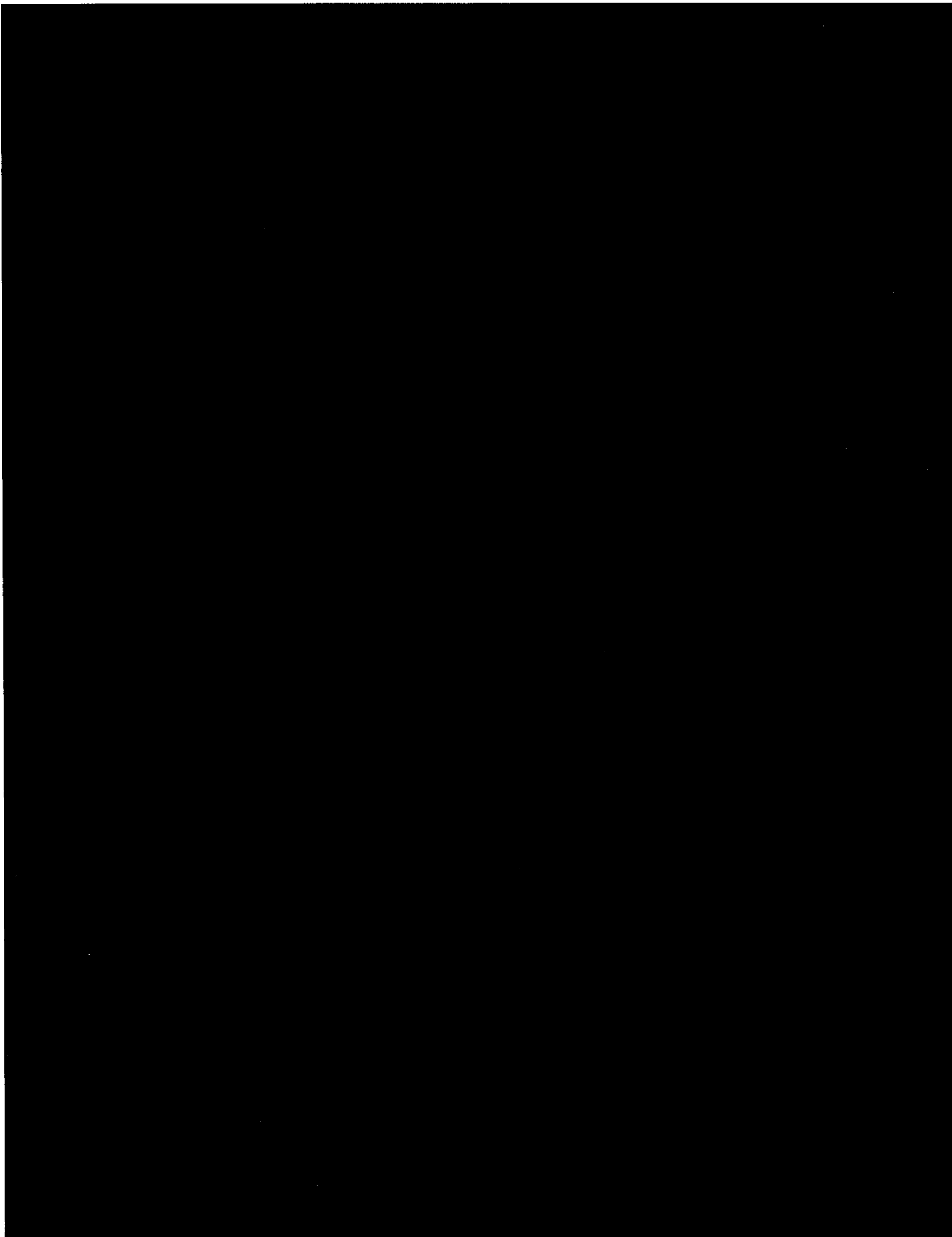
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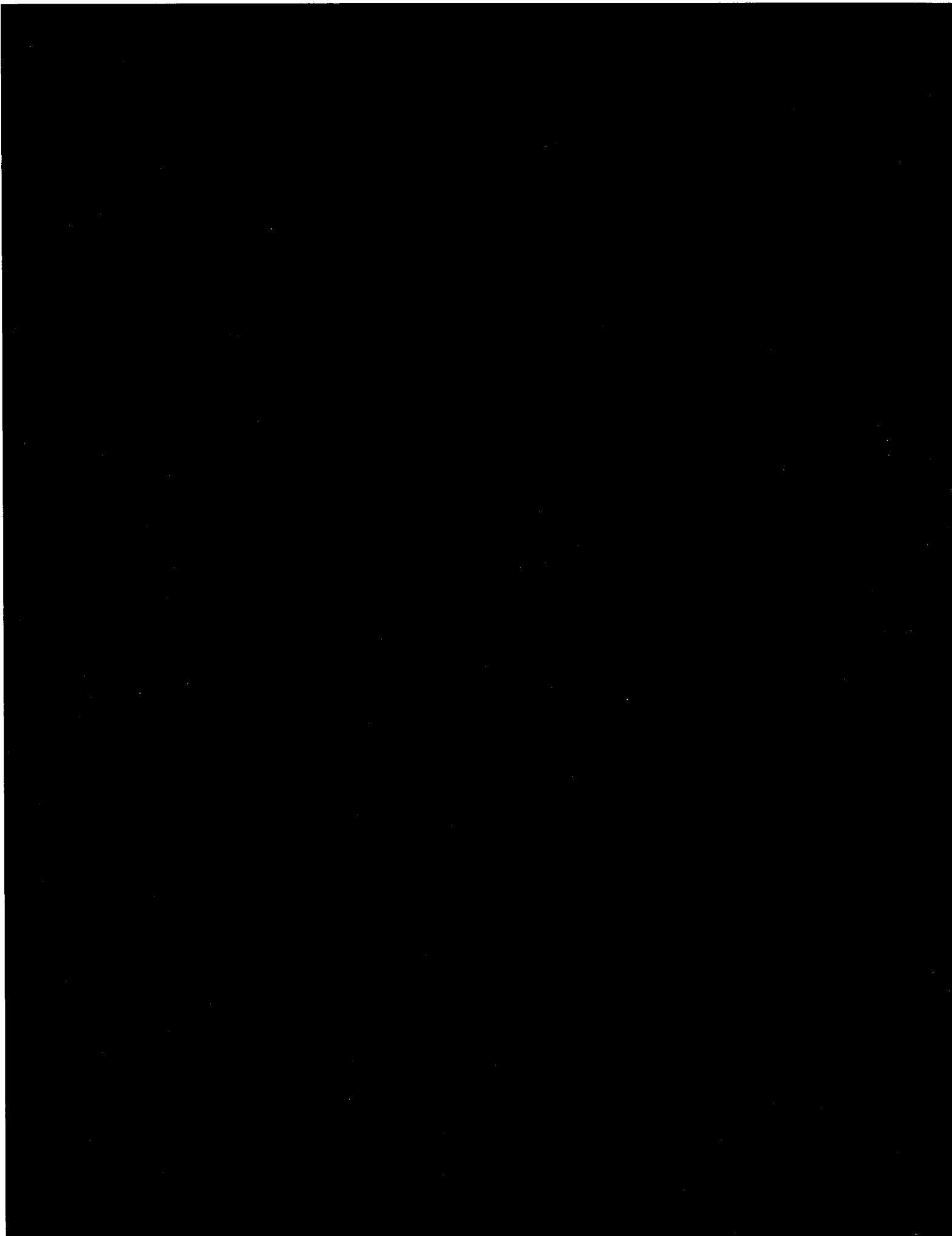
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the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There are a number of reasons for this increase. First, the world population has increased from 5 billion in 1987 to 6 billion in 1996, and is projected to reach 7 billion by 2015 (FAO 1996).

Second, the world population is becoming increasingly urban, and this has led to a greater demand for food.

Third, the world population is becoming increasingly aged, and this has led to a greater demand for food.

Fourth, the world population is becoming increasingly mobile, and this has led to a greater demand for food.

Fifth, the world population is becoming increasingly educated, and this has led to a greater demand for food.

Sixth, the world population is becoming increasingly wealthy, and this has led to a greater demand for food.

Seventh, the world population is becoming increasingly healthy, and this has led to a greater demand for food.

Eighth, the world population is becoming increasingly active, and this has led to a greater demand for food.

Ninth, the world population is becoming increasingly mobile, and this has led to a greater demand for food.

Tenth, the world population is becoming increasingly educated, and this has led to a greater demand for food.

Eleventh, the world population is becoming increasingly wealthy, and this has led to a greater demand for food.

Twelfth, the world population is becoming increasingly healthy, and this has led to a greater demand for food.

Thirteenth, the world population is becoming increasingly active, and this has led to a greater demand for food.

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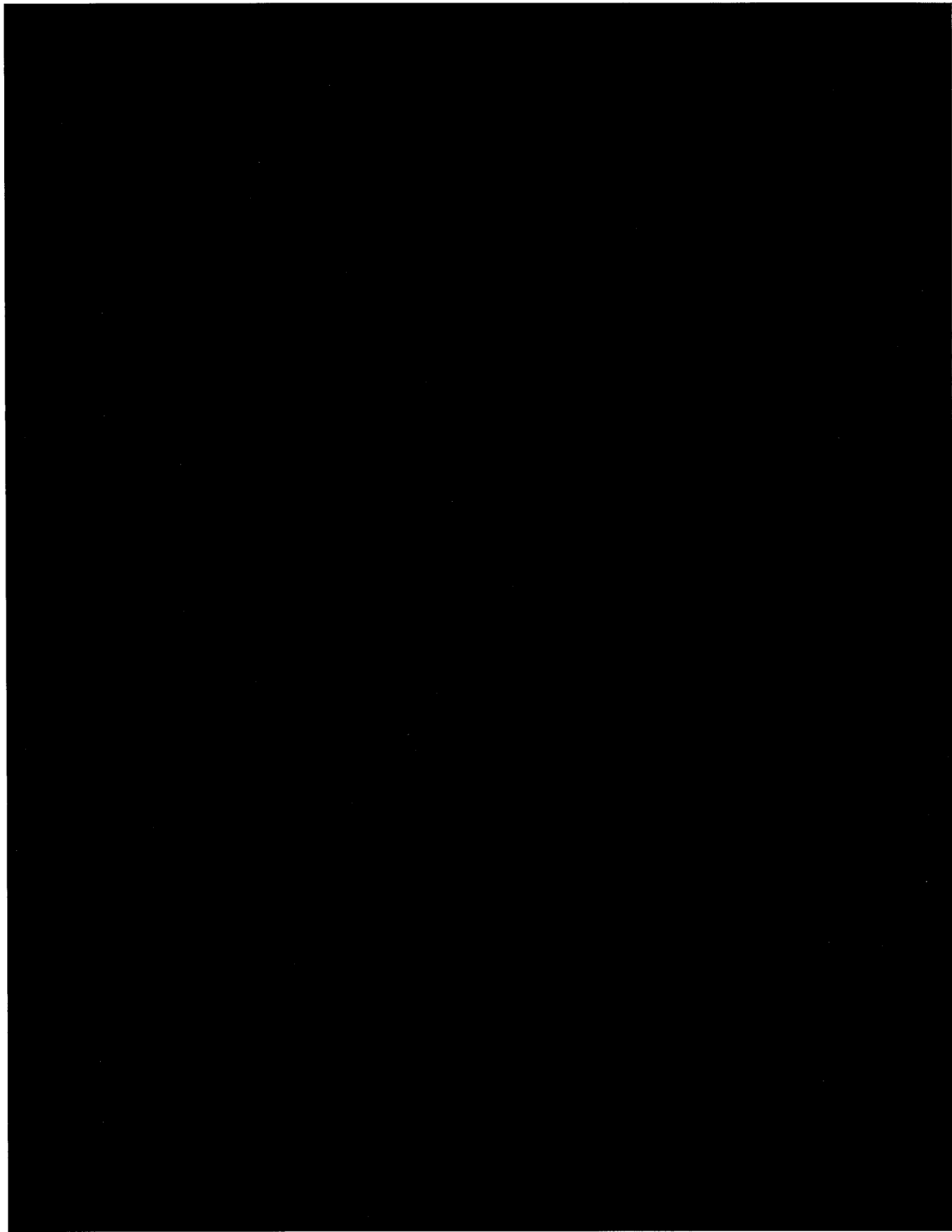


Table 1. Summary of the study design and procedures

Measure	Procedure
Pretest	100 children (50 boys and 50 girls) aged 10–11 years completed the questionnaire and the 10-item test. The questionnaire was used to determine the range of possible responses for each item. The 10-item test was used to determine the range of possible responses for each item.
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the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 12.5 million (1990-1999) (Office for National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has published a strategy for ageing, which sets out the government's commitment to improve the health and quality of life of older people. The strategy is based on the following principles:

- Older people should be able to live independently and actively in their own homes.
- Older people should be able to participate in the community and in the life of the country.
- Older people should be able to live in good health and without pain.

The strategy also sets out a number of key objectives, including the following:

- To reduce the number of older people who are in poor health and who are dependent on others.
- To improve the quality of life of older people who are in poor health and who are dependent on others.
- To ensure that older people have access to the services and support that they need.

The strategy is a key document in the development of policies and services for older people. It provides a framework for the development of policies and services that are based on the needs of older people and on the principles of the strategy.

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The first part of the paper discusses the importance of the study of the history of the English language. It is a branch of linguistics which deals with the changes in the language over time. The study of the history of the English language is important for several reasons. First, it helps us to understand the development of the language and the factors which have influenced it. Second, it helps us to understand the relationship between the English language and other languages. Third, it helps us to understand the cultural and social context in which the language has developed.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2020 (Office of National Statistics 2000).

There is a growing awareness of the need to address the health care needs of the ageing population. The Department of Health (2000) has set out a strategy for the future of health care for older people. The strategy is based on the following principles:

- To ensure that older people have access to the best possible health care.
- To ensure that older people are able to live independently for as long as possible.
- To ensure that older people are able to participate in decisions about their health care.
- To ensure that older people are able to live in the community for as long as possible.

The strategy also sets out a number of key objectives for the future of health care for older people. These include:

- To improve the quality of life of older people.
- To reduce the number of older people who are in long-term care.
- To increase the number of older people who are able to live in the community.
- To ensure that older people are able to participate in decisions about their health care.

The strategy also sets out a number of key actions for the future of health care for older people. These include:

- To improve the quality of health care for older people.
- To reduce the number of older people who are in long-term care.
- To increase the number of older people who are able to live in the community.
- To ensure that older people are able to participate in decisions about their health care.

The strategy also sets out a number of key measures for the future of health care for older people. These include:

- To improve the quality of health care for older people.
- To reduce the number of older people who are in long-term care.
- To increase the number of older people who are able to live in the community.
- To ensure that older people are able to participate in decisions about their health care.

The strategy also sets out a number of key targets for the future of health care for older people. These include:

- To improve the quality of health care for older people.
- To reduce the number of older people who are in long-term care.
- To increase the number of older people who are able to live in the community.
- To ensure that older people are able to participate in decisions about their health care.

the 1990s, the health care system in the Netherlands has been characterized by a series of reforms that have resulted in a more market-oriented system. The reforms have been aimed at increasing efficiency, reducing costs, and improving the quality of care. The reforms have been implemented in a series of steps, starting with the introduction of health insurance in 1989, followed by the introduction of competition in 1991, and the introduction of managed care in 1996. The reforms have been controversial, with some arguing that they have led to a more equitable system, while others argue that they have led to a more fragmented system.

The reforms have also led to a number of challenges for the health care system. One of the main challenges is the issue of equity. While the reforms have led to a more equitable system in terms of access to care, there are still significant disparities in the quality of care. Another challenge is the issue of costs. The reforms have led to a significant increase in the costs of health care, which has led to a number of concerns about the sustainability of the system. Finally, the reforms have led to a number of concerns about the quality of care. Some argue that the reforms have led to a more fragmented system, which may lead to a decline in the quality of care.

Despite these challenges, the reforms have also led to a number of positive outcomes. One of the main positive outcomes is the increase in the efficiency of the health care system. The reforms have led to a number of measures that have helped to reduce costs, such as the introduction of managed care and the introduction of competition. Another positive outcome is the improvement in the quality of care. The reforms have led to a number of measures that have helped to improve the quality of care, such as the introduction of accreditation and the introduction of patient choice.

The reforms have also led to a number of other positive outcomes. One of the main positive outcomes is the increase in the transparency of the health care system. The reforms have led to a number of measures that have helped to increase the transparency of the system, such as the introduction of public reporting and the introduction of patient choice. Another positive outcome is the increase in the accountability of the health care system. The reforms have led to a number of measures that have helped to increase the accountability of the system, such as the introduction of accreditation and the introduction of patient choice.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.1 million (Office of National Statistics 1999).

There is a growing awareness of the need to address the needs of older people in the community, and the need to ensure that they are able to live independently and safely. This has led to a number of initiatives, including the development of community care packages, the establishment of care homes, and the provision of home care services.

One of the main challenges facing the health and social care system is the need to ensure that older people are able to live independently and safely. This requires a range of services, including housing, transport, and social support. The health and social care system must be able to provide these services in a way that is accessible and affordable to older people.

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There is a growing awareness of the need to develop services to meet the needs of older people, and a number of initiatives have been developed to address this need. The Department of Health (1999) has published a strategy for older people, which sets out the government's commitment to improve the lives of older people. The strategy is based on three main principles: (1) to ensure that older people have the opportunity to live independently and actively; (2) to ensure that older people have access to the services and support they need; and (3) to ensure that older people are treated with respect and dignity.

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The first part of the paper discusses the importance of the research and the objectives of the study. It then presents a literature review of the existing research on the topic. The second part of the paper describes the methodology used in the study, including the data sources and the statistical techniques employed. The results of the study are then presented, followed by a discussion of the implications of the findings. The paper concludes with a summary of the main points and suggestions for further research.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.1 million (Office for National Statistics 1999). The number of people aged 65 and over is projected to increase to 10.5 million by 2026, and the number of people aged 75 and over to 6.5 million (Office for National Statistics 1999).

There is a growing awareness of the need to develop strategies to meet the needs of the ageing population. The Department of Health (1999) has identified the need to develop a 'new paradigm' for the care of the elderly, which is based on the principles of 'active ageing' and 'positive ageing'. The 'new paradigm' is based on the idea that ageing is a process, and that the needs of the elderly are not fixed, but change over time. The 'new paradigm' is based on the idea that the elderly are not a homogeneous group, and that the needs of different groups of elderly people are different.

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the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There is a growing awareness of the need to improve the nutritional status of the world's population. The World Bank (1992) has estimated that the cost of malnutrition to the world economy is \$100 billion per year. The World Health Organization (WHO) has estimated that the cost of malnutrition to the world economy is \$100 billion per year.

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million (1990–1999) and is projected to increase by a further 1.5 million by 2010 (Office for National Statistics 2000).

There is a growing awareness of the need to address the health care needs of the ageing population. The Department of Health (2000) has set out a vision for the future of health care for older people, and the National Institute for Clinical Excellence (NICE) (2000) has produced guidance on the management of older people with chronic conditions. The Department of Health (2000) also states that 'the health care system must be able to meet the needs of older people, and this requires a range of services, including primary care, hospital care, community care, and social care'.

One of the key challenges facing the health care system is how to ensure that older people receive the care and support they need. This paper discusses the challenges facing the health care system and the need for a new approach to the care of older people.

The paper is organized as follows. The first section discusses the challenges facing the health care system. The second section discusses the need for a new approach to the care of older people. The third section discusses the need for a new approach to the care of older people.

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the 'information' and 'communication' fields. The 'information' field is defined as:

...the study of the nature, creation, organisation, storage, retrieval, dissemination and use of information, and the social, cultural, economic and political aspects of information systems and information science. (p. 1)

The 'communication' field is defined as:

...the study of the nature, creation, organisation, storage, retrieval, dissemination and use of communication, and the social, cultural, economic and political aspects of communication systems and communication science. (p. 1)

The 'information science' field is defined as:

...the study of the nature, creation, organisation, storage, retrieval, dissemination and use of information science, and the social, cultural, economic and political aspects of information science systems and information science. (p. 1)

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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1 million (Office for National Statistics 1999). The number of people aged 85 and over has increased by 0.5 million.

There is a growing awareness of the need to address the needs of the ageing population. The Department of Health (1999) has published a strategy for ageing, which sets out the government's commitment to improve the lives of older people. The strategy is based on three main principles: (1) to ensure that older people are able to live independently and actively; (2) to ensure that older people are able to access the services and support they need; and (3) to ensure that older people are able to participate in the life of their communities.

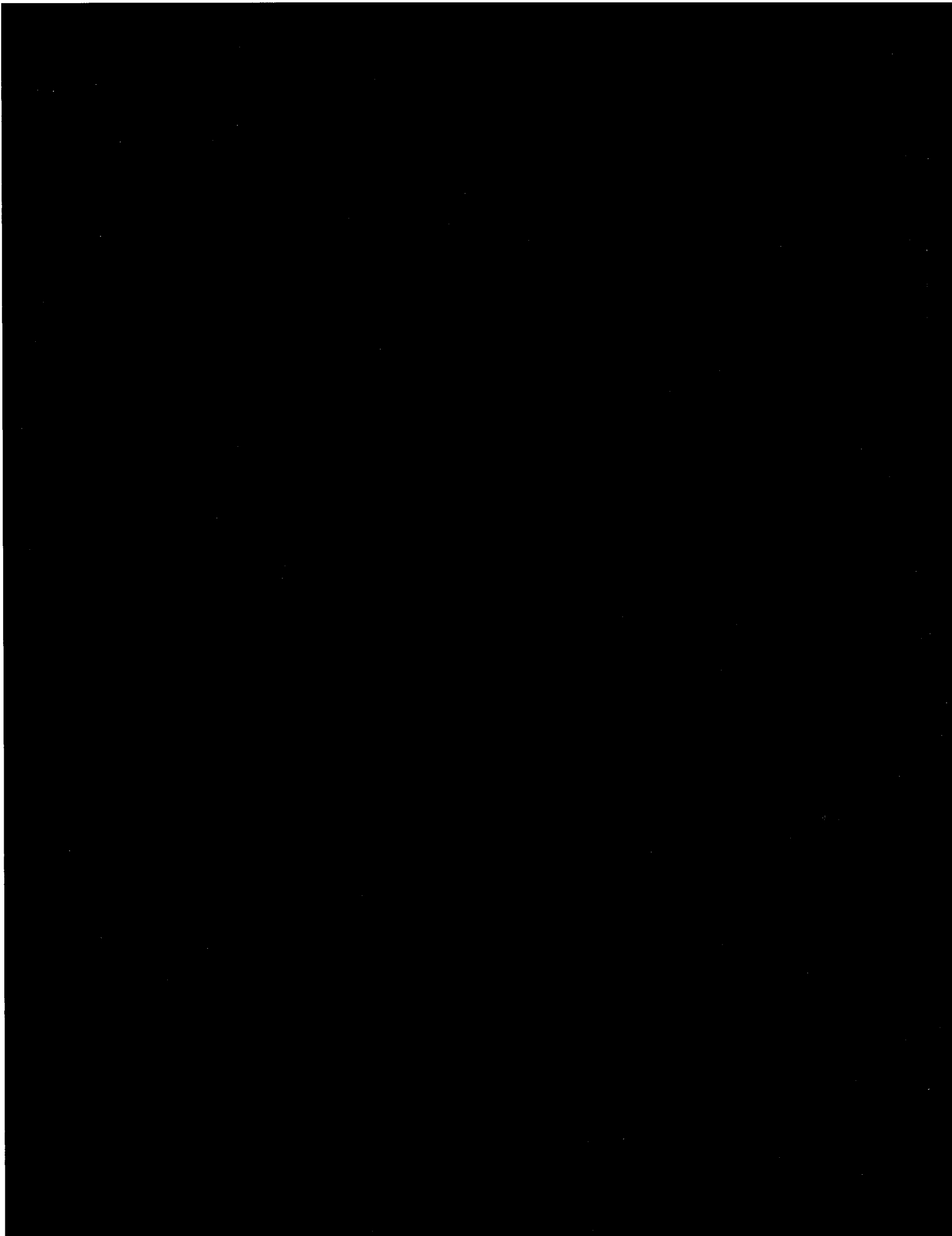
The strategy is based on the following assumptions: (1) that older people are a diverse group with different needs and interests; (2) that older people are able to live independently and actively; (3) that older people are able to access the services and support they need; and (4) that older people are able to participate in the life of their communities. The strategy is based on the following principles: (1) to ensure that older people are able to live independently and actively; (2) to ensure that older people are able to access the services and support they need; and (3) to ensure that older people are able to participate in the life of their communities.

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[The page contains a large, dense block of text that is mostly illegible due to extreme blurring and low contrast. The text appears to be organized into several paragraphs, but the specific words and sentences cannot be discerned.]

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting system in providing reliable financial information. It emphasizes the need for transparency and accountability in financial reporting.

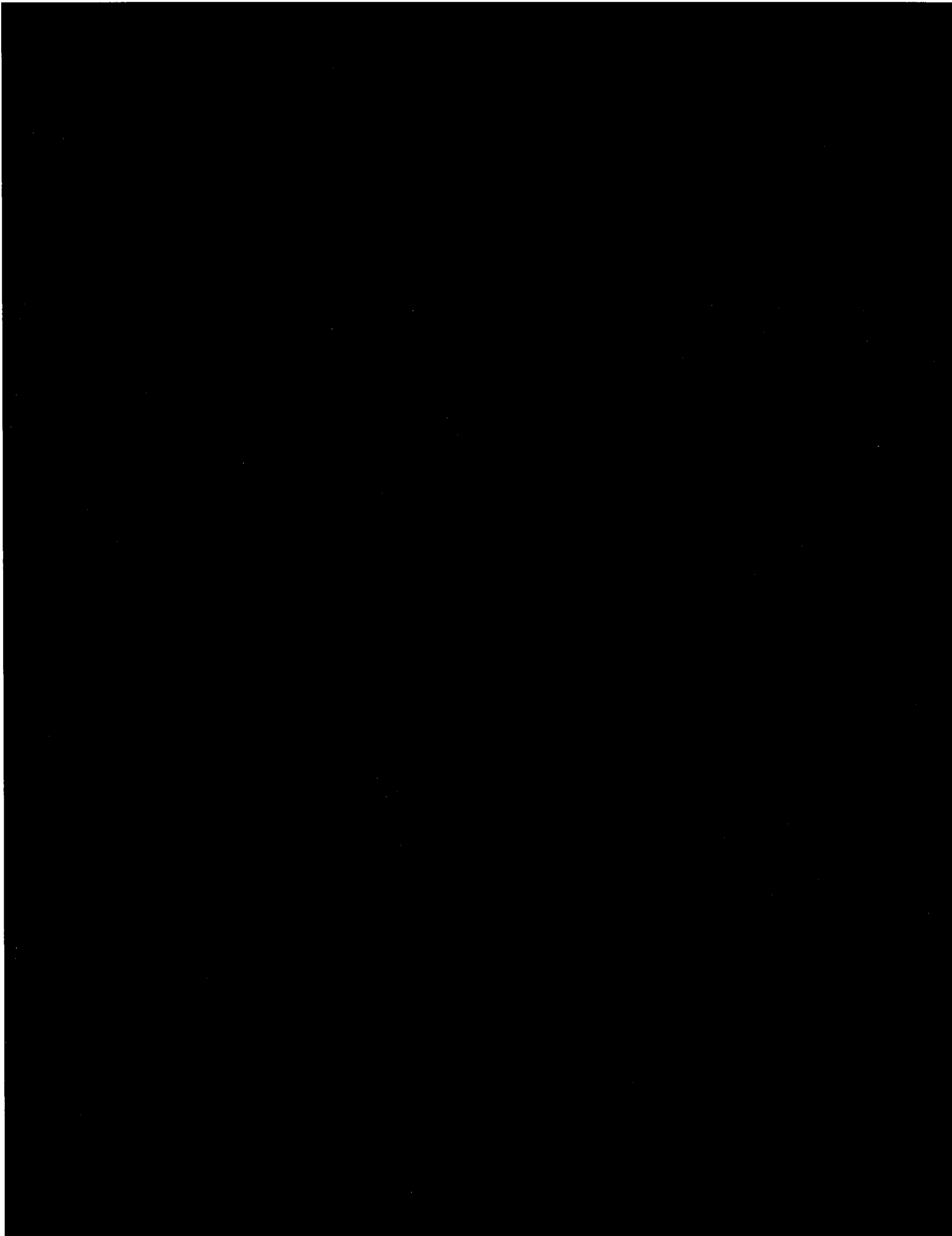
2. The second part of the document outlines the various components of the accounting system, including the general ledger, subsidiary ledgers, and the trial balance. It explains how these components work together to ensure the accuracy and integrity of the financial data.

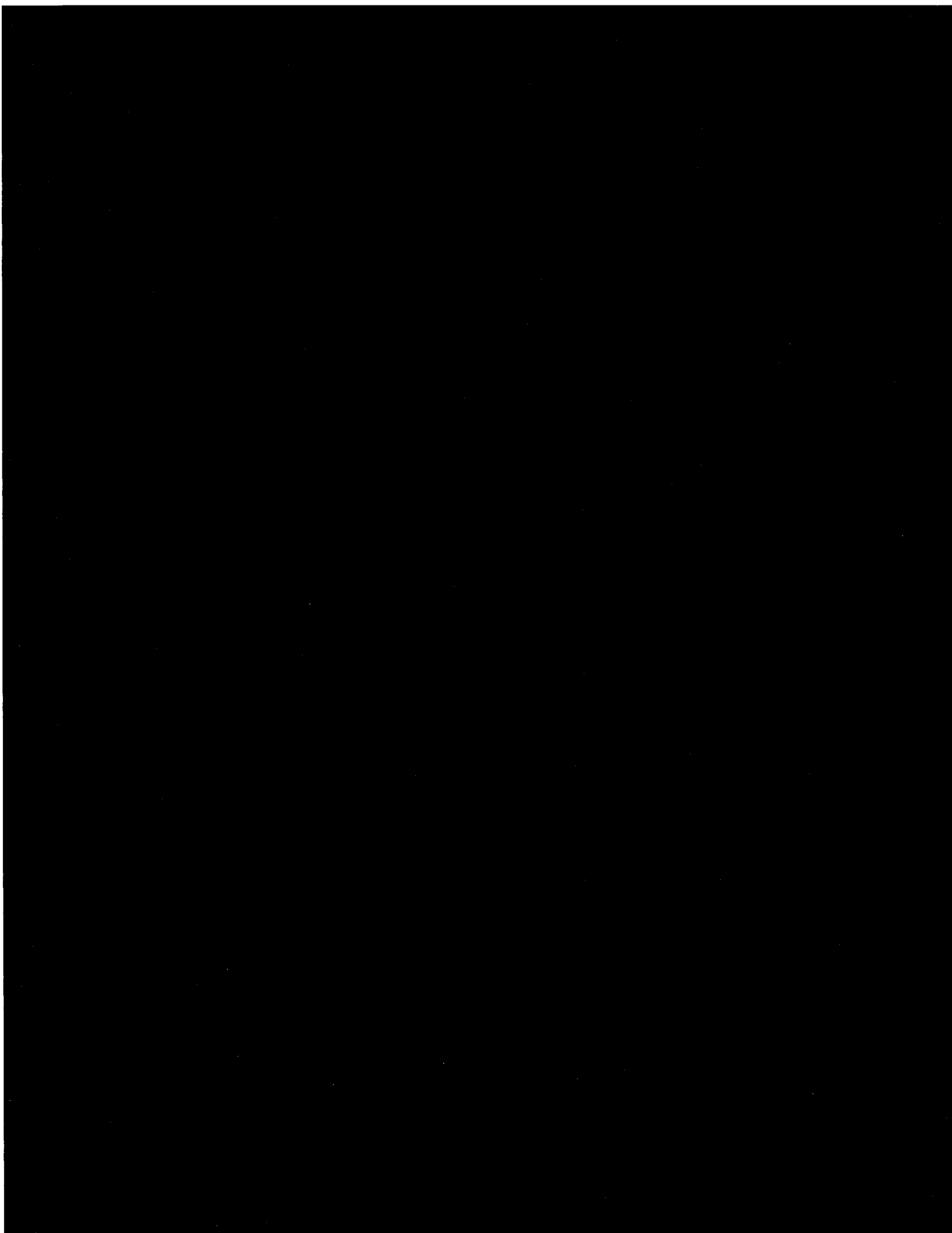
3. The third part of the document focuses on the process of closing the books at the end of each accounting period. It details the steps involved in transferring balances from the temporary accounts to the permanent accounts and the importance of reconciling the books before closing.

4. The fourth part of the document discusses the role of the accounting system in providing financial statements to management and external stakeholders. It highlights the importance of timely and accurate reporting for decision-making and compliance with regulatory requirements.

5. The fifth part of the document addresses the challenges and risks associated with the accounting system, such as data loss, fraud, and errors. It provides recommendations for mitigating these risks and ensuring the security and reliability of the financial information.

6. The sixth part of the document concludes by summarizing the key points discussed and emphasizing the ongoing nature of the accounting process. It stresses the importance of continuous monitoring and improvement to maintain the effectiveness of the accounting system.





the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There are a number of reasons why the world's population is becoming more undernourished. The most important is the rapid increase in the world's population. The world's population is now over 6 billion and is projected to reach 9 billion by the year 2050 (UNEP 1997).

Another reason is the increasing demand for food. As the world's population increases, the demand for food increases. This is because more people need to be fed. The demand for food is also increasing because people are eating more food than they did in the past.

A third reason is the increasing demand for meat. As the world's population increases, the demand for meat increases. This is because more people are eating meat than they did in the past. The demand for meat is also increasing because people are eating more meat than they did in the past.

A fourth reason is the increasing demand for fish. As the world's population increases, the demand for fish increases. This is because more people are eating fish than they did in the past. The demand for fish is also increasing because people are eating more fish than they did in the past.

A fifth reason is the increasing demand for dairy products. As the world's population increases, the demand for dairy products increases. This is because more people are eating dairy products than they did in the past. The demand for dairy products is also increasing because people are eating more dairy products than they did in the past.

A sixth reason is the increasing demand for grains. As the world's population increases, the demand for grains increases. This is because more people are eating grains than they did in the past. The demand for grains is also increasing because people are eating more grains than they did in the past.

A seventh reason is the increasing demand for fruits and vegetables. As the world's population increases, the demand for fruits and vegetables increases. This is because more people are eating fruits and vegetables than they did in the past. The demand for fruits and vegetables is also increasing because people are eating more fruits and vegetables than they did in the past.

An eighth reason is the increasing demand for processed foods. As the world's population increases, the demand for processed foods increases. This is because more people are eating processed foods than they did in the past. The demand for processed foods is also increasing because people are eating more processed foods than they did in the past.

A ninth reason is the increasing demand for fast food. As the world's population increases, the demand for fast food increases. This is because more people are eating fast food than they did in the past. The demand for fast food is also increasing because people are eating more fast food than they did in the past.

A tenth reason is the increasing demand for alcohol. As the world's population increases, the demand for alcohol increases. This is because more people are drinking alcohol than they did in the past. The demand for alcohol is also increasing because people are drinking more alcohol than they did in the past.

A eleventh reason is the increasing demand for tobacco. As the world's population increases, the demand for tobacco increases. This is because more people are smoking tobacco than they did in the past. The demand for tobacco is also increasing because people are smoking more tobacco than they did in the past.

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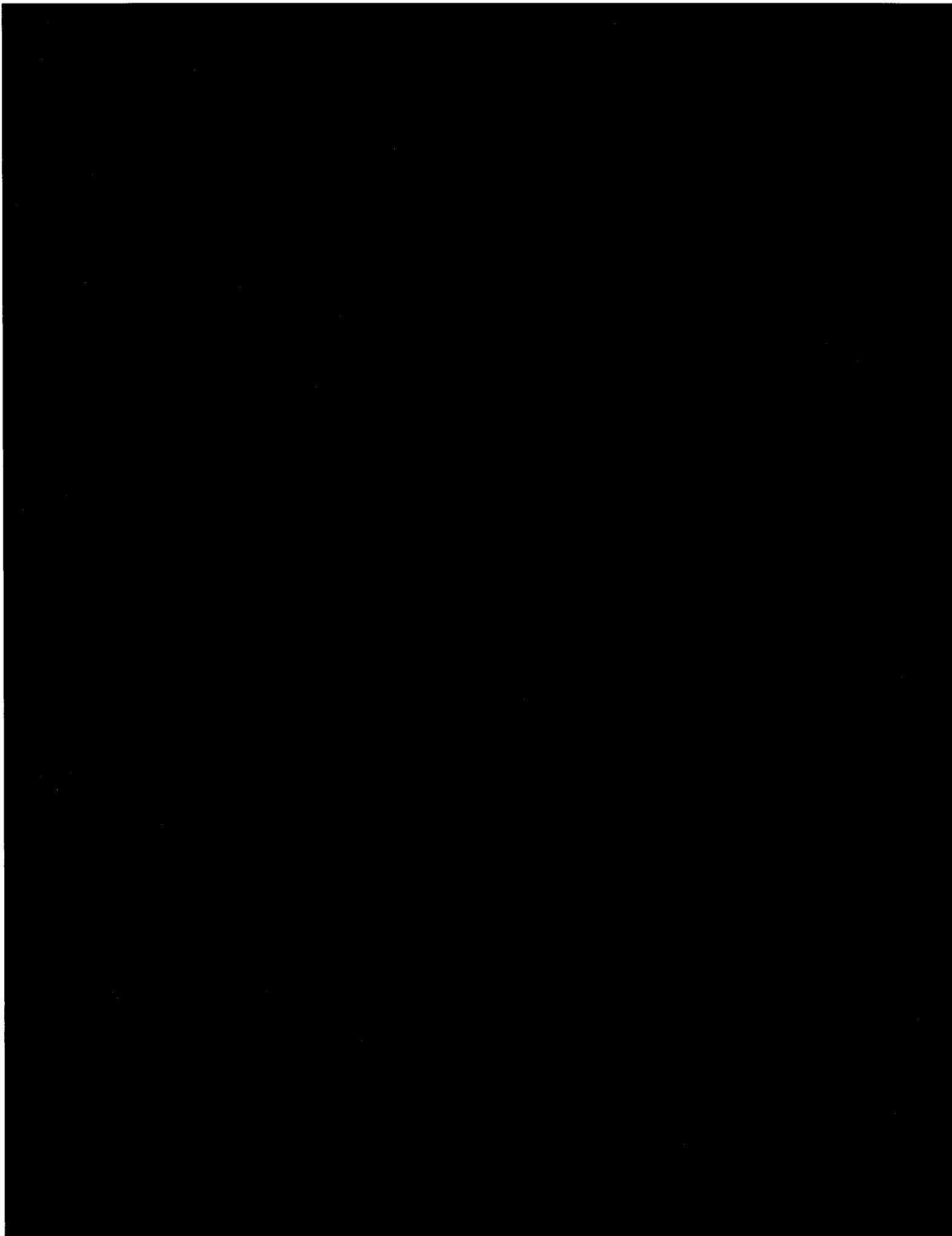
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4. The fourth part of the document discusses the role of the accounting system in providing financial statements to management and external stakeholders. It highlights the importance of presenting the information in a clear and concise manner that is easy to understand and interpret.

5. The fifth part of the document concludes by emphasizing the ongoing nature of the accounting process and the need for continuous monitoring and improvement. It encourages the use of technology and automation to streamline the accounting process and reduce the risk of errors.



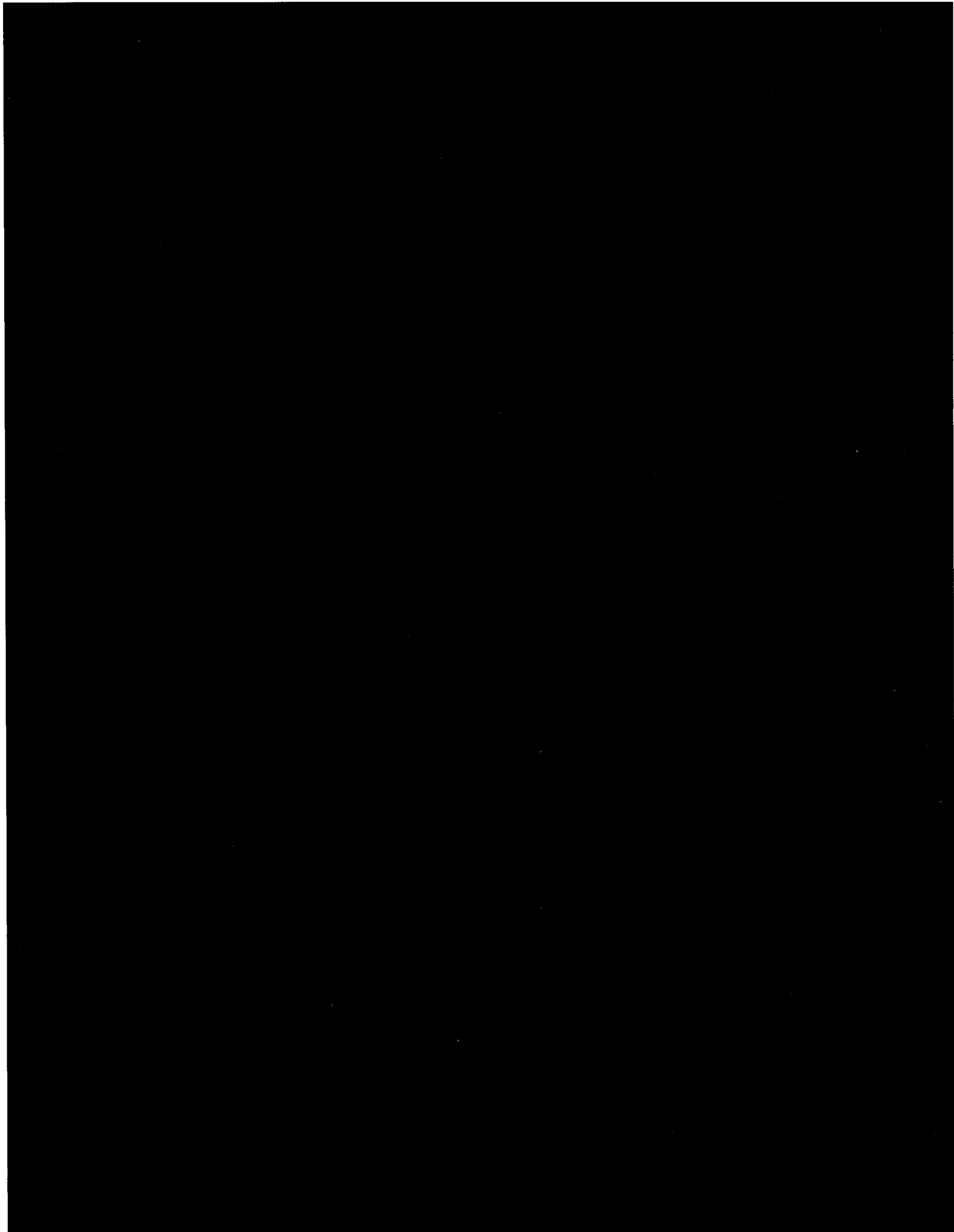
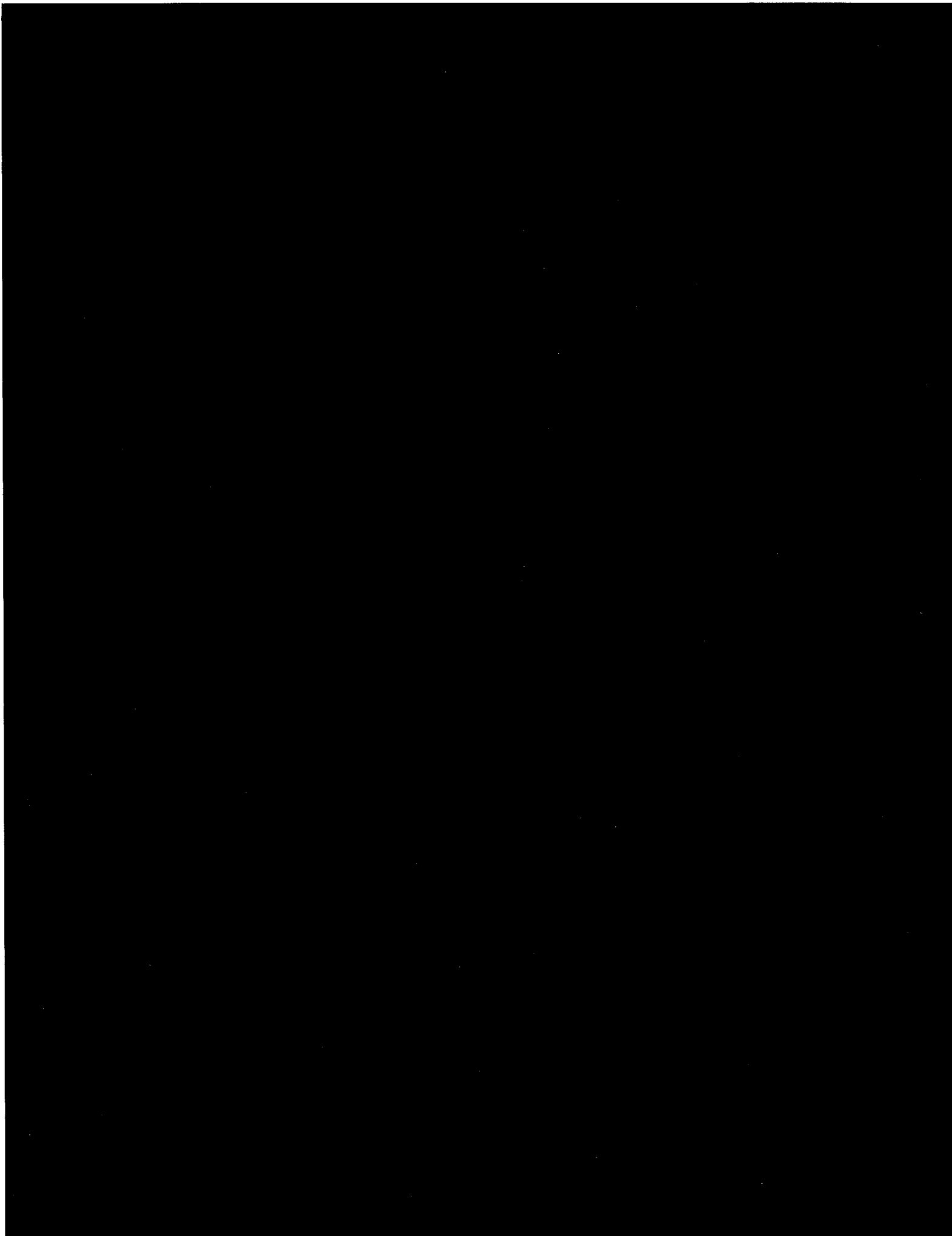
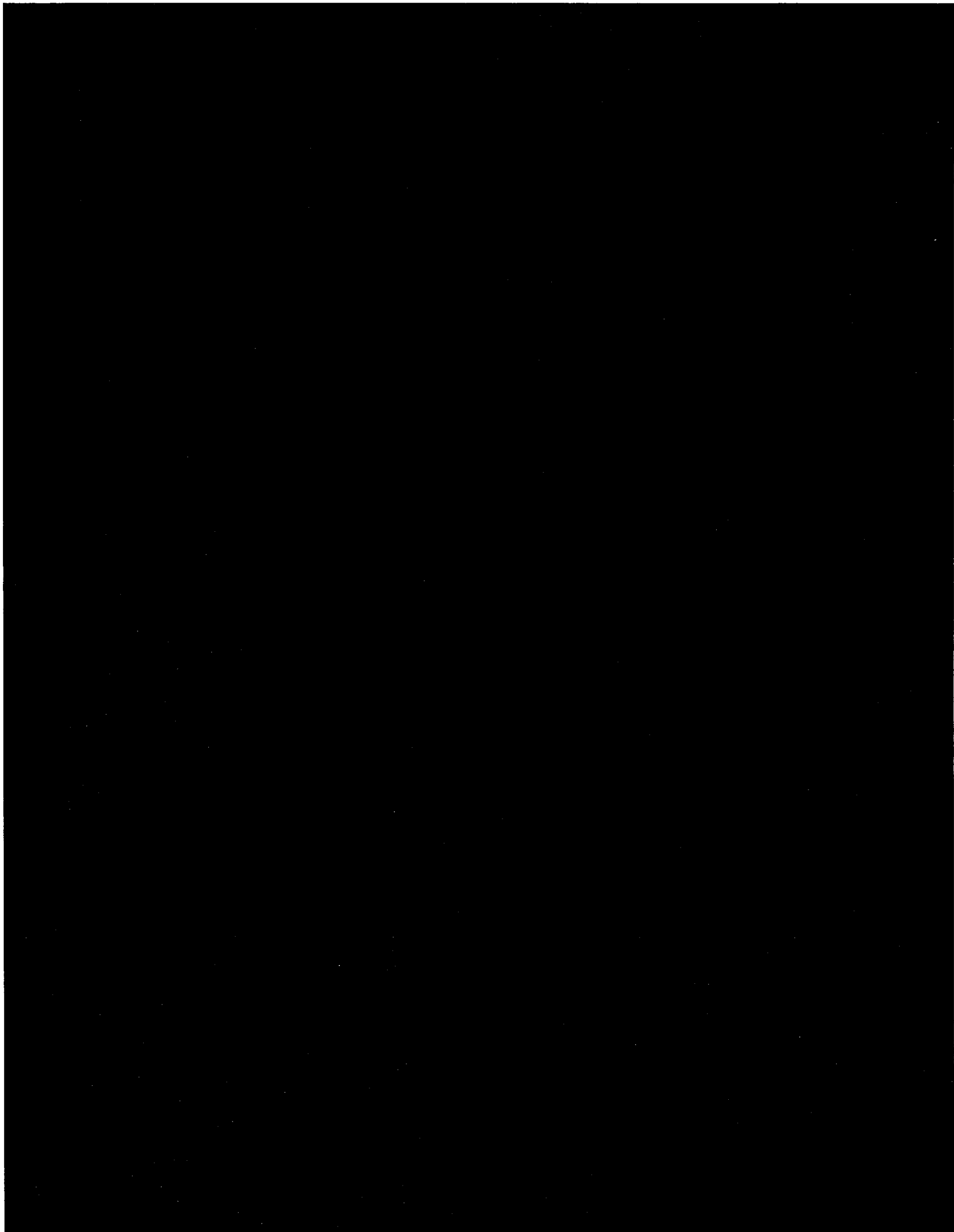
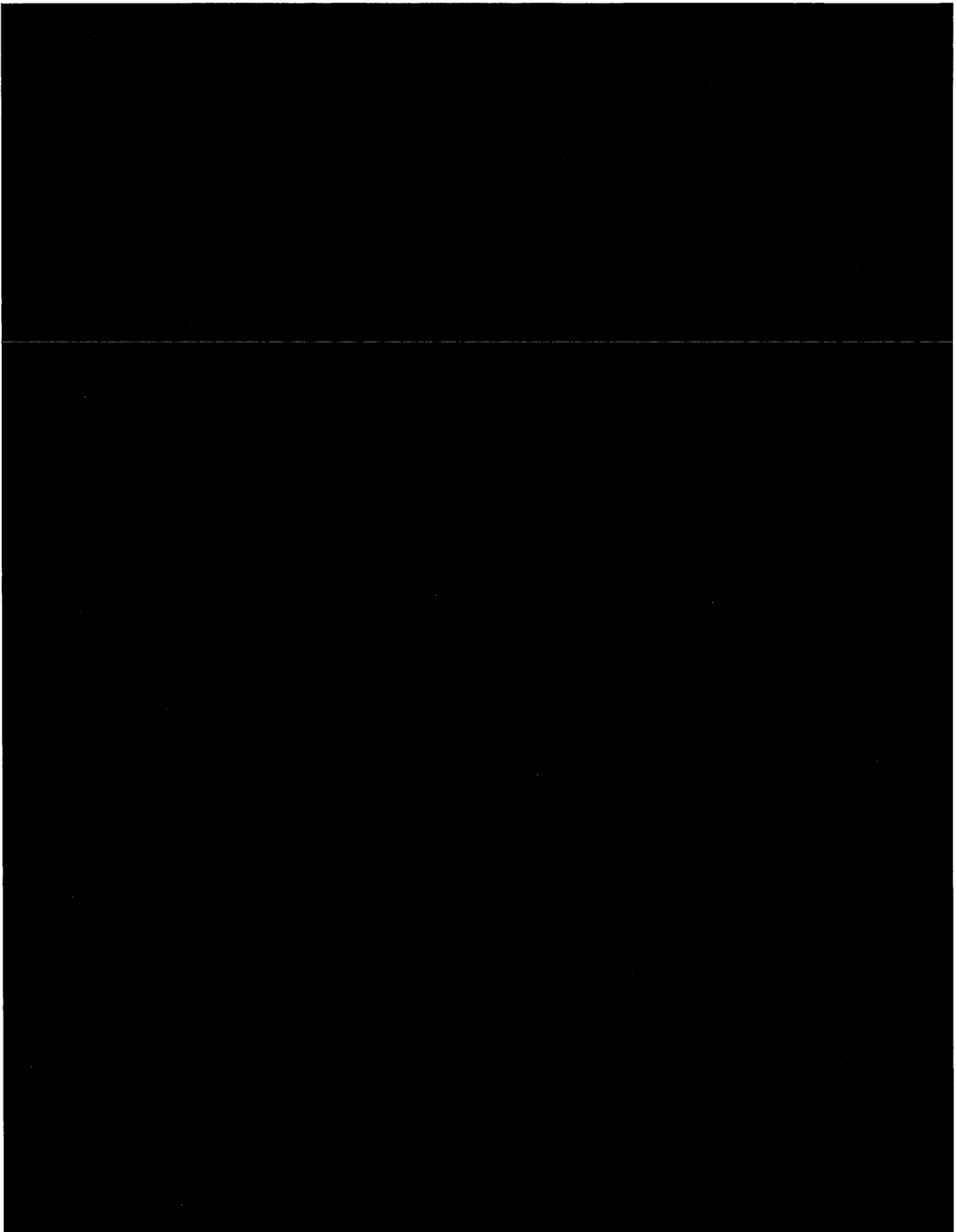


TABLE 1







the 1990s, the number of people with a mental health problem has increased by 50% (Mental Health Foundation 1999).

There is a growing awareness of the need to address the needs of people with mental health problems in the community. The Department of Health (1999) has set out a vision for the future of mental health services, which includes a focus on preventing mental health problems, supporting people with mental health problems in the community, and providing specialist services for people with severe mental health problems.

The Department of Health (1999) has also set out a number of key principles for the future of mental health services, which include: a focus on prevention, a focus on supporting people with mental health problems in the community, and a focus on providing specialist services for people with severe mental health problems.

The Department of Health (1999) has also set out a number of key objectives for the future of mental health services, which include: to reduce the incidence of mental health problems, to improve the quality of life for people with mental health problems, and to ensure that people with mental health problems have access to the services they need.

The Department of Health (1999) has also set out a number of key strategies for the future of mental health services, which include: to develop a range of services that meet the needs of people with mental health problems, to ensure that services are accessible to all people with mental health problems, and to ensure that services are of high quality.

The Department of Health (1999) has also set out a number of key measures for the future of mental health services, which include: to develop a range of services that meet the needs of people with mental health problems, to ensure that services are accessible to all people with mental health problems, and to ensure that services are of high quality.

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the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There is a growing awareness of the need to improve the nutritional status of the world's population. The United Nations World Food Programme (WFP) has been instrumental in the development of the *World Food Summit Declaration* (WFP 1996) and the *World Declaration on Nutrition* (WHO 1992). The *World Food Summit Declaration* states that 'the world must ensure that all people have access to sufficient, safe, nutritious food to meet their basic needs'.

The *World Declaration on Nutrition* states that 'adequate nutrition is essential for the health and well-being of all people'.

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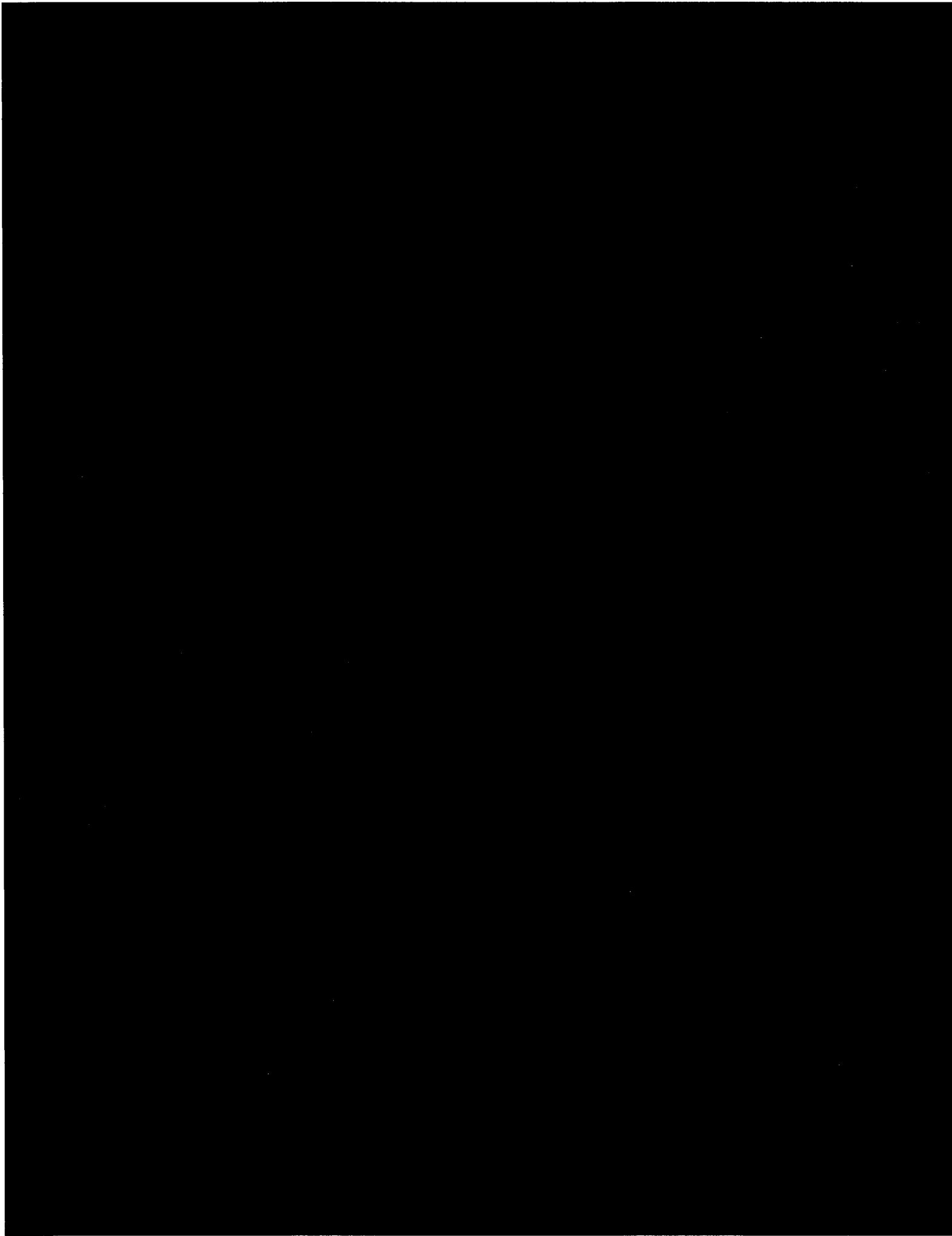
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1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text outlines various methods for organizing and storing data, including digital databases and physical filing systems.

2. The second section focuses on the role of technology in modern record management. It highlights how digital tools can streamline processes, reduce errors, and facilitate quick retrieval of information. Examples of software solutions and cloud storage options are provided, along with considerations for data security and privacy.

3. The third part of the document addresses the challenges of managing large volumes of data over time. It discusses strategies for archiving old records and ensuring their long-term accessibility. The importance of regular audits and updates to the record-keeping system is also stressed.

4. Finally, the document concludes with a summary of key principles for effective record management. It reiterates the need for consistency, accuracy, and security throughout the entire process. The text encourages organizations to adopt a proactive approach to record-keeping to avoid potential legal and operational issues.



the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1.2 million (Office for National Statistics 1999).

There is a growing awareness of the need to develop services to meet the needs of older people, and the need to ensure that the health care system is able to respond to the needs of older people in a timely and appropriate manner (Department of Health 1999).

The purpose of this paper is to review the literature on the needs of older people, and to discuss the implications for the development of services to meet the needs of older people. The paper is organized as follows: first, a review of the literature on the needs of older people; second, a discussion of the implications for the development of services to meet the needs of older people; and third, a conclusion.

2. Needs of older people

The needs of older people are complex and multifaceted, and can be influenced by a number of factors, including age, gender, social class, and ethnicity. The needs of older people can be categorized into physical, psychological, and social needs. Physical needs include the need for medical care, nursing care, and social care. Psychological needs include the need for emotional support, information, and advice. Social needs include the need for companionship, social contact, and participation in social activities.

The needs of older people are often unmet, and this can lead to a number of problems, including isolation, loneliness, and depression. The needs of older people are often unmet because of a number of factors, including a lack of resources, a lack of information, and a lack of awareness of the needs of older people.

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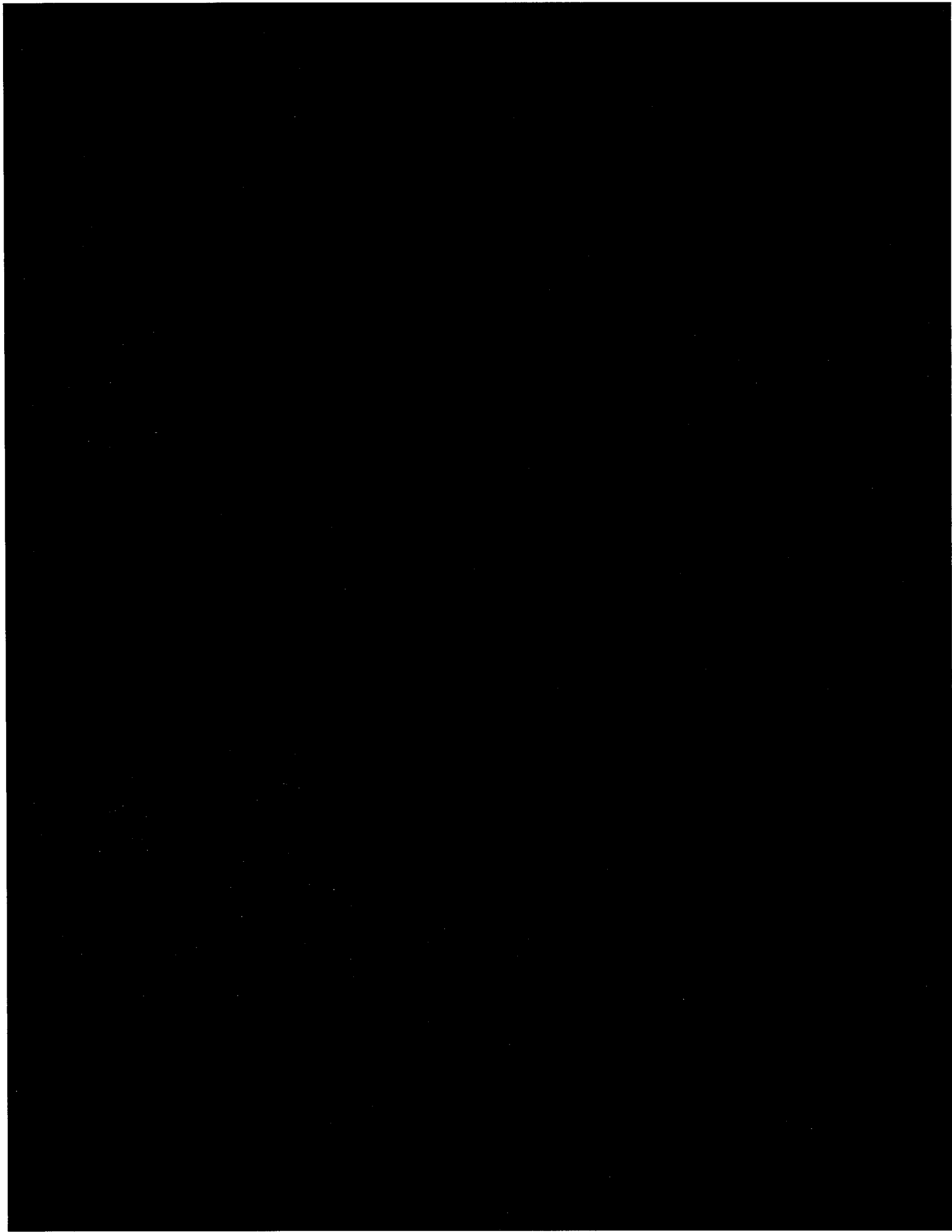
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the 1990s, the number of people in the world who are undernourished has increased from 600 million to 800 million (FAO 1996).

There are a number of reasons for this increase. First, the world population has increased from 5 billion in 1987 to 6 billion in 1996, and is projected to reach 7 billion by 2015 (FAO 1996). Second, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996).

Third, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996). Fourth, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996). Fifth, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996).

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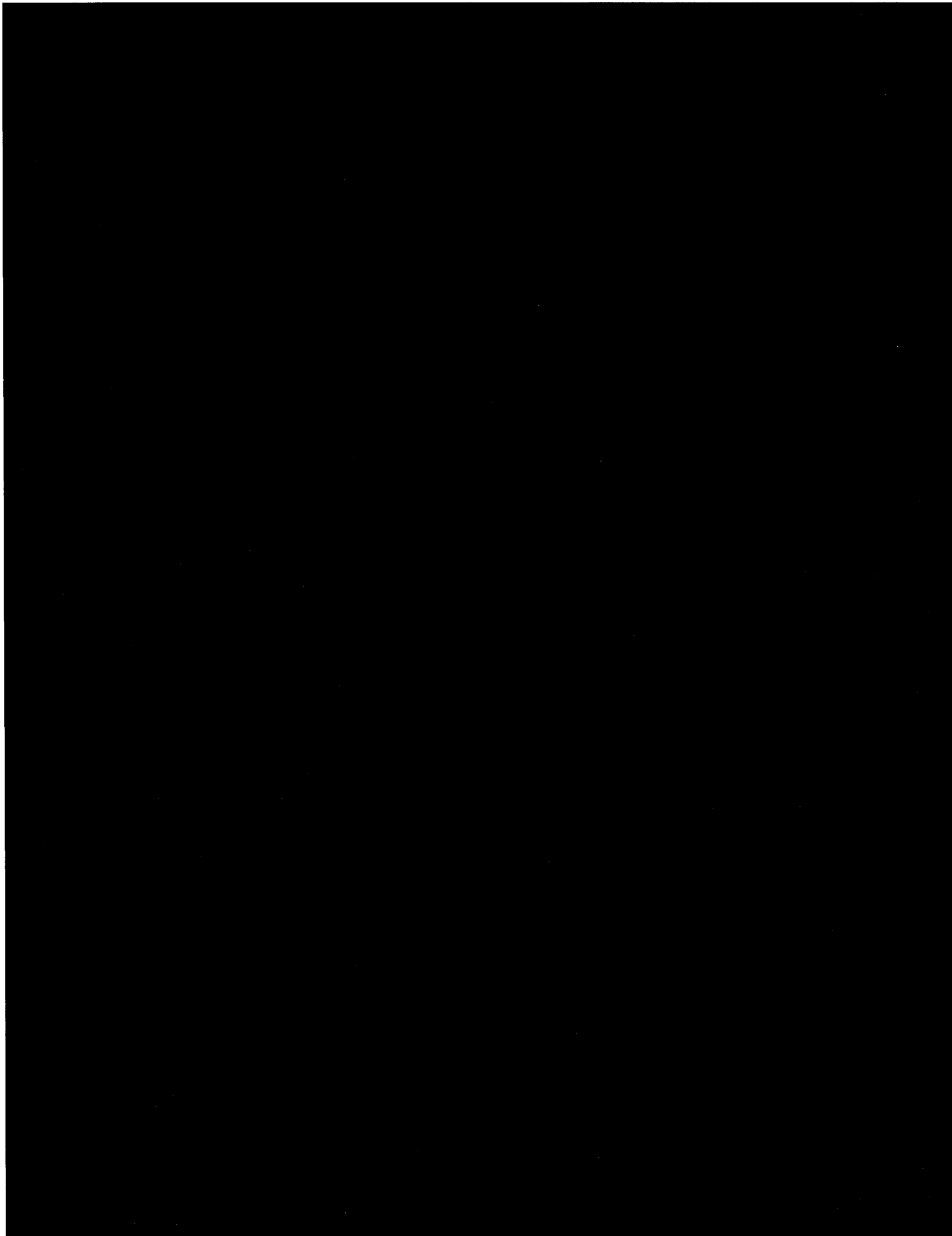
Eighteenth, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996). Nineteenth, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996). Twentieth, the number of people who are undernourished has increased from 1.2 billion in 1987 to 1.6 billion in 1996 (FAO 1996).

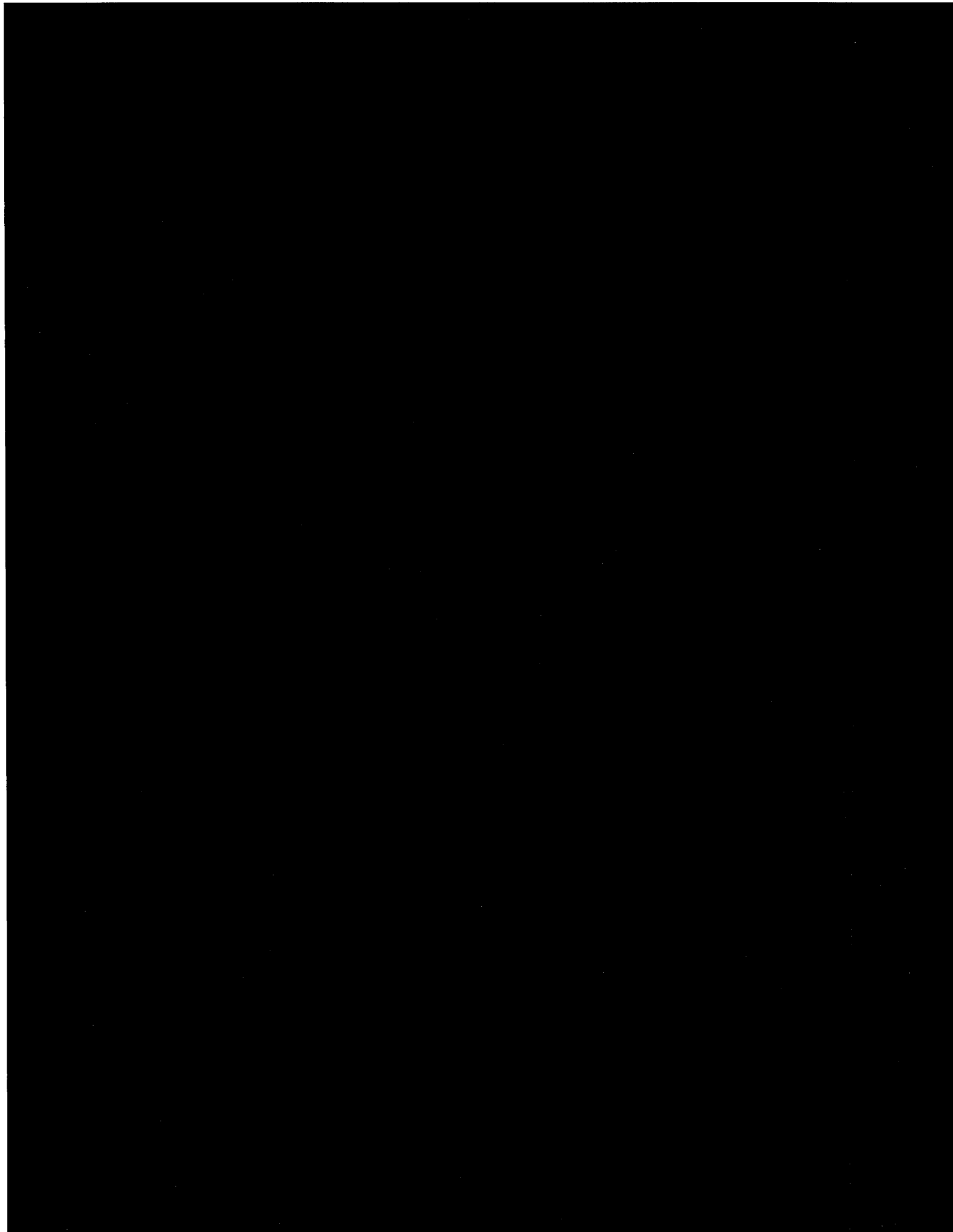
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the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 12.5 million, and the number of people aged 75 and over has increased from 4.5 million to 6.5 million (Office of National Statistics 2000). The number of people aged 65 and over is projected to increase to 15.5 million by 2020, and the number of people aged 75 and over to 8.5 million (Office of National Statistics 2000).

There is a growing awareness of the need to develop strategies to meet the needs of older people, and to ensure that they are able to live independently for as long as possible. This has led to a number of initiatives, including the development of age-friendly communities, and the establishment of age-friendly networks. These initiatives aim to create environments that are safe, accessible, and supportive for older people, and to provide them with the resources and services they need to live independently.

One of the key challenges in developing age-friendly communities is to ensure that the needs of older people are taken into account in all aspects of community planning and development. This includes the design of public spaces, the provision of transport and housing, and the development of social and health services. It is essential that older people are consulted and involved in the planning process, and that their views are taken into account in the development of community plans.

Another key challenge is to ensure that older people have access to the resources and services they need to live independently. This includes access to housing, transport, and social and health services. It is essential that these services are designed to be accessible and usable by older people, and that they are provided in a way that is respectful of their dignity and autonomy.

Finally, it is essential to ensure that older people are able to participate in the life of their communities. This includes the opportunity to engage in social and recreational activities, and to contribute to the development of their communities. It is essential that older people are encouraged and supported to participate in these activities, and that their contributions are valued and recognized.

In conclusion, the development of age-friendly communities is a complex and ongoing process. It requires the involvement of older people, and the development of strategies that take into account their needs and interests. It is essential that we continue to work towards creating environments that are safe, accessible, and supportive for older people, and that provide them with the resources and services they need to live independently.

References Office of National Statistics (2000) *Population Statistics*. London: HMSO.

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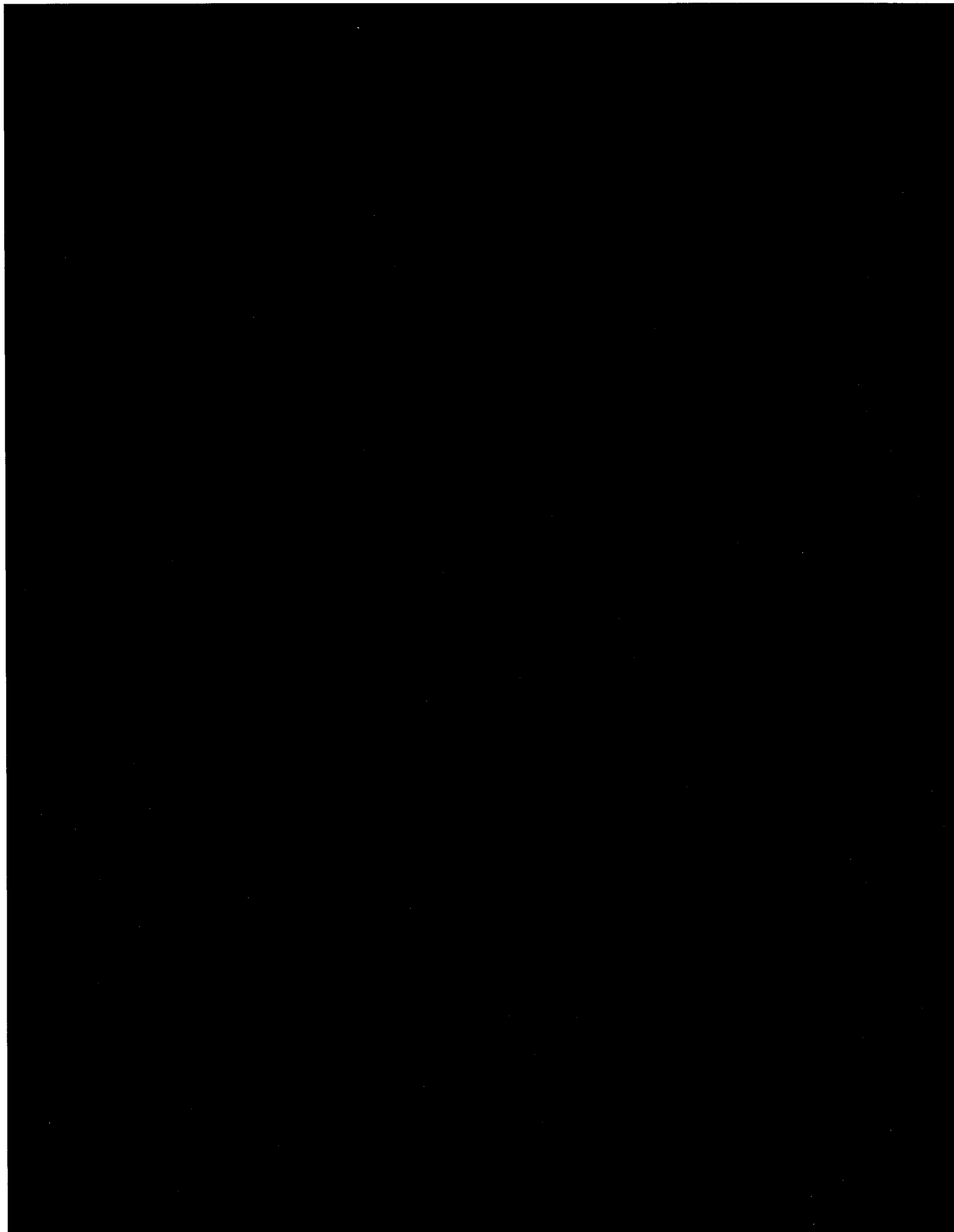
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the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1 million (Office for National Statistics 1999).

There is a growing awareness of the need to address the needs of older people, and the importance of the role of the family in supporting older people. The Department of Health (1999) has published a strategy for older people, which sets out the government's commitment to older people and the need to support them in their homes.

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- Older people should be able to live in their own homes for as long as possible.
- Older people should be able to live independently and be able to take part in the community.
- Older people should be able to live in a safe and secure environment.

The strategy also sets out the government's commitment to support older people in their homes. The government will continue to invest in services that support older people in their homes, such as home care, day care, and residential care.

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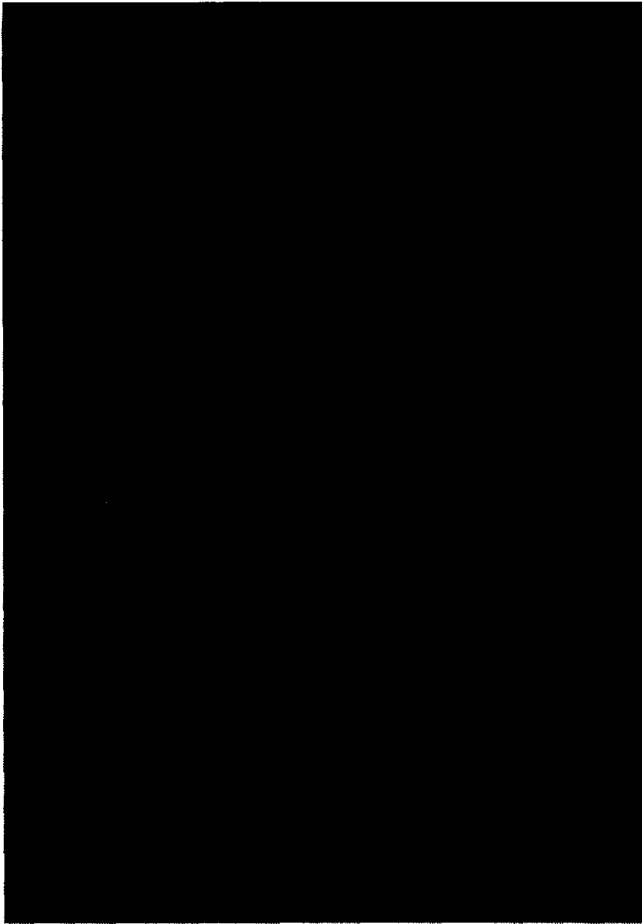
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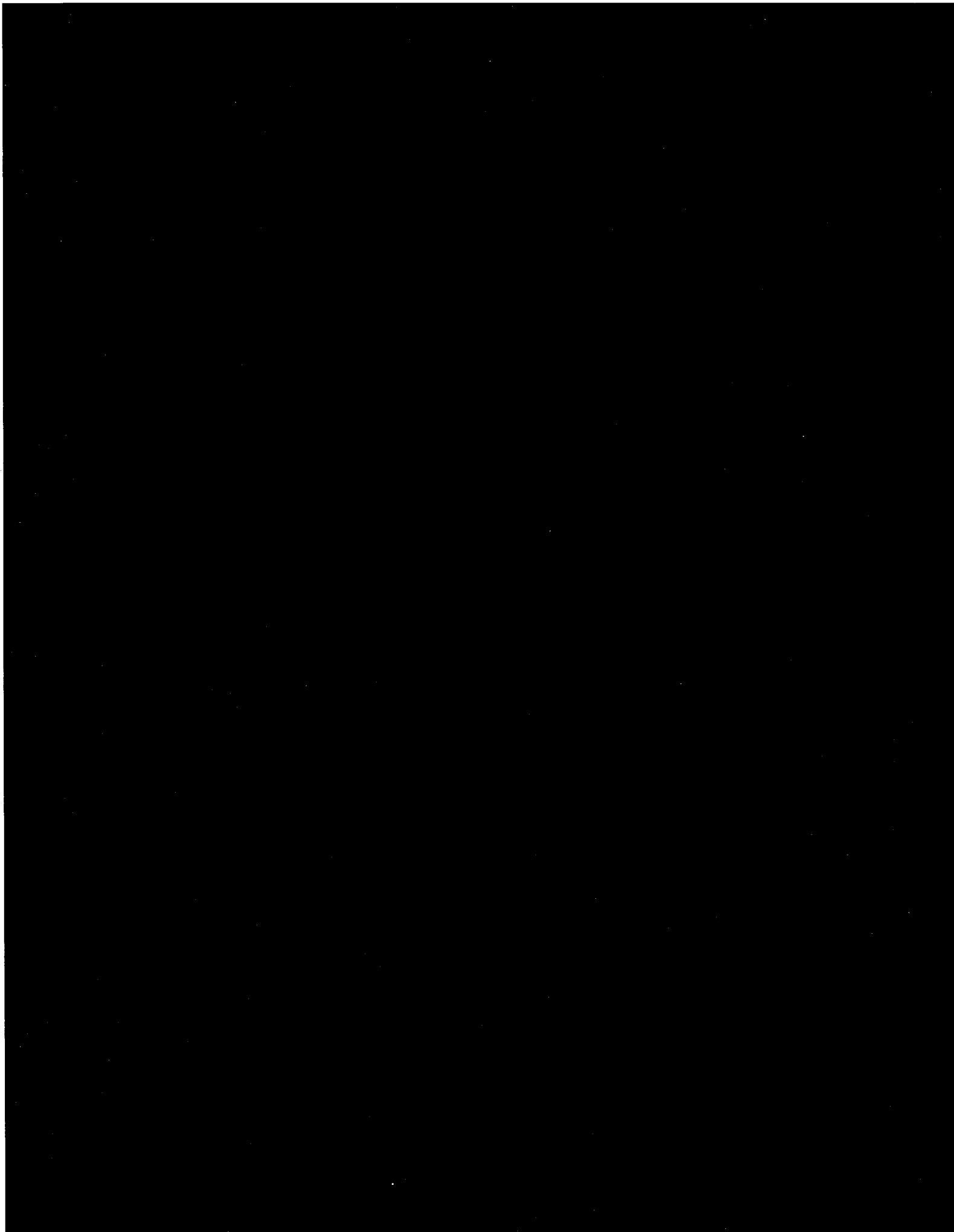
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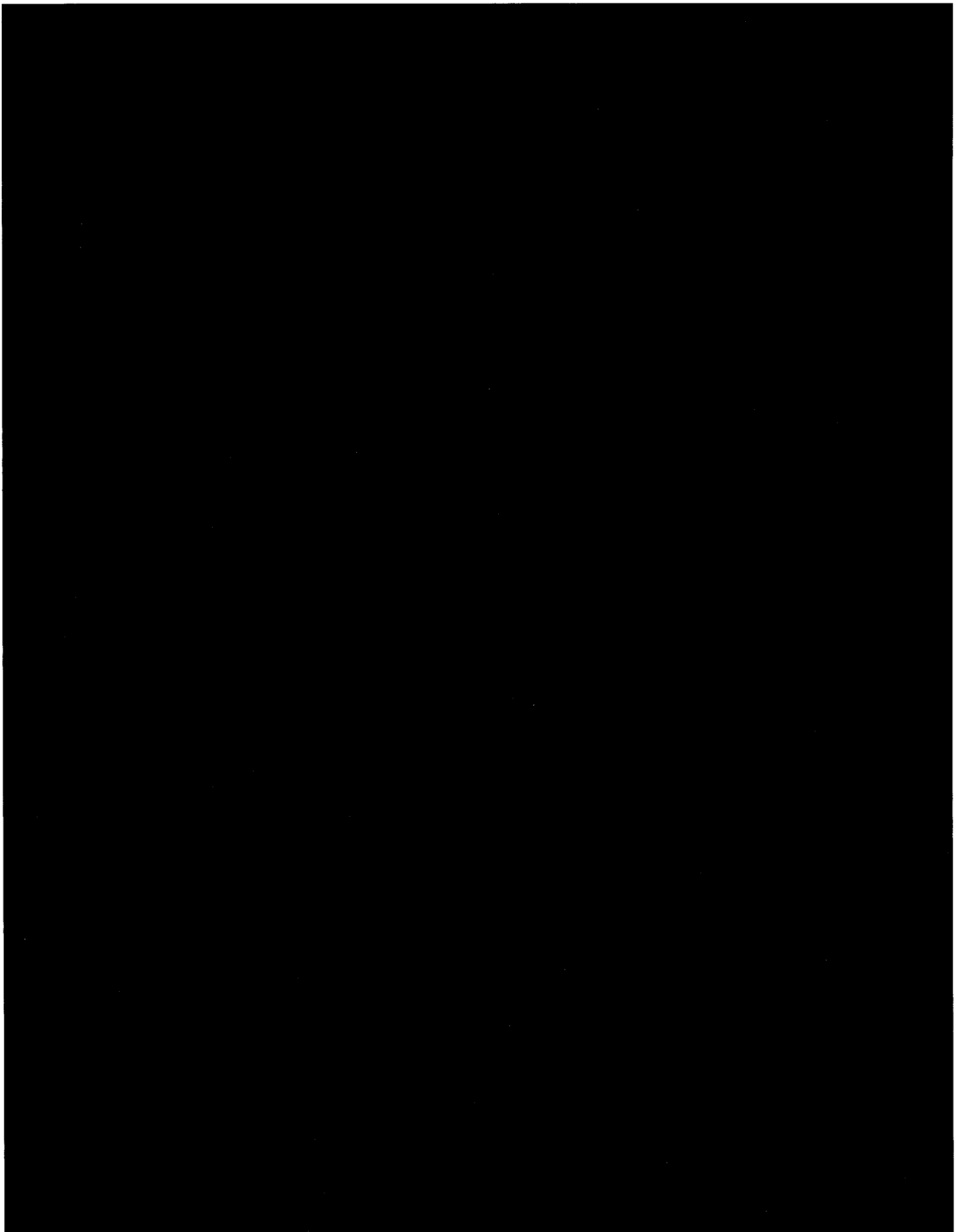
[Redacted]

Print name: Justin Britt
Its CEO

PERSONAL GUARANTOR

Print name: _____





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Business Registration Division
DEPT. OF COMMERCE AND
CONSUMER AFFAIRS
State of Hawaii



STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
Business Registration Division
335 Merchant Street
Mailing Address: P.O. Box 40, Honolulu, Hawaii 96810
Phone No. (808) 586-2727

ARTICLES OF INCORPORATION
(Section 414-32, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

The undersigned, for the purpose of forming a corporation under the laws of the State of Hawaii, do hereby make and execute these Articles of Incorporation:

I

The name of the corporation shall be :
GREEN ALOHA LTD.

(The name must contain the word Corporation, Incorporated, or Limited or the abbreviation Corp., Inc., or Ltd.)

II

The mailing address of the corporation's initial principal office is:



III

The corporation shall have and continuously maintain in the State of Hawaii a registered agent who shall have a business address in this State. The agent may be an individual who resides in this State, a domestic entity or a foreign entity authorized to transact business in this State.

- a. The name (and state or country of incorporation, formation or organization, if applicable) of the corporation's registered agent in the State of Hawaii is:
JUSTIN BRITT

(Name of Registered Agent)

(State or Country)

- b. The street address of the place of business of the person in State of Hawaii to which service of process and other notice and documents being served on or sent to the entity represented by it may be delivered to is:



IV

The number of common shares all of the same class which the corporation shall have authority to issue is:



I HEREBY CERTIFY that this is a true and correct copy of the official record(s) of the Business Registration Division.



Richard A. Oshida
DIRECTOR OF COMMERCE
AND CONSUMER AFFAIRS

December 21, 2015

Validate online at <http://hbe.ehawaii.gov/documents>
Document ID: 1AU-7AK-8GQ-5GG-13245789

04/09/201556613

V

The name and address of each incorporator is:

Name

JUSTIN BRITT

Address

I certify that I have read the above statements, I am authorized to sign this Articles of Incorporation, and that the above statements are true and correct to the best of my knowledge and belief.

09

APRIL 2015

Signed this _____ day of _____

JUSTIN BRITT

(Type/Print Name of Incorporator)

(Type/Print Name of Incorporator)

JUSTIN BRITT

(Signature of Incorporator)

(Signature of Incorporator)

04/09/201556613

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS



THE DIRECTOR'S OFFICIAL CERTIFICATION
APPEARS ON THE BACK OF THE FIRST PAGE OF THE
ATTACHED DOCUMENT.

www.BUSINESSREGISTRATIONS.COM

FORM DC-5
7/2008

FILED 01/21/2016 10:20 AM
Business Registration Division
DEPT. OF COMMERCE AND
CONSUMER AFFAIRS
State of Hawaii

STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
Business Registration Division
335 Merchant Street
Mailing Address: P.O. Box 40, Honolulu, Hawaii 96810
Phone No. (808) 586-2727



AMENDED AND RESTATED ARTICLES OF INCORPORATION

(Section 414-287, Hawaii Revised Statutes)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

The undersigned, duly authorized officers of the corporation submitting these Amended and Restated Articles of Incorporation, certifies as follows:

1. The name of the corporation is

GREEN ALOHA LTD.

2. The Amended and Restated Articles of Incorporation adopted is attached

3. The total number of shares outstanding is

4. The Amended and Restated Articles of Incorporation was adopted (check one):

☐ at a meeting of the shareholders held on _____
(Month) Day Year

Class/Series	Total Number of Votes Entitled to be Cast	Number of Votes Cast For Amendment	Number of Votes Cast Against Amendment

OR

☒ by written consent dated January 14 2016 which all of the shareholders signed.
(Month) Day Year

5. If the amendment(s) provides for an exchange, reclassification, or cancellation of issued shares, provisions necessary to effect the exchange, reclassification, or cancellation, if any, have been made.
6. The attached Amended and Restated Articles of Incorporation supersedes the original Articles of Incorporation and all amendments thereto.

The undersigned certifies under the penalties of Section 414-20, Hawaii Revised Statutes, that the undersigned has read the above statements, I/we are authorized to make this change, and that the statements are true and correct

Signed this 14 day of January 2016

Justin Britt, President

(Type Print Name & Title)

SEE INSTRUCTIONS ON REVERSE SIDE. The articles must be signed by at least one officer of the corporation

I HEREBY CERTIFY that this is a true and correct copy of the official record(s) of the Business Registration Division.



Barbara P. Awak-Cole

DIRECTOR OF COMMERCE AND
CONSUMER AFFAIRS

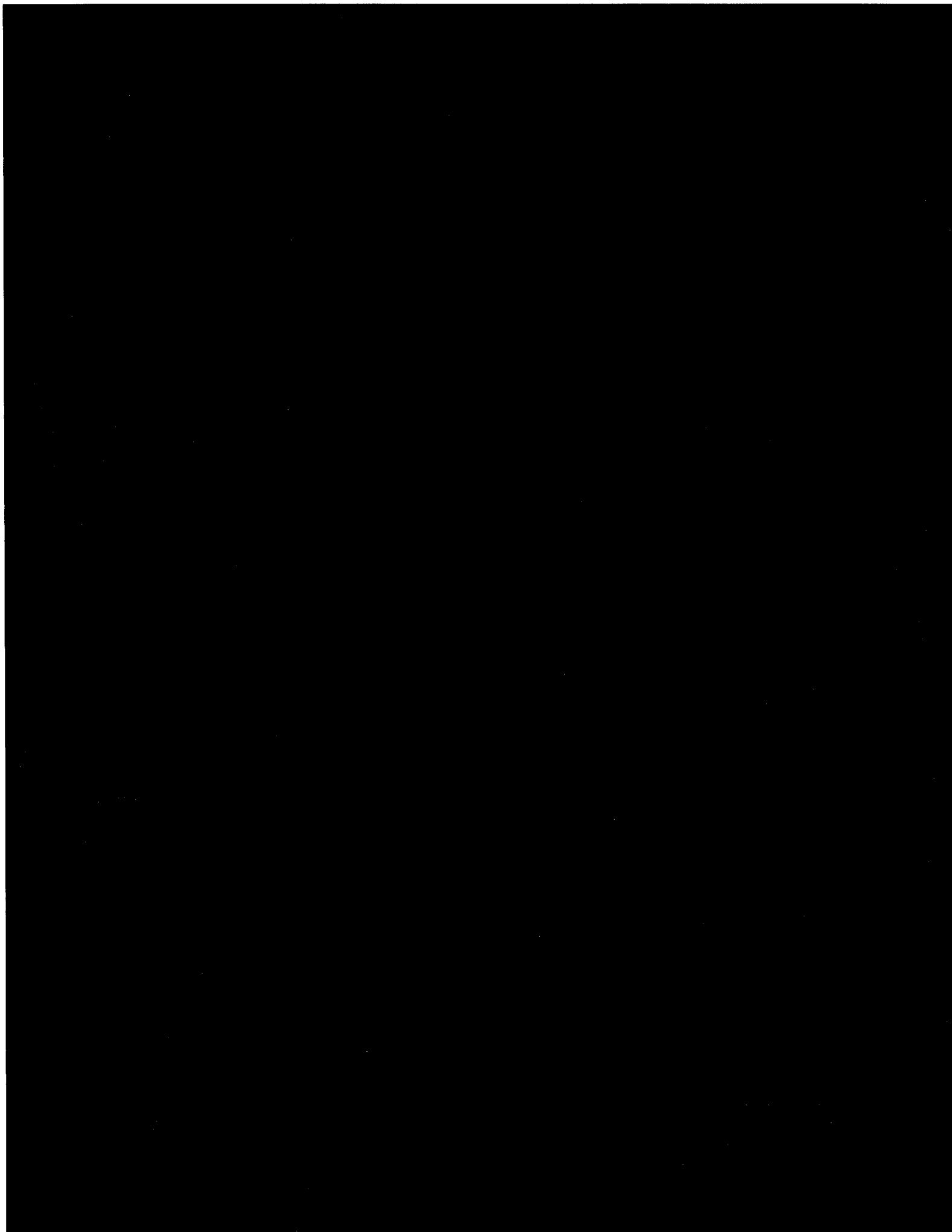
Date: January 27, 2016

AMENDED AND RESTATED ARTICLES OF INCORPORATION

OF

GREEN ALOHA LTD.





1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting system in providing reliable financial information. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various methods used to collect and analyze data, including surveys, interviews, and focus groups. It discusses the strengths and limitations of each method and provides guidance on how to choose the most appropriate method for a given study.

3. The third part of the document describes the process of data analysis, including the use of statistical software and the interpretation of results. It discusses the importance of using appropriate statistical tests and the need to consider the context of the data when interpreting the results.

4. The fourth part of the document discusses the importance of communicating the results of the study to the relevant stakeholders. It emphasizes the need for clear and concise communication and the use of appropriate visual aids to enhance the presentation of the data.

5. The fifth part of the document discusses the importance of ethical considerations in research. It outlines the various ethical issues that may arise in the course of a study and provides guidance on how to address these issues in a responsible and transparent manner.

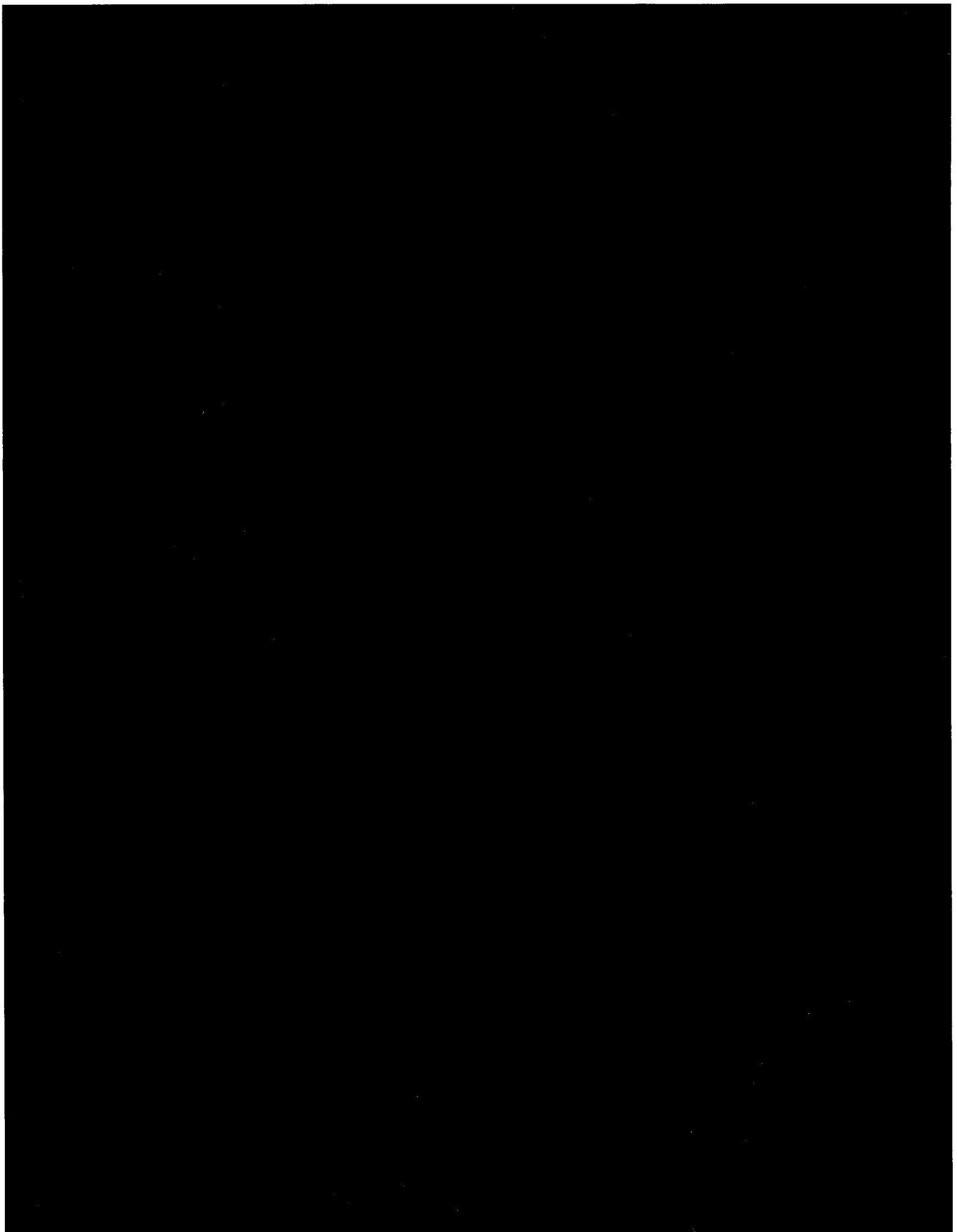
6. The sixth part of the document discusses the importance of ongoing evaluation and monitoring of the research process. It emphasizes the need for regular communication and feedback from the stakeholders and the use of appropriate tools and techniques to monitor the progress of the study.

7. The seventh part of the document discusses the importance of documentation and record-keeping. It outlines the various types of records that should be maintained and provides guidance on how to organize and store these records in a secure and accessible manner.

8. The eighth part of the document discusses the importance of collaboration and teamwork in research. It emphasizes the need for clear roles and responsibilities and the use of appropriate communication and collaboration tools to enhance the effectiveness of the research team.

9. The ninth part of the document discusses the importance of staying up-to-date with the latest research and developments in the field. It outlines the various sources of information that can be used to stay current and provides guidance on how to evaluate the quality of the information.

10. The tenth part of the document discusses the importance of maintaining a professional and ethical standard in research. It outlines the various standards and guidelines that should be followed and provides guidance on how to ensure that the research is conducted in a responsible and transparent manner.



1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes that proper record-keeping is essential for transparency and accountability, particularly in financial matters. The text outlines various methods for organizing and storing data, including digital databases and physical filing systems. It also mentions the need for regular audits and reviews to ensure the integrity of the information.

2. The second part of the document focuses on the role of communication in achieving organizational goals. It highlights the importance of clear and concise communication, both internally and externally. The text provides guidelines for effective communication, such as using appropriate language, listening actively, and providing feedback. It also discusses the benefits of open communication and how it can foster a collaborative work environment.

3. The third part of the document addresses the challenges of managing resources and personnel. It discusses the importance of efficient resource allocation and the need for a skilled and motivated workforce. The text provides strategies for managing personnel, including recruitment, training, and performance management. It also mentions the importance of maintaining a positive work culture and providing opportunities for professional development.

4. The fourth part of the document discusses the importance of innovation and creativity in driving organizational growth. It emphasizes that innovation is a key factor in staying competitive in a rapidly changing market. The text provides guidelines for fostering innovation, such as encouraging risk-taking, promoting collaboration, and providing resources for research and development. It also mentions the importance of protecting intellectual property and the role of patents in innovation.

5. The fifth part of the document discusses the importance of sustainability and social responsibility. It emphasizes that organizations have a responsibility to their stakeholders and the environment. The text provides guidelines for sustainable practices, such as reducing waste, conserving energy, and supporting social causes. It also mentions the importance of reporting on sustainability performance and the role of external audits.

6. The sixth part of the document discusses the importance of legal and ethical considerations. It emphasizes that organizations must operate within the law and adhere to ethical principles. The text provides guidelines for legal compliance, such as understanding relevant laws and regulations, and the role of legal counsel. It also discusses the importance of ethical decision-making and the role of a code of ethics.

7. The seventh part of the document discusses the importance of technology and digital transformation. It emphasizes that technology is a key driver of organizational success in the modern era. The text provides guidelines for digital transformation, such as investing in IT infrastructure, adopting new technologies, and training employees in digital skills. It also mentions the importance of data security and privacy.

8. The eighth part of the document discusses the importance of internationalization and global expansion. It emphasizes that organizations must be prepared to operate in a global market. The text provides guidelines for internationalization, such as understanding cultural differences, navigating legal and regulatory requirements, and building a global network. It also mentions the importance of localizing products and services for different markets.

9. The ninth part of the document discusses the importance of crisis management and risk mitigation. It emphasizes that organizations must be prepared to handle unexpected events and crises. The text provides guidelines for crisis management, such as developing a crisis plan, identifying potential risks, and having a communication strategy in place. It also mentions the importance of regular risk assessments and the role of insurance.

10. The tenth part of the document discusses the importance of continuous improvement and learning. It emphasizes that organizations must constantly learn from their experiences and make improvements. The text provides guidelines for continuous improvement, such as implementing a quality management system, conducting regular reviews, and encouraging employee feedback. It also mentions the importance of staying up-to-date with industry trends and best practices.

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The first of these is the fact that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The second is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The third is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The fourth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The fifth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The sixth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The seventh is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The eighth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The ninth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable. The tenth is that the system is not a simple one. It is a complex system, and the behavior of the system is not predictable.

the 1990s, the number of people in the world who are undernourished has increased from 250 million to 800 million (FAO 1996).

There is a growing awareness of the need to improve the nutritional status of the world's population. The United Nations World Food Programme (WFP) has been instrumental in the development of the *World Food Summit Declaration* (WFP 1996) and the *World Food Summit Plan of Action* (WFP 1996).

The *World Food Summit Declaration* states that 'the world's population is growing rapidly and the demand for food is increasing. It is essential that we ensure that everyone has access to sufficient food and that the food is of good quality and nutritious'.

The *World Food Summit Plan of Action* states that 'the world's population is growing rapidly and the demand for food is increasing. It is essential that we ensure that everyone has access to sufficient food and that the food is of good quality and nutritious'.

The *World Food Summit Declaration* and the *World Food Summit Plan of Action* are the first international agreements to address the issue of food security and nutrition.

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1. The first part of the document discusses the importance of maintaining accurate records of all transactions and the role of the accounting system in providing reliable financial information. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various methods used to collect and analyze financial data, including the use of statistical techniques and the application of mathematical models. It highlights the importance of using appropriate methods to ensure the accuracy and reliability of the results.

3. The third part of the document discusses the challenges faced by organizations in managing their financial resources and the role of the accounting system in addressing these challenges. It emphasizes the need for effective financial management and the importance of using the accounting system to monitor and control financial performance.

4. The fourth part of the document discusses the role of the accounting system in providing financial information to management and the importance of using this information to make informed decisions. It emphasizes the need for accurate and timely financial information and the role of the accounting system in providing this information.

5. The fifth part of the document discusses the role of the accounting system in providing financial information to external stakeholders and the importance of using this information to build trust and confidence. It emphasizes the need for transparency and accountability in financial reporting and the role of the accounting system in providing this information.

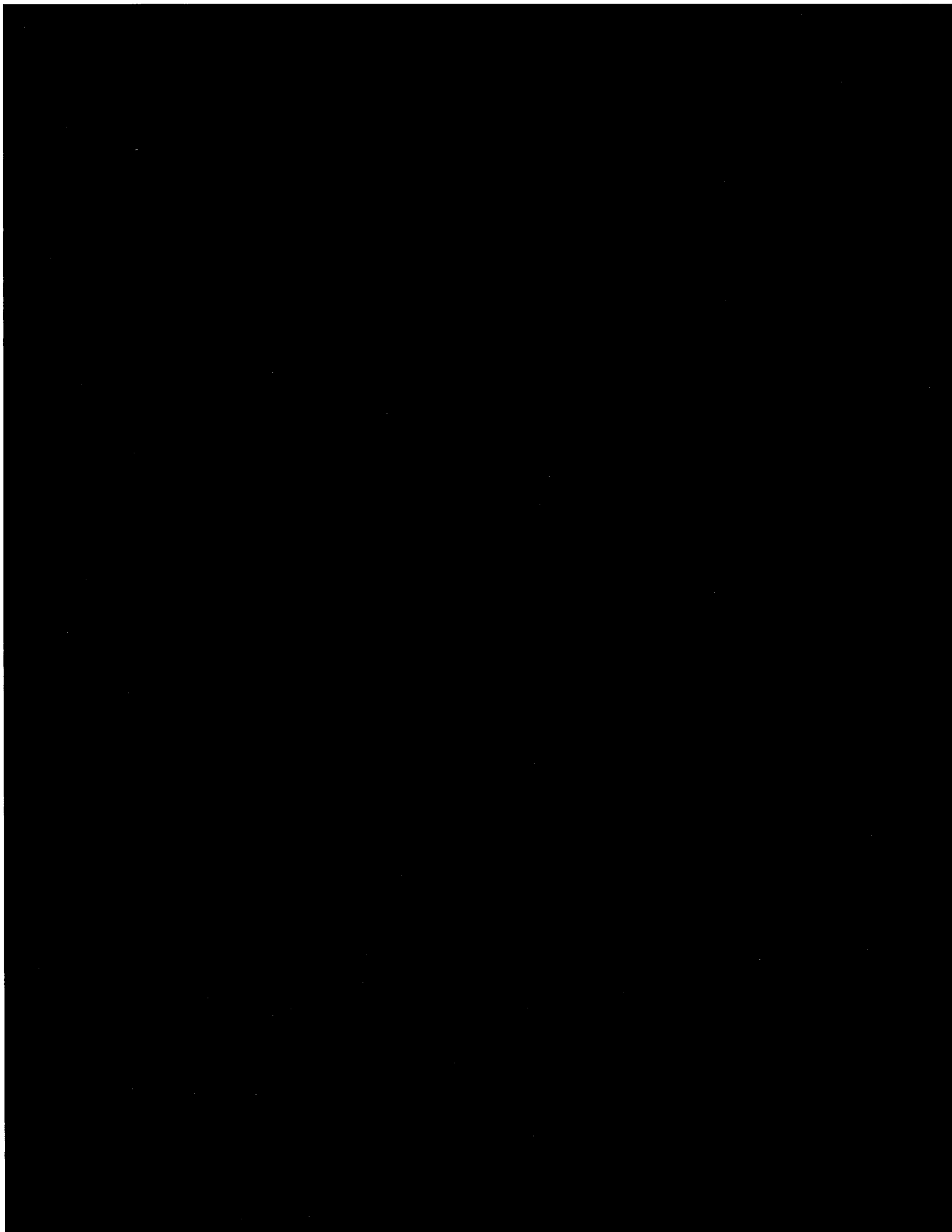
6. The sixth part of the document discusses the role of the accounting system in providing financial information to the public and the importance of using this information to make informed decisions. It emphasizes the need for accurate and timely financial information and the role of the accounting system in providing this information.

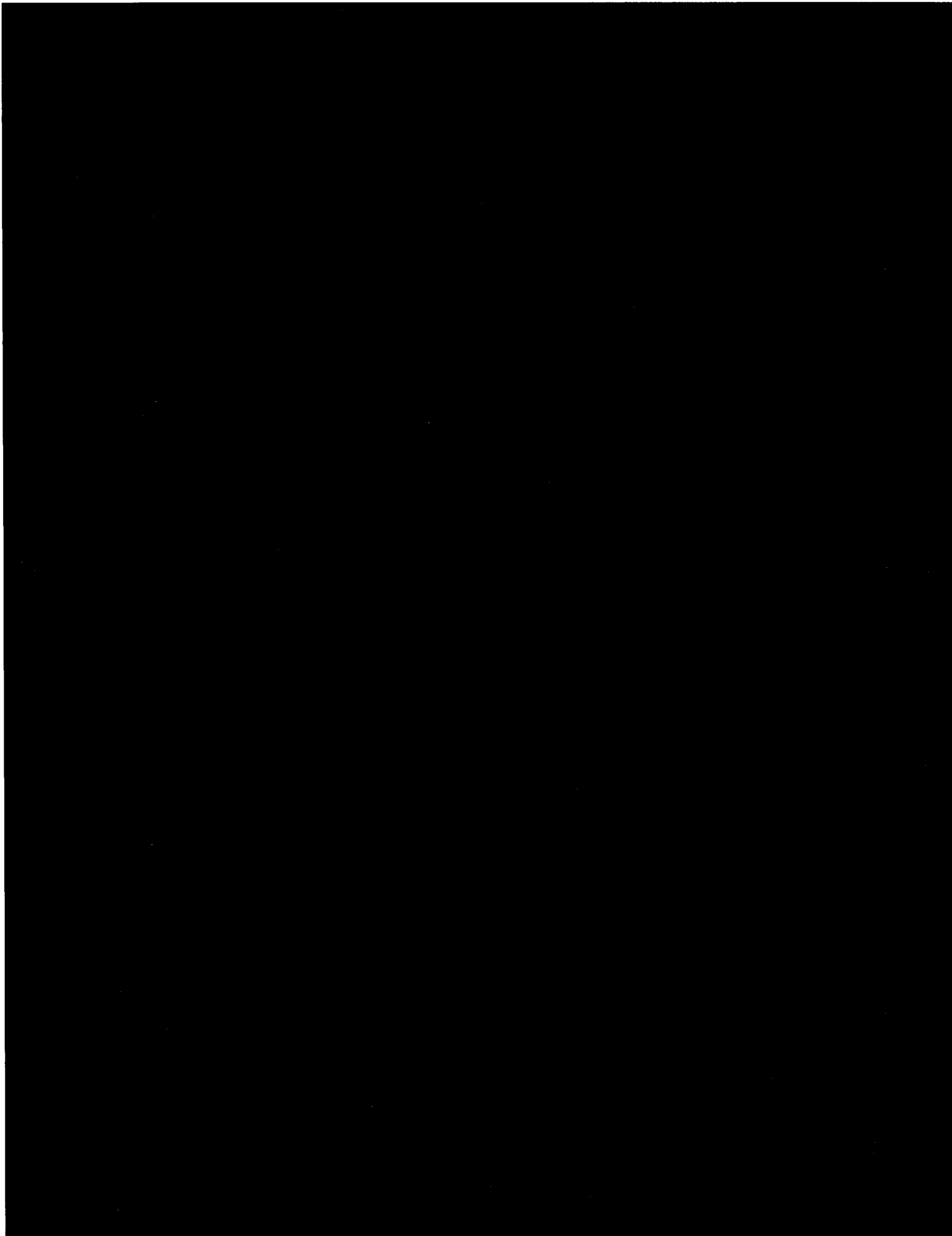
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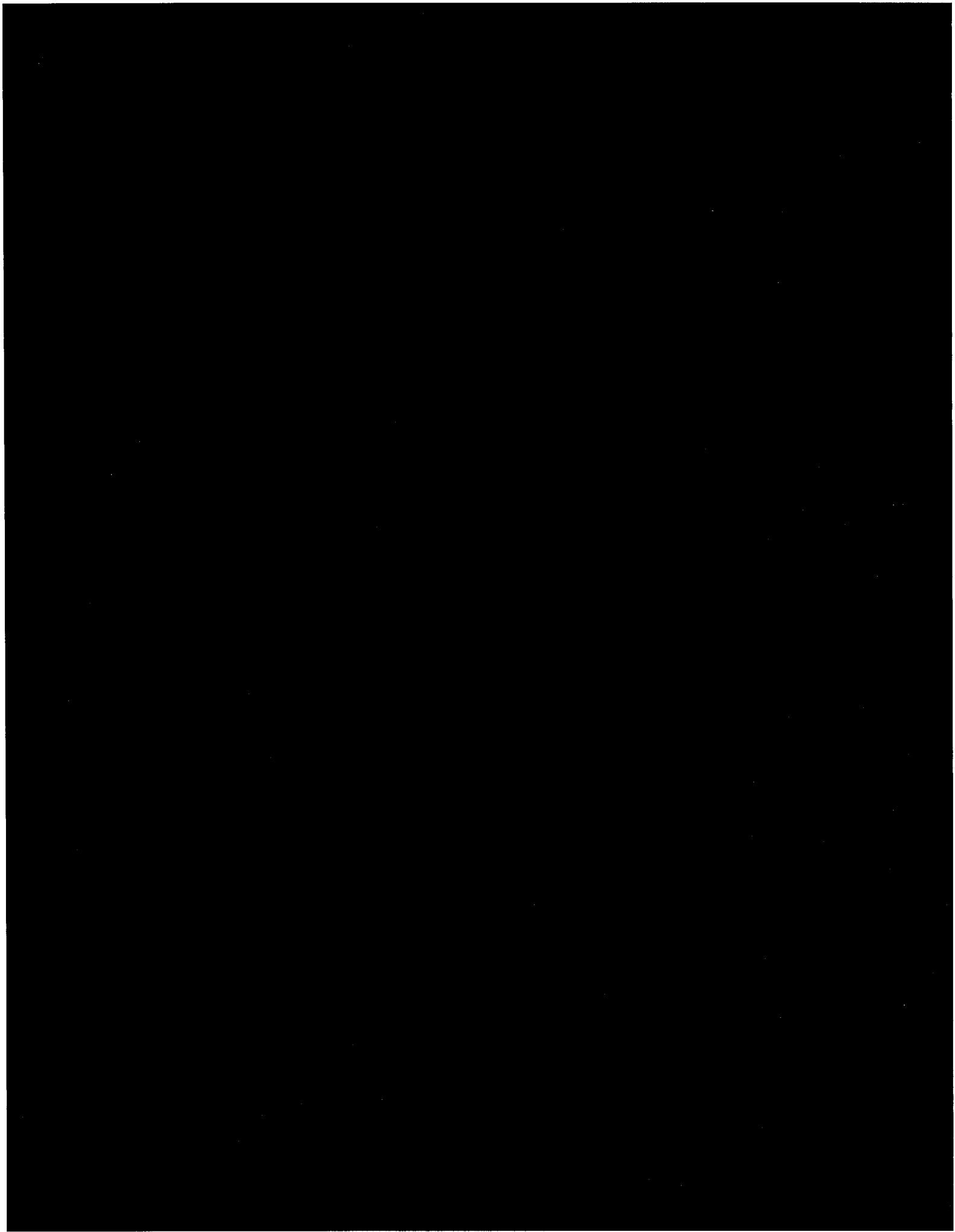
8. The eighth part of the document discusses the role of the accounting system in providing financial information to the media and the importance of using this information to make informed decisions. It emphasizes the need for accurate and timely financial information and the role of the accounting system in providing this information.

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10. The tenth part of the document discusses the role of the accounting system in providing financial information to the public and the importance of using this information to make informed decisions. It emphasizes the need for accurate and timely financial information and the role of the accounting system in providing this information.







the 1990s, the number of people in the UK who are aged 65 and over has increased by 1.5 million, and the number of people aged 75 and over has increased by 1 million (Office for National Statistics 1999). The number of people aged 65 and over is projected to increase to 6.5 million by 2011, and the number of people aged 75 and over to 3.5 million (Office for National Statistics 1999).

There is a growing awareness of the need to address the health care needs of the ageing population. The Department of Health (1999) has identified the need to develop a new approach to health care for the ageing population, and has set out a number of key principles for the development of a new approach. These principles are: to ensure that health care is tailored to the needs of the ageing population; to ensure that health care is delivered in a way that is accessible and acceptable to the ageing population; and to ensure that health care is delivered in a way that is cost-effective.

The Department of Health (1999) has also identified a number of key areas for action in order to develop a new approach to health care for the ageing population. These areas are: to improve the quality of health care for the ageing population; to improve the accessibility of health care for the ageing population; to improve the acceptability of health care for the ageing population; and to improve the cost-effectiveness of health care for the ageing population.

The Department of Health (1999) has also identified a number of key challenges in order to develop a new approach to health care for the ageing population. These challenges are: to ensure that health care is tailored to the needs of the ageing population; to ensure that health care is delivered in a way that is accessible and acceptable to the ageing population; and to ensure that health care is delivered in a way that is cost-effective.

The Department of Health (1999) has also identified a number of key opportunities in order to develop a new approach to health care for the ageing population. These opportunities are: to improve the quality of health care for the ageing population; to improve the accessibility of health care for the ageing population; to improve the acceptability of health care for the ageing population; and to improve the cost-effectiveness of health care for the ageing population.

The Department of Health (1999) has also identified a number of key priorities in order to develop a new approach to health care for the ageing population. These priorities are: to improve the quality of health care for the ageing population; to improve the accessibility of health care for the ageing population; to improve the acceptability of health care for the ageing population; and to improve the cost-effectiveness of health care for the ageing population.

The Department of Health (1999) has also identified a number of key actions in order to develop a new approach to health care for the ageing population. These actions are: to improve the quality of health care for the ageing population; to improve the accessibility of health care for the ageing population; to improve the acceptability of health care for the ageing population; and to improve the cost-effectiveness of health care for the ageing population.

The Department of Health (1999) has also identified a number of key outcomes in order to develop a new approach to health care for the ageing population. These outcomes are: to improve the quality of health care for the ageing population; to improve the accessibility of health care for the ageing population; to improve the acceptability of health care for the ageing population; and to improve the cost-effectiveness of health care for the ageing population.

