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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

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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 a 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 medic redirected to the statute and administrative rules.

Hawaii Revised Statute (HRS) 329D	✓ I acknowledge that I have read <u>Chapter 329D, HRS (http://health.hawaii.gov/m</u> 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 <u>HAR, Chapter 11-850 (http://health.hawaii.gov/icontent/blogs.dir/93/files/2015/12/Dispensary-Rules-Chapter-11-850-signed-by-requirements.</u>
Disclaimer:	✓ I understand that the use and possession of marijuana is illegal under federal law, a 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

### 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 loc statements or escrow accounts, and those financial resources shall have been under the control of the applying entity for not less than ninety days immedia
- \* 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 disqua

#### **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 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

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 when

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 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 only apply toward one license, if granted.

1. For which county are you requesting a license?	County of Maui
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 Daniel Roy Galczak Lankford

## 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 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. 7. Social Security No. or Identifier No. (last 4 digits only): 8. Applicant's Address United States 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. 13. Has the individual applicant ever been convicted of a crime? 13a. If YES, please describe (e.g., conviction, date, disposition, etc.) 14. Has the individual applicant ever been arrested? 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/) 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 Yes applicant. 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. 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): SECTION C: APPLYING ENTITY INFORMATION 20. Name of Applying Entity JCD Corporation 250 Ohua Ave PHB 21. Applying Entity's Business Address Honolulu, Hawaii 96815 **United States** 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. 26. Upload Applying Entity Incorporation or Business Status **Documentation:** Upload a certified copy of applying entity's incorporation documents in the State of Hawaii. Visit Hawaii Business Express (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). 250813 D1 Visit Hawaii Business Express - Business Name Search (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.	
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) for this information.	
30. Upload a copy of the entity's State of Hawaii Tax Identification document.	
31. Federal Employer Identification Number: Provide the Federal Employer Identification Number.	
32. Upload a copy of the entity's Federal Employer Identification Number document.	0
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:	3
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/) to obtain the	
eCrim report.  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.	
<u>Download Owner Principal Member Information Spreadsheet</u> (/mmjdisp/templates/Owner Principal Member Report.xls)	

35. Upload Proof of Name, Date of Birth, and Residency for each Officer, Principal, or Member listed on the spreadsheet

1) Proof of Legal Name of Each Owner, Principal, and Member:

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;
- \* Court-issued, certified copy of a divorce decree;
- \* Certified copy of a legal change of name order;

### 2) Proof of Date of Birth

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.

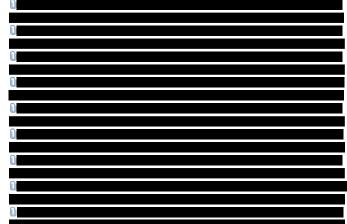
### 3) Proof of Hawaii Residency:

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.

Document size limit is 2 MB. Up to 10 documents may be attached.

SECTION D: FINANCIAL INFORMATION



### 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



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

<u>Download Financial Resources General Information Spreadsheet</u> (/mmidisp/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.



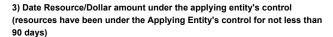
Document size limit is 10 MB. Up to 5 documents may be attached.

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)



<u>Download Financial Resources - Retail Dispensing Location Information</u> Spreadsheet

(/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 dispensary locations must be provided as proof of the financial resources.



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 or

(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;	
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;	
time in opening a rotal dispensing results,	
Response to (2) shall be no longer than five (5) pages.	
response to (2) shall be no longer than into (e) 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;	
nawan,	
(D) Good credit history; and	
·	
(D) Good credit history; and	
(D) Good credit history; and (E) History of bankruptcy by the applicant or entities owned or operated	
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(D) Good credit history; and (E) History of bankruptcy by the applicant or entities owned or operated by the applicant;	
(D) Good credit history; and (E) History of bankruptcy by the applicant or entities owned or operated by the applicant;  Response to (3) shall be no longer than five (5) pages.  Upload Response to (3)	
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(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;	ก
Personne to (7) chall be no longer than five (5) pages	
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.	0
response to (10) shall be no longer than timee (0) 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.	O .
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.	
Decrease to (42) shall be no larger than five (5) name	0
Response to (12) shall be no longer than five (5) pages.	
Upload Response to (12)	
(13) No history of having a business license revoked.	
Perpanel to (12) chall be no longer than three (2) pages	0
Response to (13) shall be no longer than three (3) pages.	
Upload Response to (13)	
SECTION F: CERTIFICATION AND SUBMITTAL	
Certification	✓ I hereby certify under penalty of law that the information submitted as part of this approximation.
By checking the box above and entering the individual applicant's name be	low, the applicant has electronically signed this application.
Applicant Name	Mr Daniel Roy Galczak Lankford
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	39576678
User Email	
Entry Info	
Date Created 12 Ja	n 2016 - 08:58:08 AM
Date Updated	
IP Address	

# JCD CORPORATION SECRETARY'S CERTIFICATE

Jeffrey J. Cambra, certifies that:

- 1. He is the duly elected and qualified, and at this date is, the Secretary of JCD Corporation, a Hawaii corporation (the "Company").
- 2. On June 17, 2015, the Board of Directors elected Daniel Lankford as the President of the Company and in that capacity he has the following powers as set forth in Article V, Section 5.3 of the Company's Bylaws:
  - 5.3 <u>Duties of the President</u>. Subject to any supervisory powers given by the Board of Directors to the Board Chair, if one exists, the President shall be the general manager and chief executive officer of the Corporation and, subject to the direction of the Board of Directors, shall have general supervision, direction, and authority over the business, affairs, and officers of the Corporation, and shall perform all the duties commonly incident to that office. The President shall preside at all meetings of the shareholders and, in the absence of the Board Chair, or, if there is none, at all meetings of the Board of Directors. The President shall have such other powers and perform such other duties as the Board of Directors shall designate from time to time.

Daniel Lankford, as President, is authorized in the name and on behalf of the Company, to do and perform all such acts and things, to pay any and all expenses and fees, and to execute and deliver all such instruments, documents and agreements as he deems necessary or appropriate in order to represent the Company in all dealings with the State of Hawaii.

Witness the hand of the undersigned this December  $23^{1/2}$ , 2015.

Jeffrey J Cambra, Secretary

Nonrefundable Filling Fee \$50.00

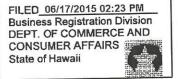
# STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

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, Hawall Revised Statutes)

PLEASE TYPE OR	PRINT	LEGIBLY	IN	BLACK IN	JK
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The undersigned, for the purpose of forming a corporation under the Articles of Incorporation:	laws of the State of Hawaii, do h	ereby make and execute these

The name of the corporation shall be:

JCD Corporation

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

11

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

250 Ohua Avenue, #PHB, Honolulu, HI (96815)

111

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:

**Daniel Lankford** 

(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:

250 Ohua Avenue, #PHB, Honolulu, Hi (96815)

IV

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

10,000,000

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

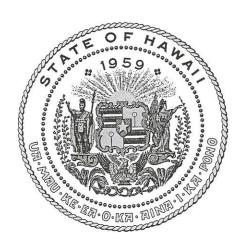


DIRECTOR OF COMMERCE
AND CONSUMER AFFAIRS

December 3, 2015

V

The name and address of each incorporator is:	
Name	Address
Daniel Lankford	250 Ohua Avenue, #PHB, Honolulu, HI (96815)
I certify that I have read the above statements, I am authorized statements are true and correct to the best of my knowledge an	to sign this Articles of Incorporation, and that the above d belief.
Signed this 15th day of June	, 2015
Daniel Lankford (Type/Print Name of Incorporator)	(Type/Print Name of Incorporator)
· Pr	
(Discourse of Incompanies)	(Signature of Incorporator)



# **Department of Commerce and Consumer Affairs**

## CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

JCD CORPORATION

was incorporated under the laws of Hawaii on 06/17/2015; and that it is an existing corporation in good standing, and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: December 23, 2015

Catan-P. Qual: Color

Director of Commerce and Consumer Affairs

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OWNER / PRINCIPAL / MEMBER REPORT											-	+
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Please include a signed statement by each	Owner, Principal, or Member certifying that the information	ation is complete	and accurate.									
							Has person ever					
							been convicted					
						Number of Years Lived			If person has been		If person has ever	
				Percent		in Hawaii (most recent	So, STOP, they		convicted of a crime,		been arrested,	
				Interest in		uninterrupted number	are not an		please describe (e.g.,	Has person	please describe	eCrim Report
				the	Primary	of years person has			conviction, date,	ever been	(e.g., date,	Validation
Name of Owner, Principal, or Member	Address (Street, City, State, Zip, Country (if not USA))	Phone Number	Email Address	Company	Residence	been a resident)	applicant)	of a crime?	disposition, etc.)	arrested?	disposition, etc.)	Code
Daniel Lankford				51								
Cynthia Mogus				24.5								
Jeffrey J Cambra				24.5								
Jerney J Cambra				25				_				
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## Criterion 1: Knowledge, Education, Experience and Ability to Operate A Business

Related work within in a regulated industry: For over 10 years we have imported and distributed fertilizer to 45 states in the U.S. including Hawaii. We deal with state regulatory bodies consistently and have conformed to each state's varying guidelines. With the purchase of House & Garden nutrients, an international fertilizer company, we expanded operations to export to multiple countries around the world, managing international regulations in addition to U.S. regulations. We have been the primary supplier of commercial grade growing products in Hawaii and have created strong relationships with most of the agriculture (society) in Hawaii.

Agriculture or horticulture: As the distributor and producer of House & Garden nutrients, we have made it a practice to routinely visit farms and growing facilities and have consulted on applications of all of our products and best practices of growing. With 10 retail garden stores, the owners and employees consult daily on best practices for large and small scale gardens.

Two owners of the applying entity are medical card holders and have direct experience growing medical grade cannabis.

<u>Commercial Manufacturing:</u> We own and distribute two lines of fertilizer around the world.

The first brand, known as Mad Farmer, was created through years of research and development and is unique to our organization. The second line of nutrients was added with the acquisition of House & Garden. We occupy a 70,000 sf manufacturing facility in Northern California.

Pharmaceutical Companies: We do not supply Pharmaceutical Companies.

Operating or Working in a medical marijuana dispensary: Jeff Cambra was instrumental to implementing procedures and financial standards as the accountant for California Care Collective, formerly based in San Jose, California, As a volunteer for 3 years, Jeff was part of a discussion group based in a large dispensary in Northern California that covered all topics regarding growing and medication. Jeff has also been a California grower and supplier for multiple dispensaries of both flower and concentrates in the San Francisco Bay Area for the past five years.

Creating and implementing a business plan, including a timeline for opening: Cynthia Mogus and a small group of investors purchased House & Garden nutrients based in Holland in March of 2015. Upon purchase, we opened up the balance of the business, less the initial down payment, to outside investors. A necessity of this offering was to create and implement a business plan that included a timeline to move the facility from Holland to Northern California, build out a facility there and resume operations. With 30 years as a business and personal accountant, Jeff Cambra has consulted, developed and has been intimately involved in the creation of many business plans.

<u>Creating and implementing a financial plan:</u> Part of the House & Garden nutrients offering included the creation and implementation of a financial plan to move operations and reach profitability and stability within 12 months. This involved financial planning for acquiring, moving, operating and expanding the business.

**Retail Sales:** Our knowledge and experience in retail sales is vast. We have opened more than a dozen retail Hydroponics stores over the last 15 years. We have expanded operations at

individual locations to the extent that we sold multiple stores to private investors and still maintain 4 retail stores in Hawaii (Ohana Greenhouse and Garden Supply) with a total of 10 retail stores in the U.S.

Secure Inventory tracking and control: Through our supply, distribution and retail chain, we track all states of inventory from raw materials to finished goods. During the manufacture of chemical fertilizers we control inventory to ensure proper safety and accountability within each division. We have instituted policies, procedures and guidelines for inventory control and recognition in our retail outlets to ensure valuable or regulated items are accounted for. During his tenure as the accountant for California Care Collective, Jeff Cambra helped institute a webbased sales and inventory tracking system similar to what will be used by Hawaii dispensaries.

Protecting confidential customer information: During a time when people were hesitant to give their names or identifying information while buying products from our hydroponic stores, we needed to set up a system to track their purchases and provide exceptional customer service while maintaining their right to privacy and confidentiality. Protocols were established that achieved the result of maintaining customer information through both electronic and physical procedures of conduct. In addition, as an accountant and tax preparer, Jeff Cambra manages hundreds of clients each year, protecting sensitive information such as social security numbers and bank account information. Protocols for employees that hear and see confidential information have been in place for all employees to protect client information.

Owning a business that requires 24 hour security:- We have extensive security experience, as all of our retail stores require 24 hour security. We have physical and electronic security

measures for all locations owned and operated.
Our manufacturing and distribution facilities also require 24 hour security.
He have through personal experience
and consultation by security professional designed systems that ensure 24/7 monitoring.

Other Experience the applicant considers relevant: An important distinction is that Dan Lankford has experience growing medical grade cannabis specifically in Hawaii. There are applicants that have formed partnerships with groups from other states that have experience growing in other states. Dan is the only applicant with experience growing cannabis in Hawaii. Growing in Colorado where the air is thin and dry is completely different than growing in Hawaii where it is warm and humid. Pests are different in Hawaii than in other states, the soil is different, the conditions are different, and the people are different. The only people that will have immediate success growing cannabis in Hawaii are the people already growing cannabis in Hawaii. Dan has spent the last 10 years not only growing in Hawaii, but has been providing growing solutions for, consulted with and learned from growers that have been doing this for 40 years in Hawaii. He understands exactly what it takes during every step of cultivation to produce safe reliable medicine for the patients of Hawaii. Nearly every medical card holder in Hawaii has been into one of Dan's stores over the last 10 years; he already has a relationship with all of the patients that will be coming into the dispensary. There is probably no one else in the state that can make that claim.

# Criterion 2: Business Plan Overview for Maui County

Our production capacity for the first year will begin with
We feel the initial demand can be met by a single production facility based on the
following calculations:
Initial production facility will be approximately 10,000 sq. ft. consisting of two 2000 sq. ft. of
flowering rooms, a 1000 sq. ft. Vegetation room, a 1000 sq. ft. mother/clone room, a 1000 sq.
ft. drying room, and a 1000 sq. ft. processing room. Each of the two flower rooms will contain
approximately 900 plants.
We will use 56 lights per flower room with 16 plants under each light. Indoor production is
measured more by the amount of available light than the number of plants. A master grower
can produce between 2 and 3 pounds of cannabis per light resulting in an minimum production
of 112 pounds every 5 weeks or just over 3 pounds per day.

We can begin this new cycle as soon as demand requires. Although the new cycle produces
more capacity, the time it takes to get up and running and the ease of growing with smaller
plants will cut weeks off our initial start-up time, (see timeline for opening below). Smaller
plants are easier to handle during growth and harvest with fewer potential challenges which will result in rapid distribution and quality control during the first 6-12 months.
Timeline for Opening:
When we receive a license on April 15 <sup>th</sup> ,

Opening the Growing Facility: During the first month, we will register with the NED, and begin to build our growing facility. We will complete preparations on one of the two flower rooms within the first month so that growing will begin the day our waiting period is over. The plants in that area will need to Vegetate for approximately 4 weeks. Then they will require a minimum of 8 weeks to flower. Some strains can take as much as 11 weeks so initially we will flower only 8-week strains to decrease our opening time and the time the first medicine will reach patients. The second grow room will be operational a month after the first grow room and will be planted and follow a similar timeline, with the potential exception of adding variable strains that may increase flower time by up to 3 weeks. This will start full production at our first grow facility.

Within the first 90 days we will build the rest of our facility which will include a drying, trimming, processing, and storage area. The first group of plants will be ready for harvest and will need to dry for 7 to 14 days before they are processed. Once the plant is dried, we will use a dry trimmer to harvest the product. A dry trimmer can process 3 to 5 pounds of flowers in an hour. The first harvest will be trimmed in two days. Total time to market for initial product will be less than 120 days.

**Opening the Retail Facility:** The retail location requires a two month waiting period. We will build out the retail location over the 120 days during first harvest. This will ensure all State security requirements are met and provide time for installation and testing of the BioTrack THC software program that is being implemented for the state, including training for all employees.

<u>Location Plan:</u> We are intimately aware of the current lack of industrial space in Hawaii.
Recent surveys show small industrial space to be limited and large industrial space to be
virtually non-existent. We do not foresee this changing in the near future as the cost to build
outweighs the rental income stream.
Retail Facilities: The first location we open will only service local medical card holders
<u>Timeline Review:</u> We will get a license on April 15 <sup>th</sup> . We will finalize on the retail location and
growing facility by April 30. The one month waiting period to grow should end May 31, during
which time we will finalize preparations on the first growing room.
The Veg and Flower cycle will take 3 months. The first harvest

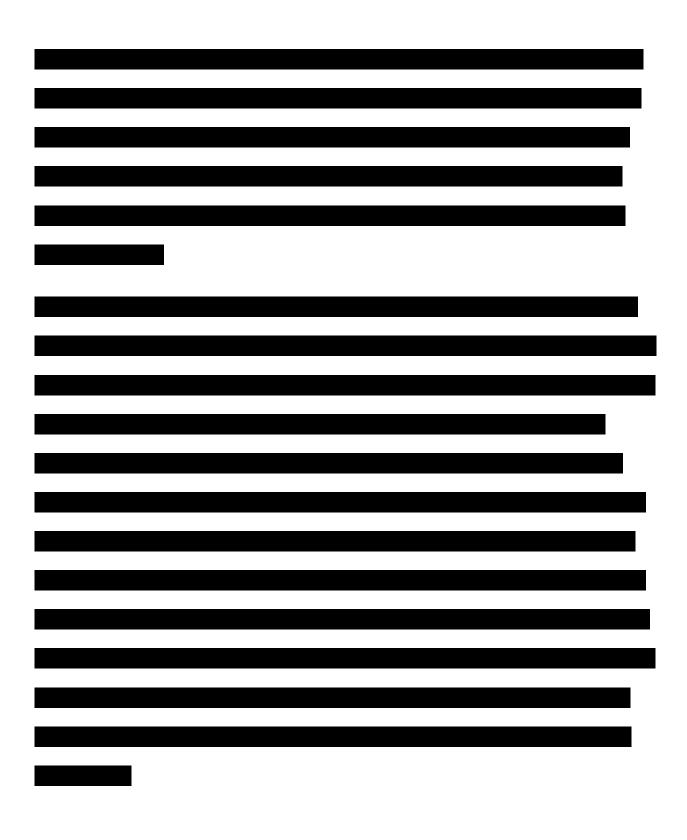
## <u>Criterion 3: Proof of Financial Stability and access to financial resources:</u>

<u>Legal sources of finances available immediately:</u> As shown in the application, we have 1.2
million dollars in cash in the corporation that has been on file and documented for over the 90
day requirement. This is not an escrow account or promissory note that may take time to
convert. The 1.2 million dollars has been put aside specifically for this project and is available in
full.

Summary of financial statements in businesses owned and operated: Jeff Cambra owns and operates his accounting practice and is a shareholder in House & Garden Nutrients. Dan Lankford and Cyndi Mogus together operate Ohana Greenhouse and Garden Supply. Cyndi Mogus, along with other partners, owns and operates San Diego Hydroponics, San Diego Hydroponics North, Mendocino Greenhouse, Humboldt Wholesale, Mad Farmer, and House & Garden Nutrients

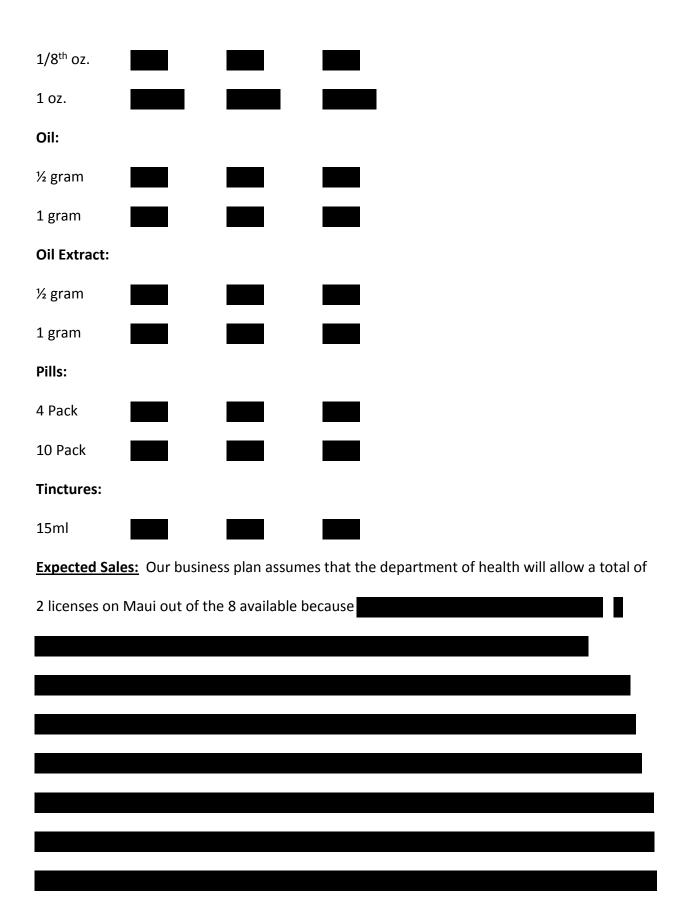
Company Sales Year

Financial plan for operations	<u>s:</u>	



Flowers: Year 1 Year 2 Year 3

1 gr



Credit History:
Dan's Lankford's credit score
Cynthia Mogus' credit score  Jeff Cambra's credit score

# <u>Criterion 4: Ability to Comply with Security Requirements:</u>

We have and always will treat security as a vital component of business practice. For the past
10 years in all our stores, distribution centers, and manufacturing facility,
We will meet all requirements of the state of Hawaii for security.
<u>Display of identification badge:</u> All employees while on the licensed premises shall be required
to properly display an identification badge issued by the licensed employer. All nonemployee
visitors to the licensed premises, other than retail store customers, shall be required to
properly display an identification badge issued by the licensee at all times while on the licensed
premises. A log will be kept and maintained showing the full name of each visitor entering the
licensed premises, badge number issued, time of arrival, time of departure, and purpose of the
visit. All log records will be maintained on the licensed premises for a period of three years with
a photocopy backup stored offsite on an interval deemed appropriate by the Officer's of the
corporation. The log will be available for inspection by any Department of Health employee or
Alarm systems: Each licensed premises will have a security alarm system
Surveillance system: A complete video surveillance system with
The surveillance system storage

device and/or the cameras will be internet protocol (IP) compatible and cameras will be
positioned to allow for the clear and certain identification of any person(s) and activities in
controlled areas of the licensed premises. All entrances and exits to an indoor facility will be
recorded from both indoor and outdoor, or ingress and egress vantage points. All cameras will
record continuously twenty-four hours per day and
The surveillance system storage device
All surveillance recordings will be kept for a minimum of
All videos will be available to inspection by any Department of Health
employee or law enforcement officer, and will be copied and provided upon request. All
recorded images will clearly and accurately display the time and date. Time will be measured in
accordance with the U.S. National Institute Standards and Technology standards.
(a) Controlled areas include:
(i)
(ii)
(iii)

(iv)
(b)
Transport manifest with product
information and weights will be affixed to the transport container and a second copy will be
included within the locked transport container.
Security regarding Patients: We will at all times have an employee
The employee will chec
both the medical card and the patient's government issued identification.

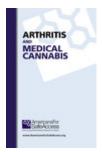
# <u>Criterion 5: Capacity to Meet the Needs of the Patient:</u>

Educating patients on usage: Dan and Jeff	who understand
the importance of education. Where growers are mixing strains and phenot	ypes to produce a
"better" plant, it is paramount to understand each and every product offere	d to the patient and
what benefit it has to offer.	
We will use a .	

## **ASA Condition-based Booklets**

These booklets summarize the history of medical cannabis and the recent research on using it to treat a variety of conditions, including Cancer, Multiple Sclerosis, Chronic Pain, Arthritis, Gastro-Intestinal Disorders, Movement Disorders, HIV/AIDS, and conditions related to Aging.

## **Arthritis**



The importance of cannabinoids in bone health has been established in transgenic mice that are missing either the CB1 or CB2 receptor. These mice develop osteoporosis much more quickly than normal or wild mice. Research has recently shown that mice missing both cannabinoid receptors have extremely weak bones, a condition that underlies osteoporosis and osteoarthritis pathology.

## Cancer



Cannabis has been found to help cancer patients with the symptoms that usually accompany cancer such as pain, nausea, wasting, and loss of appetite.[12] Notably, in a meta-analysis of 30 clinical studies on the therapeutic use of cannabis for chemotherapy-induced nausea and vomiting, Delta9-THC (dronabinol AKA marinol) proved superior to modern anti-emetics.[13] Additionally, patients showed a clear preference for cannabinoids as anti-emetic medication over conventional drugs, when receiving chemotherapy.

immediate needs of the patients and have the capacity, experience, knowledge and resources
to expand quickly if the demand is greater than projected or if there are temporary challenges
with the other licensee.

**Producing and maintaining marijuana supply:** Please refer to Application Criterion 2 which

details our business plan and projections for quantity and time to market. We will meet the

Providing safe, accessible retail locations:
Measuring and improving customer satisfaction: We will continue to develop ways to improve
customer satisfaction.
Other Ways to meet Patient Needs: To truly meet patient needs, we need to look outside the
box and consider a bit of lateral thinking. We feel that there are other ways to meet patient
needs other than simply providing their medicine. In our experience with successful
dispensaries, they have always offered something above and beyond. We will offer, but not be
limited to, the following "extra" services to our patients:
Free Growing Classes:

Free Cooking Classes:
Free Yoga and Meditation Classes:
Other Classes:

## <u>Criterion 6: Ability to Comply with Criminal Background Check Requirements:</u>

Given the nature of the industry and its history, criminal background checks are vital. Cannabis
has been on the black market and supplied by a criminal element for many years so it is
important to eliminate the possibility of that same criminal element entering the legal market.
We will institute a three-fold process regarding background checks.
will be will be held to the standards above
All officers, directors, shareholders, members and managers of an entity applicant.

Employees of a medical marijuana dispensary.

All officers, directors, shareholders in a subcontracted production center or subcontracted retail dispensing location.

Subcontracted production center and retail dispensing location employees.

Any person permitted to enter and remain in dispensary.

### **Criterion 7: Inventory tracking, security, and sales limits for Patients:**

As referenced in Criterion 1, we have extensive, long-term experience in tracking and securing inventory. With thousands of items in our store, we anticipate demand and reorder at appropriate intervals, allowing time for backorders, shipping issues and general delays. Many of these items are small in size and high in value and must be handled only at a time when a sales associate is available to secure the item from customer theft. We maintain computer inventories of all items to ensure none of the product is removed due to employee theft. If discrepancies occur, video surveillance will be reviewed to determine where the theft occurred.

We also have experience tracking manufactured items which is similar to the growing process.

Dozens of chemicals arrive at our warehouse, many hazardous and potentially used for nefarious alternative purposes, which are monitored and moved to a secure location, similar to a cannabis production facility. In our chemical plant, we are required to have separate structures for many of the chemicals due to their hazardous nature. We monitor and maintain the chain of possession that is required to handle hazardous products.

We will need to track the cannabis product from Seed to Sale. We will use the software provided by the Department of Health to track our product. We assume this program will be robust and allow tracking from the time a clone is cut to the time the product is sold, all in real time. We will supplement with existing tracking software depending on need.

**Grow Cycle:** We will have Mother plants that are tagged as such. From these Mothers, clones will be cut and tagged. The rooting process produces less than 100 percent success. The plants that don't survive will be scanned and destroyed. Successful plants will be moved to the

vegging area to start the grow cycle. There will be a small margin of the plants that will need to be scanned and destroyed during the Veg cycle. When the Veg cycle is complete, the plants will be moved into the flower room and left to grow.

When the flowering cycle is done, we have a plant that is ready to be harvested. The plant will be cut, scanned and weighed before going into the drying area. Once dried, we have a true finished weight. The plant will be scanned a final time and a dried weight entered for that plant or batch of plants.

We then trim the plants and keep track of each part separately. The three parts of the plant, stems, flowers, and leaves will be weighed and compared to the total weight of the dried whole plants. The flowers and leaves will then be stored securely for later packaging or use in making manufactured products and the stems will be destroyed. This will give us a finished bulk weight for the products grown.

Tracking Flowers: As flowers are needed at the retail locations, they will be removed from
secure storage and processed into containers and prepared for transport to the store.

into a secured, locked container with a manifest both inside and out so that it is ready for transport. All aspects will be done under video surveillance. It will then be transported by our employee from our warehouse to our retail facility. The employee transporting the container will not have the ability to unlock the container and will not stop or deviate from the assigned route.

They will be packed

arrives at the retail location, it will be unpacked and the contents checked with the enclosed manifest under video surveillance, logged into the system as available finished goods at the retail location and available for sale.

Tracking Manufactured Product: Product intended for manufacturing will be removed from secured storage. The bulk amount will be removed from inventory and the new manufactured product will be recorded with an equivalent weight tied to that product. The amount used for any given product will reduce bulk inventory and calculate an equivalent weight for the product. The finished product will then be packaged and labeled appropriately. The finished goods will go back into secure storage until needed at the retail store. The process for delivery will be the same as for the flowers above.

Tracking sales limits for qualifying patients: Tracking of sales to patients should be done using the system provided by Bio-Tech Medical Software and required by the state of Hawaii.

Whatever their parameters are we will implement them and train our staff as necessary. We were told that sales limits would be real time and that our sales registers would show the amount available for any patient. No exceptions will be allowed and any inconsistencies will be brought to the state and Bio-Tech support.

### **Criterion 8: Ability to maintain patient confidentiality:**

We have extensive experience implementing policies, procedures and guidelines to ensure the intellectual property and confidentiality of patients maintained at our existing 10 retail outlets, distribution center and manufacturing company.

We will implement the existing systems and add additional measures pursuant to the guidelines necessary to ensure confidentiality.

Jeff Cambra will oversee information security protocols. As an accountant, Jeff maintains confidential information such as social security numbers, W-2's and bank account information for direct deposit and withdrawal of tax payments for all of his clients. Jeff has instituted information security protocols throughout client's businesses by creating access controls for each employee.

Throughout Jeff's practice and the many businesses owned by the 3 principals, information security and confidentiality systems have been implemented that exceed Federal, State and Local requirements. These same practices will be taught and applied to everyone involved in the operation of our dispensary.

### **Criterion 9: Ability to comply with laboratory testing:**

For the last 10 years, we were the sole importer into the U.S. of the House & Garden Fertilizer brand. We distributed House & Garden Fertilizer to 45 of the 50 states. This included submitting our product to each state chemist for testing. We maintained security to and from the testing location. We provided any and all necessary products and paperwork in a timely and ordered fashion so we were compliant with state chemist testing regulations.

Upon buying and moving House & Garden to the United States, we now distribute our products to 8 countries worldwide and have to meet all requirements for testing in each of those countries as well as continue to comply with each state's guidelines in the U.S.

In the future there will be a state sanctioned lab to test every batch of marijuana we grow and every manufactured product that we produce. We have the knowledge, experience and existing connections to comply with the chain of custody to get the product securely to the testing facility and provide for its destruction upon completion of testing.

# <u>Criterion 10: Ability to comply with requirements for signage, packaging, labeling, and chain</u> <u>of custody of Products:</u>

Our fertilizer line has over 24 products with up to 5 different sizes of each item in 3 different languages. This equates to 120 different containers with each country having its own labeling requirements. To be in compliance with the requirements for packaging and labeling in Hawaii, we will be using opaque, child resistant containers for every product we sell. Our sales and inventory program will have a label maker incorporated into it to produce a label with the required information. We will have an insert for any additional necessary information to be added manually after the label is processed.

We have over a decade of experience complying with chain of custody on a larger scale. We import and export fertilizer and hazardous chemicals in an out of the United States and 8 countries. We routinely interact with customs agents and adhere to Hazardous Materials protocols.

We have read, understand and already implemented in our existing business structure the requirements set forth in 329D. We will maintain the same stringent guidelines that have allowed us to operate our multi-national hazardous materials facilities without a single incident for the past 10 years.

#### Criterion 11: Plan for secured disposal or destruction:

As a chemical manufacturer, distributor, and owner of many retail gardening stores for more than 10 years, we have had protocols in place that comply with all state requirements for spillage, disposal and destruction of hazardous products. There is a standard for every product whether it is chemicals or yard waste. Below is our standard for destruction of marijuana waste or expired marijuana products.

The method to render marijuana plant waste unusable is by grinding and incorporating the marijuana plant waste with other ground materials so the resulting mixture is at least fifty percent non-marijuana waste by volume. Material used to grind with the marijuana falls into two categories: Compostable waste and non-compostable waste.

Compostable mixed waste: Marijuana waste to be disposed as compost, feedstock or another organic waste method (i.e., anaerobic digester) will be mixed with the following types of waste materials:

- (i) Food waste;
- (ii) Yard waste;
- (iii) Vegetable based grease or oils;
- (iv) Other wastes as approved by the Hawaii Department of Health;

Non-compostable mixed waste: Marijuana waste to be disposed in a landfill or another disposal method (i.e., incinerator) will be mixed with the following types of waste materials:

- (i) Paper waste;
- (ii) Cardboard waste;

(iii) Plastic waste;
(iv) Soil;
(v) Other wastes as approved by the Hawaii Department of Health.

We will maintain a record of the final destination of marijuana waste rendered unusable.

### **Criterion 12: Ability to ensure product safety:**

As a chemical manufacturer and distributor, we have vast experience in laboratory testing, product safety, and labeling. This would include following all health and safety standards for the industry, regulated by the state and country. We will follow all guidelines for production, testing and distribution as we have done for the past 10 years with all of our companies.

<u>Laboratory Testing:</u> Laboratory testing will be done on all products grown or manufactured.

Each product will be stored in a secure location until such time as that product has been tested for content, contamination, and consistency.

Manufacturing of Medical Marijuana Products: We will offer all manufactured products allowed by the state of Hawaii and the department of health and will obtain all licenses required prior to commencement of production. We will determine the process of each manufactured item and the licenses required to produce those items. We have experience with and understand the process of manufacturing and licensing.

We will calculate equivalent weights of all manufactured products so as to not allow a product to exceed allowable levels of THC and any other component deemed by the Department of Health. We will comply with all health and safety standards set forth by the state as we have done with all our companies in the past.

<u>Packaging:</u> We will follow all state guidelines for packaging of products. We currently manufacture, package, and label similar products daily and have dealt with labeling

requirements from 45 states and multiple countries. The medical marijuana will be grown, manufactured, bottled and sold with the utmost concern for health and safety standards.

### <u>Criterion 13: No history of Business License being revoked.</u>

In the past 15 years, Dan Lankford, Cyndi Mogus, and Jeff Cambra have opened, purchased and grown many successful businesses. As our businesses grew, we invested the time to build relationships with city, county, state and international agencies as we will do again in Hawaii.

Owning and managing a multi-million dollar business requires resources in place like lawyers, bankers and accountants to make sure that issues like a business license being revoked does not happen. At no time, have we ever had a business license revoked or even threatened.