





A Please use a supported browser for best performance. Please cick here for a ist of supported browsers (/dist/browserSupport.html)

DISMISS

Review

Selected Account:Blackberry Farms LLC

Your app ication has been filed with the Alabama Medical Cannabis Commission. Your reference code is 1699.

File Date: 03/24/2023 1:16 PM

If you do not receive email notifications, please check your spam folder.

You must print or save this page as a PDF as part of your redacted fi ing.

Request for Business Application Information

✓ Request Number:

Identification

Number Type

Business Entity

Type

General Applicant Information

: FEIN

pany

- Applicant Name: Blackberry Farms LL ✓ Applying as: Business Entity С

 - Federal Tax Identification Number
 - Secretary of State : **Entity ID Number**
- ✓ Date of Qualification, Organization or Incorporation: 09/11/202

: Limited Liabi ity Com

- **Trade Name** (DBAs)
- **Business Entity** : Blackberry Farms LL Name С
- Federal Business : Code No

Applicant Street Address

✓ Address Verified?: Yes

Applicant Mailing Address

	sal.com	Address	tonmail.com	Number	
✓ Do you ha	ve a management service agreeme	ent in place?:		No	
✓ Is the app	licant: (1) at least 51% owned by (c	or in the case of a cornoration	51% of the shares belong to) members of any minority group :No	
	d by 20-2A-51(b)), and (2) manage				
	_				
Primary Co	ntact Person				
✓ Address V	'erified?: Yes				
License Inf	formation				
✓ License Ty	/pe: Cultivator				
Facility Info	ormation				
	-•				
Facility Info	ormation				
- A Engility Ty	pe: Cultivation Facility				
✓ Facility Ty	pe. Cultivation Facility				
Diserted Ad	J				
Physical Ad	aress				
✓ Address	: Yes				
Verified?					
	_				
Facility Info	rmation Questions				
	s interest in property : Agreement	Contingent on Receipt of Li			
where pro located	posed facility is cense				
✓ Is this fac	ility under : Yes				
constructi	=				
✓ Estimated	date of construction: 08/11/202	3			

✓ Applicant Email : monticolagreen@pro

✓ Applicant Phone : 3043815858

✓ Applicant Website: www.blackberryfarm

completion

The number of days, if awarded a license, within which the Applicant : 60 reasonably projects it will commence operations at this facility The number of days, if awarded a license, within which the Applicant : 120 reasonably projects it will reach full capacity at this facility Does the applicant verify that this proposed facility will be in a permissible location, if applicable, and will maintain compliance with all State and local laws, resolutions and ordinances? **Ownership of Applicant** Select type of record: Entity Does this entity have ownership: Yes interest in the applicant? **Entity** ✓ Entity Name: Blackberry Consulting L ✓ Entity Type: Limited Liability Compa ✓ Are there individuals : Yes with direct or indirect ownership interest in this entity? Ownership : 100 Percentage of the Applicant **Physical Address** Address : Yes Verified? Primary Contact/ Responsible Person **Cannabis Industry Entities**

- Is any individual or entity below connected to any entity that is directly or indirectly involved in the cannabis industry, including, but not :Yes limited to, the cultivation, processing, packaging, labeling, testing, transporting, or sale of cannabis or medical cannabis, either in Alabama or any other jurisdiction?
 - (1) an individual with an ownership interest in the applicant;
 - (2) the spouse, parent, or child of an individual with an ownership interest in the applicant; or
 - (3) an entity with an ownership interest in the applicant.







	nas the applicant filed, or had filed against it, any proceeding for bank upto	y within the past 7 years:	NU
~	Is the applicant currently, or has it been in the past 10 years, a defendant in	litigation involving any of its business practices?:	NO
•	Is any public official of any unit of government: (1) an owner (directly or indirectly) of any financial or beneficial interest in t (2) a creditor of the applicant; (3) a holder of any debt instrument issued by the applicant; or (4) a holder of		NO
	relationship with the applicant?		
•	Is the spouse, parent or child of a public official of any unit of government: (1) an owner (directly or indirectly) of any financial or beneficial interest in tapplicant; (2) a creditor of the applicant; (3) a holder of any debt instrument issued by the applicant; or (4) a holder of, or interested party in, any contractual or service relationship applicant?		
~	Has any owner, director, board member, or individual with a controlling inter arrested for, convicted of, pled guilty or nolo contendere to, or forfeited bail misdemeanor, not including traffic violations, regardless of whether the offe	concerning any felony or controlled substance-related	NO
/hat i perat	the applicant's anticipated or actual number of employees ons and during the first five calendar years thereafter?	(including all facilities) at the prospective comme	encement of
~	Commencement of: 20 ✓ Year One: 25 Operation	✓ Year Two: 30	
•	Year Three: 35	✓ Year Five: 45	
~	Does the applicant verify that it has the ability to maintain adequate minimurequired by § 20-2A-53(a)(2), Code of Alabama 1975 (as amended)?	ım levels (\$2,000,000) of liability and casualty insurance, as :\	/es
~	Does the applicant consent as required by § 20-2A-55(d), Code of Alabama searches, and seizures contemplated by § 20-2A-52(a)(3), Code of Alabama		/es
~	Does the applicant verify that neither it nor its leadership have any economi the Act? (See § 20-2A-55(e), Code of Alabama 1975 (as amended))	ic interest in any other license or applicant for license under :	YES
~	l attest that this application is truthful and complete based on the best avail	lable information as of the date of filing.:	YES
~	Signature	✓ Signature Date : 03/24/2023	
ocı	ments		
~	Resume or Curriculum Vitae of Individuals with Ownership Interest:	[1699]_[Exhibit 1]_[Resume or Curriculm Vitae of Individuals	with Ownership Interes
~	Residency of Owners:	[1699]_[Exhibit 2]_[Residency of Owners].pdf (./api/documer	nts/0tVQQCJNg/downl
~	Commercial Horticulture or Agronomic Production Experience of Owners:	[1699]_[Exhibit 3]_[Commercial Horticulture Experience of O	wners].pdf (./api/docu

uliaant filad as bad filad.

✓ Criminal Background Check:	[1699]_[Exhibit 4]_[Background Check].pdf (./api/documents/tzMmYn-Rc/download)
✓ Demonstration of Sufficient Capital:	[1699]_[Exhibit 5]_[Demonstration of Sufficient Capital].pdf (/api/documents/Ckw5
✓ Financial Statements:	[1699]_[Exhibit 6]_[Financial Statements].pdf (./api/documents/0Mdor1JET/downl
✓ Tax Plan:	[1699]_[Exhibit 7]_[Tax Plan].pdf (./api/documents/n6aXvaRfx/download)
✓ Business Formation Documents:	[1699]_[Exhibit 8]_[Business Formation Documents].pdf (./api/documents/908S3
✓ Business License and Authorization of Local Jurisdictions:	[1699]_[Exhibit 9]_[Business License Authorization of Local Authorities].pdf (./api/d
✓ Business Plan:	[1699]_[Exhibit 10]_[Business Plan].pdf (./api/documents/u697sftoP/download)
✓ Evidence of Business Relationship with other Licensees and Prospective Licensees:	[1699]_[Exhibit 11]_[Evidence of Business Relationships with Other Licensees and
✓ Standard Operating Plan and Procedures:	[1699]_[Exhibit 12]_[Standard Operating Procedures].pdf (./api/documents/lurH2e
✔ Policies and Procedures Manual:	[1699]_[Exhibit 13]_[Po icies and Procedures Manua].pdf (./api/documents/wGJFg
✓ Machinery and Equipment:	[1699]_[Exhibit 14]_[Machinery and Equipment].pdf (./api/documents/gyKz-G0Fn/d
✓ Receiving and Shipping Plan:	[1699]_[Exhibit 15]_[Receiving and Shipping Plan].pdf (./api/documents/VYI52qruj/
✓ Facilities:	[1699]_[Exhibit 16]_[Facilities].pdf (./api/documents/H8vDyOX3L/download)
✓ Engineering Plans and Specifications:	[1699]_[Exhibit 17]_[Engineering Plans and Specifications].pdf (./api/documents/q
✓ Security Plan:	[1699]_[Exhibit 18]_[Security Plan].pdf (./api/documents/NiJylc40o/download)
✓ Personnel:	[1699]_[Exhibit 19]_[Personne].pdf (./api/documents/0-UtFxFT-A/download)
✓ Business Leadership Credentials:	[1699]_[Exhibit 20]_[Business Leadership Credentials].pdf (./api/documents/6Vhvl
✓ Employee Handbook:	[1699]_[Exhibit 21]_[Employee Handbook].pdf (./api/documents/SfngaOobh/downl
✓ Quality Control and Quality Assurance Plan:	[1699]_[Exhibit 22]_[Qua ity Control and Qua ity Assurance Plan].pdf (./api/docume
✓ Contamination and Recall Plan:	[1699]_[Exhibit 23]_[Recall and Contamination].pdf (./api/documents/7J7x10urv/d
✓ Marketing and Advertising Plan:	[1699]_[Exhibit 24]_[Marketing and Advertising Plan].pdf (./api/documents/_sGUnG
✓ Website and Social Media:	[1699]_[Exhibit 25]_[Website and Social Media].pdf (./api/documents/RUIuPe8Y2/d
✓ Ownership Entity Individuals (if applicable):	[1699]_[FORM]_[Ownership Entity Individuals].pdf (./api/documents/ih7wANuWK/
✔ Proof of Minimum Liability and Casualty Insurance:	[1699]_[Proof of Minimum Liability and Casualty Insurance].pdf (./api/documents/l

Payments

✔ Payment Options: Credit Card

License Type: Cultivator

Exhibit 1 - Resume or CVs

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Manager
Title of Verifying Individual
02/22/22
03/23/23 Verification Date
verification Date

Exhibit 2 – Residency of Owners

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

03/02/2023

Verification Date

Exhibit 3 – Commercial Horticultural Experience

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Exhibit 4 – Background Check

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

03/02/2023

Verification Date

4.1 Verifications

Each owner, shareholder, director, board remember, and individual with an economic interest has requested a criminal background check from the Alabama Law Enforcement Agency. See Form Bs included below.

4.2 Verified Written Consent Form C

Each owner, shareholder, director, board remember, and individual with an economic interest has submitted written consent for a state criminal background check using Form C to ALEA. Each completed background check form and fingerprint card was returned directly to ALEA following instruction included on Form C.

4.3 Verified Written Consent Form D

Each owner, shareholder, director, board remember, and individual with an economic interest has submitted written consent for a national criminal background check using Form D to the FBI. Each completed background check form and fingerprint card was returned directly to the FBI following instruction included on Form D.

4.4 Verified Written Consent Background Check Form

Each individual identified in 4.1 on Form B has requested a state criminal background check from ALEA and a national criminal background check from the FBI. See the attached background check individual verifications on the appropriate forms below.

Exhibit 5 - Demonstration of Sufficient Capital

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

Exhibit 6 – Financial Statements

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Exhibit 7 - Tax Plan

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

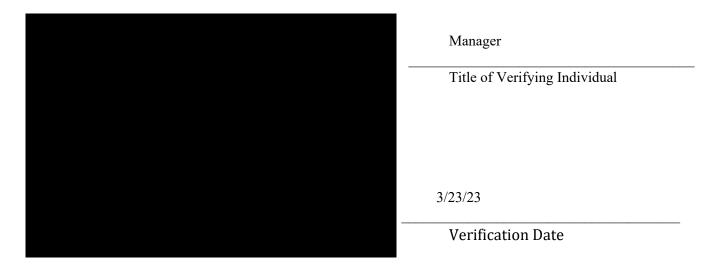
3/23/23

Verification Date

Exhibit 8 – Business Formation Documents

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Introduction

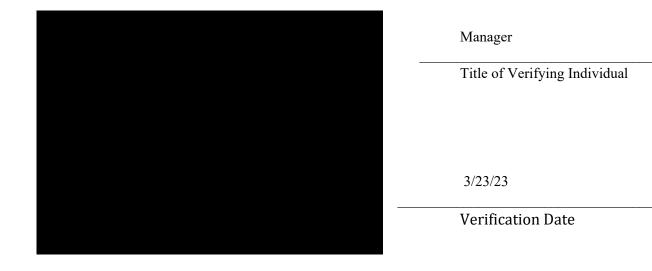
We have created our business structure, designed by our legal and financial teams, which adheres to applicable corporate conventions. Ala. Admin. Code r. 538-x-3-.05.3m.15.a. Our company is structured as an Alabama limited liability company ("LLC") to protect our owners from personal liability associated with the business and to provide certain tax benefits. To form our LLC, we filed our Name Reservation Certificate and Certification of Formation with the Alabama Secretary of State.

As an LLC, our business is a pass-through entity, and we will file as a partnership for tax purposes. Though it is not required for LLC to hold annual ownership and board meetings, we will do so and record the minutes of our meetings to promote transparency in our business operations. We will maintain and update our articles of organization and operating agreement and related documentation as needed. Our Chief Compliance Officer and our outside legal counsel will verify our ongoing compliance with applicable corporate conventions.

Exhibit 9 – Business License & Authorization of Local Authorities

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Introduction

We have created our business structure, designed by our legal and financial teams, which adheres to applicable corporate conventions. Ala. Admin. Code r. 538-x-3-.05.3m.15.a. Our company is structured as an Alabama limited liability company ("LLC") to protect our owners from personal liability associated with the business and to provide certain tax benefits. To form our LLC, we filed our Name Reservation Certificate and Certification of Formation with the Alabama Secretary of State.

As an LLC, our business is a pass-through entity, and we will file as a partnership for tax purposes. Though it is not required for LLC to hold annual ownership and board meetings, we will do so and record the minutes of our meetings to promote transparency in our business operations. We will maintain and update our articles of organization and operating agreement and related documentation as needed. Our Chief Compliance Officer and our outside legal counsel will verify our ongoing compliance with applicable corporate conventions.

In order to file for a general business license in the state of Alabama, you must be able to

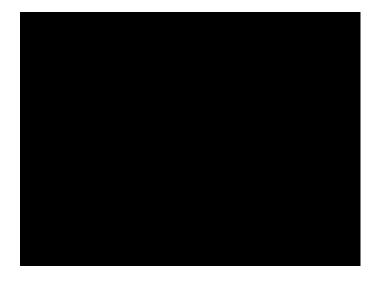
9.1 - Certified Copies of Business License for the State of Alabama

provide:

Exhibit 10 - Business Plan

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

Exhibit 11 – Business Relationships with Other Licensees and Prospective Licensees

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

Introduction

For our business to operate as a cultivation facility, it is integral that we establish distribution channels within the Alabama market to provide patients with the best cannabis products possible. To do so, we will establish professional relationships with the best cannabis-integrated facility and processor licensees in the medical program. We will implement this strategy in two ways.

First, we will utilize our local connections to begin negotiations with other prospective cannabis licensees in the area as soon as possible to establish relations. Second, once licenses are issued, we will enter into agreements with regional licensee partners, creating a supportive business network in the North East region of the state. We have already made inroads with several individuals and businesses interested in entering the cannabis space and are excited about expanding this network to other reputable sources.

Associations and Memberships

Our team is a current member of the Alabama Cannabis Industry Association, a 501c6 business league, formed by industry leaders, stakeholders, and governmental affairs operatives. We will be reaching out to our fellow members in order to establish business relationships with reputable license holders.

The Alabama Cannabis Industry Association was formed by industry leaders who are changing the way cannabis is consumed. As the voice for the cannabis industry, our Board and our members include government affairs, scientific, manufacturing, brands, and communications experts who effectively represent the interests of the rapidly growing cannabis industry. Through lobbying and public awareness, our goal is the decriminalization of medical cannabis in Alabama so qualified medical patients can get appropriate treatment. We also support the economic development and growth of the lawful cannabis and hemp industry in Alabama. ACIA was instrumental in the passage of the Darren Wesley "Ato" Hall Compassion Act.

We have had an introductory call with the Director of Membership of the Alabama Medical Cannabis Association and look forward to creating a strategic partnership with them, in order to foster connections to the Alabama cannabis industry. We look forward to meeting

fellow members of the AMCA, and ensuring that our products have proper, compliant distribution channels to our downstream licensees.

11.1 Any Processor or Prospective Processor

Name: Boro Hemp Co.

Website: www.borohemp.com

License Status: Prospective

Status of Relationship: Have made contact, currently working on Due Diligence

Name: Green Phoenix Holdings, LLC

Website: N/A

License Status: Prospective

Status of Relationship: Have signed MOU (see below)

Name: 1819 Labs LLC

Website: N/A

License Status: Prospective

Status of Relationship: Have signed MOU (see below)

11.2 Any Secure Transporter or Prospective Secure Transporter

11.3 Any Dispensary or Prospective Dispensary

11.4 Any Integrated Facility or Prospective Integrated Facility

Name: Alacann

License Status: Prospective

Status of Relationship: Have a MOU, attached below

Name: GreenPharms

Website: www.greenpharms.com

License Status: Prospective

Status of Relationship: Have made contact, working through Due Diligence before signing

LOI

Name: Wagon Trail Hemp Farms

Website: www.wagontrailhempfarms.com

License Status: Prospective

Status of Relationship: Have a signed MOU (see below)

11.5 Any State Testing Laboratory or prospective State Testing Laboratory

Additionally, we have learned over years of experience that without the expansion and auditing of state testing lab capabilities, the market could suffer a backlog that holds up product availability or decreases scrutiny for product safety testing, thereby increasing the chances of contaminated products and poorly served patients. We are prepared for such circumstances and will pay close attention to the state's stance on testing and adjust our practices as necessary to ensure we maintain both a stable supply of products and that those products are proven safe for consumption. There is nothing more important and vital to us than the safety and access to high-quality cannabis product for Alabama patients, as without this, we cannot function as an effective medical cannabis business in the state.

Exhibit 12 – Standard Operating Procedures

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

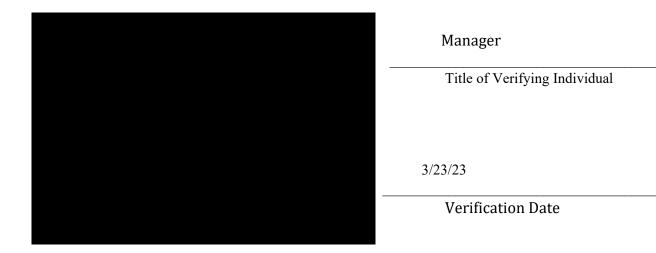


Exhibit 13 – Policies and Procedures Manual

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Summary of Contents

These Policies and Procedures constitute the foundational documentation of our medical cultivator business. This manual includes our detailed employee handbook, SOPs, and critical plans, all of which in sum describe our policies and procedures. We pledge to maintain these as living documents, updating and improving them as our company and the industry changes and grows. This document includes Part 1: Employee Handbook & Resources, which includes the following subsections: general information, rules and policies, compensation and benefits, safety, and miscellaneous information. Part 2 covers our SOPs, Plans, and Procedures.

Table of Contents

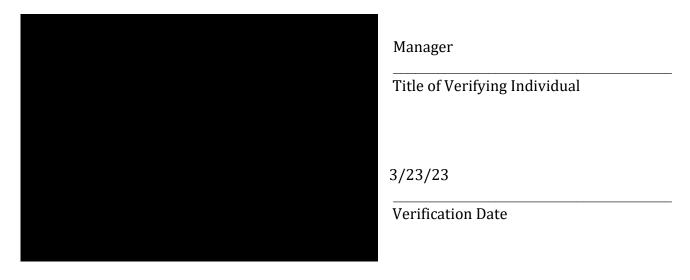


License Type: Cultivator

Exhibit 14 – Machinery and Equipment

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



License Type: Cultivator

Exhibit 15 – Receiving and Shipping Plan

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Exhibit 16 - Facilities

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Exhibit 17 – Engineering Plans and Specifications

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Signature of Verifying Individual

Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Exhibit 18 - Security Plan

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

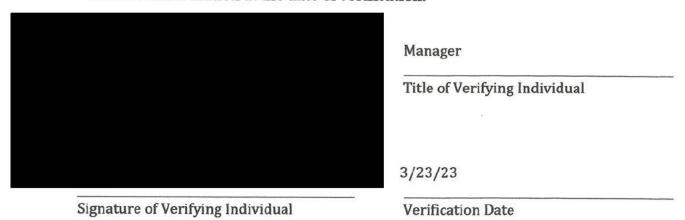
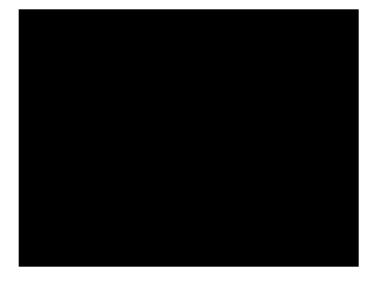


Exhibit 19 - Personnel

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

03/23/2023

Verification Date

License Type: Cultivator

Exhibit 20 – Business Leadership Credentials

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Exhibit 21 – Employee Handbook

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

License Type: Cultivator

Summary of Contents

This is a copy of our Employee Handbook, which is given to employees at the start of their contract with us. We pledge to maintain these as living documents, updating and improving them as our company and the industry changes and grows. This document includes the following subsections: general information, rules and policies, compensation and benefits, safety, and miscellaneous information.

Table of Contents



License Type: Cultivator

Exhibit 22 – Quality Control and Quality Assurance

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

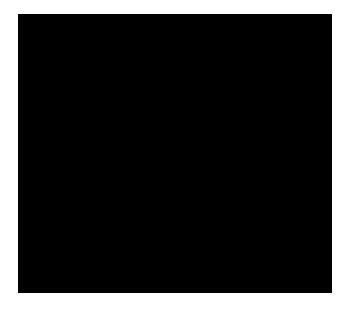
Verification Date

License Type: Cultivator

Exhibit 23 – Recall and Contamination Plan

Verification

The undersigned verifies that the information contained in this Exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Title of Verifying Individual

3/23/23

Verification Date`

Exhibit 24 - Marketing and Advertising Plan

Verification

The undersigned verifies that the information contained in this document, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

3/23/23

Verification Date

Exhibit 25 – Website and Social Media

Verification

The undersigned verifies that the information contained in this document, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



Manager

Title of Verifying Individual

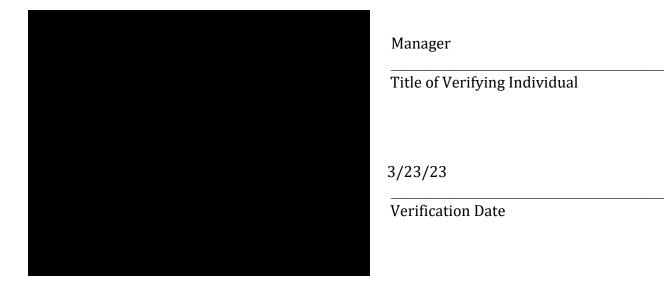
3/23/23

Verification Date

Form I – Ownership Entity Individuals

Verification

The undersigned verifies that the information contained in this document, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.



FORM I: OWNERSHIP ENTITY INDIVIDUALS

"Ownership Entity" - An entity that has any ownership interest in the Applicant.

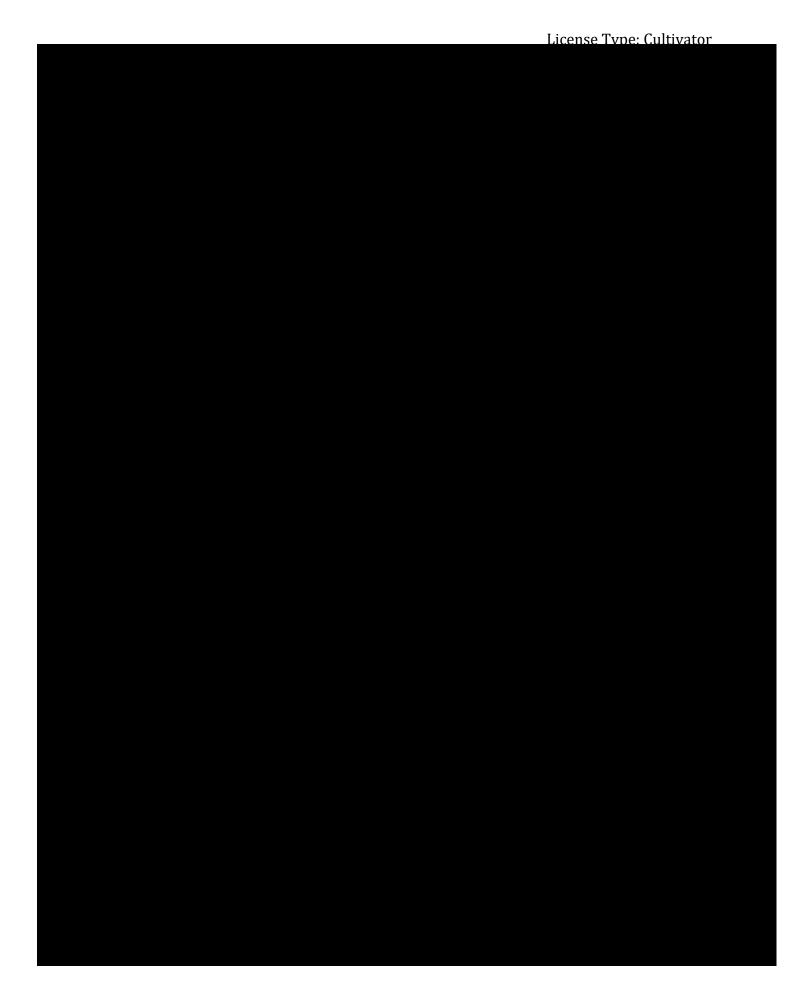
Blackberry Farms LLC

Complete a separate form for each ownership entity, providing information and verification as to each individual having an indirect or direct ownership interest in the ownership entity. Attach additional forms if necessary.

For purposes of this form, if the ownership entity is a trust, disclose the names and addresses of all trustees and beneficiaries; if a privately held corporation, the names and addresses of all shareholders, officers, and directors; if a publicly held corporation, the names and addresses of all shareholders holding a direct or indirect interest of greater than five percent, officers, and directors; if a partnership or limited liability partnership, the names and addresses of all partners; if a limited partnership or limited liability limited partnership, the names of all partners, both general and limited; or if a limited liability company, the names and addresses of all members and managers.

Cultivator

Ownership Entity Type: OTrust OPrivately Held Corporation OPublicly Held Corporation OPartnership OLimited Liability Partnership OLimited Partnersh OLimited Liability Limited Partnership OLimited Liability Company	Slackberry Consulting LLC winership Entity Name Ownership Entity % Ownership in Applicant Ownership Entity Type: Orrust Orrivately Held Corporation Orublicly Held Corporation Opartnership OLimited Liability Partnership OLimited Partnership	Business License Applicant	t Name	License Type
Ownership Entity Name Ownership Entity % Ownership in Applican Ownership Entity Type: Orrust Oprivately Held Corporation Opublicly Held Corporation Opartnership Olimited Liability Partnership Olimited Partnership Olimited Liability Limited Partnership Output District Oprivately Held Corporation Opartnership Olimited Partnership Output District Oprivately Held Corporation Opartnership Olimited Partnership Output District Oprivately Held Corporation Opartnership Olimited Partnership Output District Opartnership Output District Opartners	Ownership Entity % Ownership in Applicant Ownership Entity % Ownership in Applicant	Ownership Entity Inform	ation	
Ownership Entity Type: OTrust OPrivately Held Corporation OPublicly Held Corporation OPartnership OLimited Liability Partnership OLimited Partnersh OLimited Liability Limited Partnership OLimited Liability Company	Ownership Entity Type: OTrust OPrivately Held Corporation OPublicly Held Corporation OPartnership OLimited Liability Partnership OLimited Partnership OLimited Liability Limited Partnership	Blackberry Consu	ılting LLC	100
OPartnership OLimited Liability Partnership OLimited Partnersh OLimited Liability Limited Partnership OLimited Liability Company	OPartnership OLimited Liability Partnership OLimited Partnership OLimited Liability Limited Partnership OLimited Liability Company	Ownership Entity Name		Ownership Entity % Ownership in Applicant
Limited Liability Limited Partnership Limited Liability Company	CLimited Liability Limited Partnership Limited Liability Company	Ownership Entity Type:	OTrust OPrivat	ely Held Corporation OPublicly Held Corporation
			OPartnership O	Limited Liability Partnership OLimited Partnership
	Other (specify):		OLimited Liability	Limited Partnership OLimited Liability Company
Other (specify):			Other (specify): _	



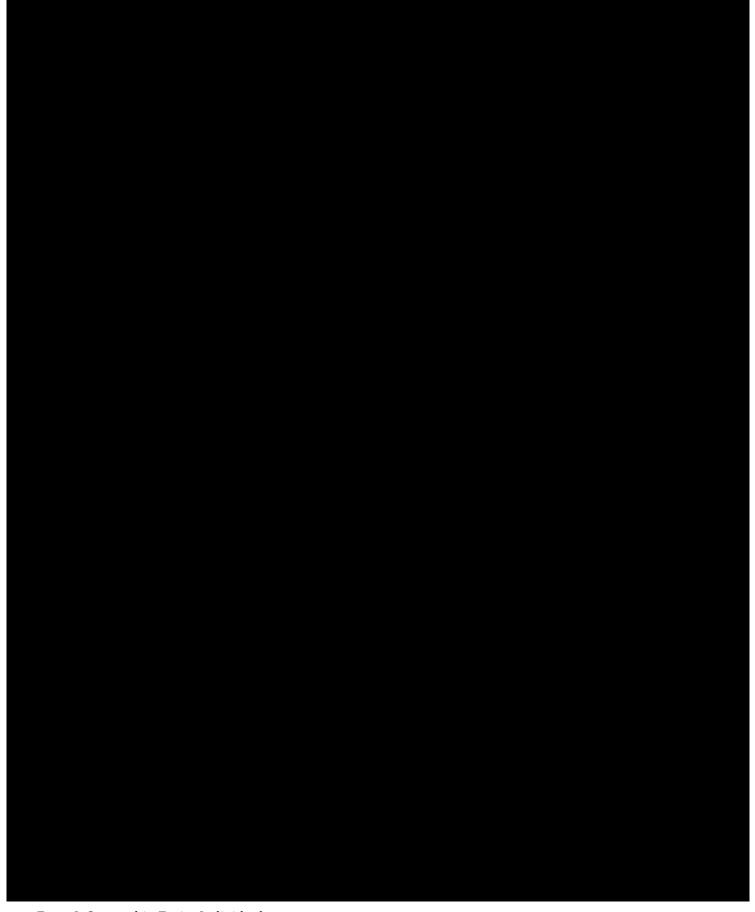
FORM I: OWNERSHIP ENTITY INDIVIDUALS

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For purposes of this form, if the ownership entity is a trust, disclose the names and addresses of all trustees and beneficiaries; if a privately held corporation, the names and addresses of all shareholders, officers, and directors; if a publicly held corporation, the names and addresses of all shareholders holding a direct or indirect interest of greater than five percent, officers, and directors; if a partnership or limited liability partnership, the names and addresses of all partners; if a limited partnership or limited liability limited partnership, the names of all partners, both general and limited; or if a limited liability company, the names and addresses of all members and managers.

Business License Applicant Name License Type	n Applican
Blackberry Consulting LLC Ownership Entity Name Ownership Entity Type: Orrust Orrivately Held Corporation Orrust Orrust	ı Applican
Blackberry Consulting LLC Ownership Entity Name Ownership Entity Type: Orrust Oprivately Held Corporation Opublicly Held Corporation	ı Applican
Ownership Entity Type: OTrust OPrivately Held Corporation OPublicly Held Corp OPartnership OLimited Liability Partnership OLimited P	n Applican
OPartnership OLimited Liability Partnership OLimited P	
	poration
	Partnersh
Limited Liability Limited Partnership OLimited Liability Co	Company
Other (specify):	
Other (specify):	



Form I: Ownership Entity Individuals Page 2
Form I - Ownership Entity Individuals

FORM I: OWNERSHIP ENTITY INDIVIDUALS

"Ownership Entity" - An entity that has any ownership interest in the Applicant.

Blackberry Farms LLC

Complete a separate form for each ownership entity, providing information and verification as to each individual having an indirect or direct ownership interest in the ownership entity. Attach additional forms if necessary.

For purposes of this form, if the ownership entity is a trust, disclose the names and addresses of all trustees and beneficiaries; if a privately held corporation, the names and addresses of all shareholders, officers, and directors; if a publicly held corporation, the names and addresses of all shareholders holding a direct or indirect interest of greater than five percent, officers, and directors; if a partnership or limited liability partnership, the names and addresses of all partners; if a limited partnership or limited liability limited partnership, the names of all partners, both general and limited; or if a limited liability company, the names and addresses of all members and managers.

Cultivator

Business License Applicant Name		License Type			
Ownership Entity Inform	ation				
Blackberry Consu	ılting LLC	100			
Ownership Entity Name		Ownership Entity % Ownership in Applicant			
Ownership Entity Type:		Held Corporation O Publicly Held Corporation mited Liability Partnership O Limited Partnership			
	OLimited Liability Limited Partnership Limited Liability Company Other (specify):				





2254 Eastern Blvd. Montgomery, AL 36117-1555 (334) 272-5150

Dear

Our agency is currently working alongside Burns & Wilcox and their carriers to provide the insurance you have requested for, Blackberry Farms, LLC, which will be located at We are preparing insurance policies that will include the following coverage limits to cover your

operations.

- General Liability annual policy with limits of \$1,000,000 per occurrence/\$2,000,000 aggregate.
- Workers Compensation with a minimum \$1,000,000 per statute limit.
- Employers' Liability with a minimum \$1,000,000 per statute limit.
- Product Liability annual policy with limits \$1,000,000 occurrence/\$2,000,000 aggregate.

All policies are annual policies. Once all quotes are completed, we will be able to bind coverage per quotes.

Sincerely,



FORM K: Affidavit of Entity Applicant for Alabama Medical Cannabis License

ST	ATE OF	lexas)		
<u>-</u>	Harris	county)		
		e undersigned nota er oath as follows (p	A C C C C C C C C C C C C C C C C C C C		no after being by me first duly sworn,
1.	NAME OF	ENTITY APPLYING	FOR LICENSE: Blace	kberry Farms	LLC
2.	NAME OF	AFFIANT:			
3.	AFFIANT'S	S POSITION V			
4.	AFFIANT	IS THE APPLICANT	'S (Check One):		esponsible Party Contact Person fidavit of BOTH individuals is required
5.	TYPE OF I	LICENSE BEING SOU	JGHT BY APPLICAN	IT (Check C	One):
	\odot	Cultivator	Processor		Secure Transporter
	0	Dispensary	Integrated Fa	cility	State Testing Laboratory
6.	On behalf	of the Applicant, I d	lo hereby affirm un	ider oath a	as follows:
	a.	F-1	to provide this Affic	1977 N. 777	bove, am an adult, over the age of 19
	b.	paragrap	h 1 above (hereina entity applicant's	fter, "Appli	been duly authorized by the Applicant icant") to provide this Affidavit. uthorization to this Affidavit.)
	c.	or other e type sp licant are	exhibits accompany ecified in paragrap seeking a different other entity.	ying it, are h 5 above,	and the statements, information and e for the purpose of seeking one (1) , on behalf of the Applicant. Neither I Medical Cannabis license on behalf of
	Ap inv ou	pplication are true a vestigation by me. tside my personal k	and correct, based To the extent any mowledge or ability	on my ow information to affirm,	nd other exhibits provided in the m personal knowledge and a diligent ion provided therein was heretofore I have personally communicated with ch personal knowledge, whose duties

include knowledge of the facts stated and/or the integrity of the documents or other I am able, based on such communications, to attest to their currentness and is I and the Applicant affirm under penalty of perjury and other applicable der the AMCC Rules and Alabama law. ITIAL HERE derstands and acknowledges that the license being applied for is a revocable inted by this state and is not a property right, and that this Application s not convey to, or otherwise entitle unto, the Applicant any rights to a ITIAL HERE nderstands, acknowledges, and will continue to respect and comply with regarding limited communication during the Application process. ITIAL HERE nsents to all background checks, examinations, inspections, and search and MCC and law enforcement personnel during this Application process and the extent a license is awarded. ITIAL HERE s no economic interest, as defined in the AMCC Rules, in any other license or or license under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et Alabama 1975. ITIAL HERE olicant will at all times, to the best of our ability, comply with the AMCC Rules, te and maintain transparency with the AMCC, its staff and other agents. ITIAL HERE ion provided in the Application is hereby affirmed under oath to be true as of the date of the Application's submission. ITIAL HERE Acting for and on behalf of: Blackberry Farms LLC Applicant day of December 2022 Sworn to and subscribed before me on this Document Notarized using a Live Audio-Video Connection [SEAL]

FORM K: Affidavit of Entity Applicant for Alabama Medical Cannabis License

STATE OF)
)
Harris COUNTY)
Before me, the undersigned notar did state under oath as follows (pl	y, did appear the Affiant, who after being by me first duly sworn, ease type or print legibly):
1. NAME OF ENTITY APPLYING F	OR LICENSE: Blackberry Farms LLC
2. NAME OF AFFIANT:	
3. AFFIANT'S POSITION	
4. AFFIANT IS THE APPLICANT'S	(Check One): Responsible Party Contact Person (The affidavit of BOTH individuals is required)
5. TYPE OF LICENSE BEING SOU	GHT BY APPLICANT (Check One):
Cultivator	Processor Secure Transporter
Dispensary	Integrated Facility State Testing Laboratory
6. On behalf of the Applicant, I do	hereby affirm under oath as follows:
17.	ant named in paragraph 2 above, am an adult, over the age of 19 provide this Affidavit.
ragraph	n paragraph 3 above, I have been duly authorized by the Applicant 1 above (hereinafter, "Applicant") to provide this Affidavit. entity applicant's written authorization to this Affidavit.) EE
other ex ype spe int are s	nowledge that this Affidavit and the statements, information and schibits accompanying it, are for the purpose of seeking one (1) cified in paragraph 5 above, on behalf of the Applicant. Neither I seeking a different Alabama Medical Cannabis license on behalf of ther entity.
investigation by me. I outside my personal kr	information, documents and other exhibits provided in the nd correct, based on my own personal knowledge and a diligent to the extent any information provided therein was heretofore nowledge or ability to affirm, I have personally communicated with cant's business who have such personal knowledge, whose duties

include knowledge of the facts stated and/or the integrity of the documents or other able, based on such communications, to attest to their currentness and nd the Applicant affirm under penalty of perjury and other applicable ie AMCC Rules and Alabama law. HERE ands and acknowledges that the license being applied for is a revocable by this state and is not a property right, and that this Application convey to, or otherwise entitle unto, the Applicant any rights to a HERE ands, acknowledges, and will continue to respect and comply with ding limited communication during the Application process. HERE s to all background checks, examinations, inspections, and search and and law enforcement personnel during this Application process and xtent a license is awarded. HERE conomic interest, as defined in the AMCC Rules, in any other license or ense under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et ma 1975. HERE t will at all times, to the best of our ability, comply with the AMCC Rules, maintain transparency with the AMCC, its staff and other agents. HERE rovided in the Application is hereby affirmed under oath to be true he date of the Application's submission. HERE Acting for and on behalf of: Blackberry Farms LLC Applicant 2022