

REGULATED CANNABIS BUSINESS LICENSE OATH OF NO OVERLAP

Each Owner with 10% or greater financial interest must complete and sign.

License Type:

X Retail Store

Co-Located Medical and Retail Store

I declare that as applicant, I have no overlapping partner(s), investor(s) or immediate family member(s) of a partner(s) or investor(s) (affiliate or affiliate entity) with another application and that no application is an affiliate or affiliate entity with another application.

Authorized Signature:	Title (owner, manager, director, etc.)	% Ownership:
A	owner	100%
Printed Name:	Business (dba):	Date:
Alaameen Abdool	NA	June-8-2022

STATE OF Colorado) COUNTY OF Mesa)

Subscribed and sworn to before me this _ 8 _ day of _ une _

Notary Public Signature

______ day of _______, 20<u>2</u>2 My Commission Expires: _______

DANICA SHANTAY PEET NOTARY PUBLIC STATE OF COLORADO NOTARY ID 20204002781 MY COMMISSION EXPIRES JANUARY 22, 2024