



## Massachusetts Cannabis Control Commission

### Marijuana Retailer

#### General Information:

License Number: MR283075  
Original Issued Date: 08/11/2020  
Issued Date: 07/15/2021  
Expiration Date: 08/11/2022

### ABOUT THE MARIJUANA ESTABLISHMENT

Business Legal Name: Southcoast Apothecary, LLC

Phone Number: 646-661-7600  
Email Address: fperullo@awholdings.com

Business Address 1: 115 Coggeshall Street  
Business City: New Bedford Business State: MA Business Zip Code: 02746  
Business Address 2:  
Mailing Address 1: 500 Totten Pond Road  
Mailing City: Waltham Mailing State: MA Mailing Zip Code: 02451  
Mailing Address 2:

### CERTIFIED DISADVANTAGED BUSINESS ENTERPRISES (DBES)

Certified Disadvantaged Business Enterprises (DBEs): Not a DBE

### PRIORITY APPLICANT

Priority Applicant: no  
Priority Applicant Type: Not a Priority Applicant  
Economic Empowerment Applicant Certification Number:  
RMD Priority Certification Number:

### RMD INFORMATION

Name of RMD:  
Department of Public Health RMD Registration Number:  
Operational and Registration Status:  
To your knowledge, is the existing RMD certificate of registration in good standing?:  
If no, describe the circumstances below:

### PERSONS WITH DIRECT OR INDIRECT AUTHORITY

Person with Direct or Indirect Authority 1

Percentage Of Ownership: Percentage Of Control:

**Role:** Executive / Officer                      **Other Role:** Chief Executive Officer

**First Name:** Andrea                      **Last Name:** Cabral                      **Suffix:**

**Gender:** Female                      **User Defined Gender:**

**What is this person's race or ethnicity?:** Black or African American (of African Descent, African American, Nigerian, Jamaican, Ethiopian, Haitian, Somali)

**Specify Race or Ethnicity:**

**Person with Direct or Indirect Authority 2**

**Percentage Of Ownership:**                      **Percentage Of Control:** 100

**Role:** Executive / Officer                      **Other Role:** Chief Operating Officer and Sole Member

**First Name:** Francis                      **Last Name:** Perullo                      **Suffix:**

**Gender:** Male                      **User Defined Gender:**

**What is this person's race or ethnicity?:** White (German, Irish, English, Italian, Polish, French)

**Specify Race or Ethnicity:**

**Person with Direct or Indirect Authority 3**

**Percentage Of Ownership:**                      **Percentage Of Control:**

**Role:** Executive / Officer                      **Other Role:** Chief Financial Officer

**First Name:** Steven                      **Last Name:** Rohlfing                      **Suffix:**

**Gender:** Male                      **User Defined Gender:**

**What is this person's race or ethnicity?:** White (German, Irish, English, Italian, Polish, French)

**Specify Race or Ethnicity:**

**Person with Direct or Indirect Authority 4**

**Percentage Of Ownership:**                      **Percentage Of Control:**

**Role:** Manager                      **Other Role:** Manager of applicant's parent company, Ascend Wellness Holdings

**First Name:** Emily                      **Last Name:** Paxhia                      **Suffix:**

**Gender:** Female                      **User Defined Gender:**

**What is this person's race or ethnicity?:** Decline to Answer

**Specify Race or Ethnicity:**

**Person with Direct or Indirect Authority 5**

**Percentage Of Ownership:**                      **Percentage Of Control:**

**Role:** Manager                      **Other Role:** Manager of applicant's parent company, Ascend Wellness Holdings

**First Name:** Christopher                      **Last Name:** Leavy                      **Suffix:**

**Gender:** Male                      **User Defined Gender:**

**What is this person's race or ethnicity?:** White (German, Irish, English, Italian, Polish, French)

**Specify Race or Ethnicity:**

**Person with Direct or Indirect Authority 6**

**Percentage Of Ownership:**                      **Percentage Of Control:**

**Role:** Manager                      **Other Role:** Manager of applicant's parent company, Ascend Wellness Holdings

**First Name:** Scott                      **Last Name:** Swid                      **Suffix:**

**Gender:** Male                      **User Defined Gender:**

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

#### ENTITIES WITH DIRECT OR INDIRECT AUTHORITY

##### Entity with Direct or Indirect Authority 1

Percentage of Control: 100

Percentage of Ownership:

100

Entity Legal Name: Ascend Wellness Holdings, LLC.

Entity DBA: The applicant Southcoast Apothecary, LLC will do business as "Ascend"

DBA City: New Bedford

Entity Description: Sole member of the applicant Southcoast Apothecary, LLC

Foreign Subsidiary Narrative:

Entity Phone:

Entity Email:

Entity Website:

Entity Address 1:

Entity Address 2:

Entity City:

Entity State:

Entity Zip Code:

Entity Mailing Address 1:

Entity Mailing Address 2:

Entity Mailing City:

Entity Mailing State:

Entity Mailing Zip Code:

Relationship Description: Ascend Wellness Holdings, LLC ("Ascend") is the parent company and sole member of the applicant Southcoast Apothecary, LLC ("Southcoast").

#### CLOSE ASSOCIATES AND MEMBERS

No records found

#### CAPITAL RESOURCES - INDIVIDUALS

No records found

#### CAPITAL RESOURCES - ENTITIES

##### Entity Contributing Capital 1

Entity Legal Name: Ascend Wellness Holdings, LLC (formerly known as Ascend Group Partners, LLC)

Entity DBA:

Email: fperullo@awholdings.com

Phone: 617-724-5844

Address 1: 500 Totten Pond Road

Address 2:

City: Waltham

State: MA

Zip Code: 02451

Types of Capital: Monetary/Equity

Other Type of Capital:

Total Value of Capital Provided: \$4569537.22

Percentage of Initial Capital: 100

Capital Attestation: Yes

#### BUSINESS INTERESTS IN OTHER STATES OR COUNTRIES

##### Business Interest in Other State 1

Business Interest of an Owner or the Marijuana Establishment: Business Interest of an Owner

Owner First Name:

Owner Last Name:

Owner Suffix:

Entity Legal Name: Revolution Cannabis - Barry, LLC

Entity DBA: Ascend Illinois

Entity Description: Medical Cannabis Cultivation Center

Entity Phone:

617-721-5844

Entity Email:

fperullo@awholdings.com

Entity Website:

Entity Address 1: 1 310th Avenue

Entity Address 2:

Entity City: Barry

Entity State: IL

Entity Zip Code: 62312

Entity Country: USA

Entity Mailing Address 1: 1 310th Avenue

Entity Mailing Address 2:

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|                            |                          |                                |                             |
|----------------------------|--------------------------|--------------------------------|-----------------------------|
| Entity Mailing City: Barry | Entity Mailing State: IL | Entity Mailing Zip Code: 62312 | Entity Mailing Country: USA |
|----------------------------|--------------------------|--------------------------------|-----------------------------|

Business Interest in Other State 2

|   |                                       |                                |                             |
|---|---------------------------------------|--------------------------------|-----------------------------|
| Business Interest of an Owner or the Marijuana Establishment: Business Interest of an Owner |                                       |                                |                             |
| Owner First Name:   | Owner Last Name:                      | Owner Suffix:                  |                             |
| Entity Legal Name: HealthCentral, LLC   |                                       | Entity DBA:                    |                             |
| Entity Description: Registered Medical Cannabis Dispensing Organization                     |                                       |                                |                             |
| Entity Phone: 617-721-5844  | Entity Email: fperullo@awholdings.com | Entity Website:                |                             |
| Entity Address 1: 628 East Adams Street   |                                       | Entity Address 2:              |                             |
| Entity City: Springfield  | Entity State: IL                      | Entity Zip Code: 62701         | Entity Country: USA         |
| Entity Mailing Address 1: 628 East Adams Street   |                                       | Entity Mailing Address 2:      |                             |
| Entity Mailing City: Springfield  | Entity Mailing State: IL              | Entity Mailing Zip Code: 62701 | Entity Mailing Country: USA |

Business Interest in Other State 3

|   |                                       |                                |                             |
|---|---------------------------------------|--------------------------------|-----------------------------|
| Business Interest of an Owner or the Marijuana Establishment: Business Interest of an Owner |                                       |                                |                             |
| Owner First Name:   | Owner Last Name:                      | Owner Suffix:                  |                             |
| Entity Legal Name: MOCA, LLC  |                                       | Entity DBA:                    |                             |
| Entity Description: Medical and adult use marijuana establishment                           |                                       |                                |                             |
| Entity Phone: 617-721-5844  | Entity Email: fperullo@awholdings.com | Entity Website:                |                             |
| Entity Address 1: 2847 W Fullerton Avenue   |                                       | Entity Address 2:              |                             |
| Entity City: Chicago  | Entity State: IL                      | Entity Zip Code: 60647         | Entity Country: USA         |
| Entity Mailing Address 1: 2847 W Fullerton Avenue   |                                       | Entity Mailing Address 2:      |                             |
| Entity Mailing City: Chicago  | Entity Mailing State: IL              | Entity Mailing Zip Code: 60647 | Entity Mailing Country: USA |

Business Interest in Other State 4

|   |                                       |                                |                             |
|---|---------------------------------------|--------------------------------|-----------------------------|
| Business Interest of an Owner or the Marijuana Establishment: Business Interest of an Owner |                                       |                                |                             |
| Owner First Name:   | Owner Last Name:                      | Owner Suffix:                  |                             |
| Entity Legal Name: FPAW Michigan LLC  |                                       | Entity DBA:                    |                             |
| Entity Description: Medical and Adult Use Marijuana Cultivation and Dispensing              |                                       |                                |                             |
| Entity Phone: 617-721-5844  | Entity Email: fperullo@awholdings.com | Entity Website:                |                             |
| Entity Address 1: 24363 Grand River   |                                       | Entity Address 2:              |                             |
| Entity City: Detroit  | Entity State: MI                      | Entity Zip Code: 48219         | Entity Country: USA         |
| Entity Mailing Address 1: 24363 Grand River   |                                       | Entity Mailing Address 2:      |                             |
| Entity Mailing City: Detroit  | Entity Mailing State: MI              | Entity Mailing Zip Code: 48219 | Entity Mailing Country: USA |

Business Interest in Other State 5

|   |                  |                      |  |
|---|------------------|----------------------|--|
| Business Interest of an Owner or the Marijuana Establishment: Business Interest of an Owner |                  |                      |  |
| Owner First Name:   | Owner Last Name: | Owner Suffix:        |  |
| Entity Legal Name: Ascend Ohio, LLC   |                  | Entity DBA: FKA BCCO |  |



|   |   |  |                                       |
|---|---|--|---------------------------------------|
| <b>Entity Description:</b> Medical Dispensary       |   |  |                                       |
| <b>Entity Phone:</b><br>617-721-5844                | <b>Entity Email:</b><br>fperullo@awholdings.com | <b>Entity Website:</b>                   |                                       |
| <b>Entity Address 1:</b> 3560 Dolson Ct. NW         |   | <b>Entity Address 2:</b>                 |                                       |
| <b>Entity City:</b> Carroll                         | <b>Entity State:</b> OH                         | <b>Entity Zip Code:</b> 43112            | <b>Entity Country:</b> USA            |
| <b>Entity Mailing Address 1:</b> 3560 Dolson Ct. NW |   | <b>Entity Mailing Address 2:</b>         |                                       |
| <b>Entity Mailing City:</b> Carroll                 | <b>Entity Mailing State:</b> OH                 | <b>Entity Mailing Zip Code:</b><br>43112 | <b>Entity Mailing Country:</b><br>USA |

#### Business Interest in Other State 6

**Business Interest of an Owner or the Marijuana Establishment:** Business Interest of an Owner

|   |   |  |                                       |
|---|---|--|---------------------------------------|
| <b>Owner First Name:</b>                          | <b>Owner Last Name:</b>                         | <b>Owner Suffix:</b>                     |                                       |
| <b>Entity Legal Name:</b> Hemma, LLC              |   | <b>Entity DBA:</b>                       |                                       |
| <b>Entity Description:</b> Medical Cultivation    |   |  |                                       |
| <b>Entity Phone:</b><br>617-721-5844              | <b>Entity Email:</b><br>fperullo@awholdings.com | <b>Entity Website:</b>                   |                                       |
| <b>Entity Address 1:</b> 100 Edison Drive         |   | <b>Entity Address 2:</b>                 |                                       |
| <b>Entity City:</b> Monroe                        | <b>Entity State:</b> OH                         | <b>Entity Zip Code:</b> 45044            | <b>Entity Country:</b> USA            |
| <b>Entity Mailing Address 1:</b> 100 Edison Drive |   | <b>Entity Mailing Address 2:</b>         |                                       |
| <b>Entity Mailing City:</b> Monroe                | <b>Entity Mailing State:</b> OH                 | <b>Entity Mailing Zip Code:</b><br>45044 | <b>Entity Mailing Country:</b><br>USA |

#### Business Interest in Other State 7

**Business Interest of an Owner or the Marijuana Establishment:** Business Interest of an Owner

|   |   |  |                                       |
|---|---|--|---------------------------------------|
| <b>Owner First Name:</b>                                | <b>Owner Last Name:</b>                         | <b>Owner Suffix:</b>                     |                                       |
| <b>Entity Legal Name:</b> Ascend New Jersey, LLC        |   | <b>Entity DBA:</b>                       |                                       |
| <b>Entity Description:</b> Alternative Treatment Center |   |  |                                       |
| <b>Entity Phone:</b><br>617-721-5844                    | <b>Entity Email:</b><br>fperullo@awholdings.com | <b>Entity Website:</b>                   |                                       |
| <b>Entity Address 1:</b> 395 Bloomfield Ave             |   | <b>Entity Address 2:</b>                 |                                       |
| <b>Entity City:</b> Montclair                           | <b>Entity State:</b> NJ                         | <b>Entity Zip Code:</b> 07042            | <b>Entity Country:</b> USA            |
| <b>Entity Mailing Address 1:</b> 395 Bloomfield Ave     |   | <b>Entity Mailing Address 2:</b>         |                                       |
| <b>Entity Mailing City:</b><br>Montclair                | <b>Entity Mailing State:</b> NJ                 | <b>Entity Mailing Zip Code:</b><br>07042 | <b>Entity Mailing Country:</b><br>USA |

#### DISCLOSURE OF INDIVIDUAL INTERESTS

##### Individual 1

|  |  |                |
|--|--|----------------|
| <b>First Name:</b> Andrea                          | <b>Last Name:</b> Cabral                   | <b>Suffix:</b> |
| <b>Marijuana Establishment Name:</b> MassGrow, LLC | <b>Business Type:</b> Marijuana Cultivator |                |
| <b>Marijuana Establishment City:</b> Athol         | <b>Marijuana Establishment State:</b> MA   |                |

##### Individual 2

|   |  |                |
|---|--|----------------|
| <b>First Name:</b> Andrea                             | <b>Last Name:</b> Cabral                 | <b>Suffix:</b> |
| <b>Marijuana Establishment Name:</b> Ascend Mass, LLC | <b>Business Type:</b> Marijuana Retailer |                |
| <b>Marijuana Establishment City:</b> Newton           | <b>Marijuana Establishment State:</b> MA |                |

##### Individual 3

First Name: Francis Last Name: Perullo Suffix:

Marijuana Establishment Name: MassGrow, LLC Business Type: Marijuana Cultivator

Marijuana Establishment City: Athol Marijuana Establishment State: MA

#### Individual 4

First Name: Francis Last Name: Perullo Suffix:

Marijuana Establishment Name: Ascend Mass, LLC Business Type: Marijuana Retailer

Marijuana Establishment City: Newton Marijuana Establishment State: MA

#### Individual 5

First Name: Steven Last Name: Rohlfing Suffix:

Marijuana Establishment Name: MassGrow, LLC Business Type: Marijuana Cultivator

Marijuana Establishment City: Athol Marijuana Establishment State: MA

#### Individual 6

First Name: Steven Last Name: Rohlfing Suffix:

Marijuana Establishment Name: Ascend Mass, LLC Business Type: Marijuana Retailer

Marijuana Establishment City: Newton Marijuana Establishment State: MA

#### Individual 7

First Name: Scott Last Name: Swid Suffix:

Marijuana Establishment Name: Ascend Mass, LLC Business Type: Marijuana Retailer

Marijuana Establishment City: Newton Marijuana Establishment State: MA

#### Individual 8

First Name: Christopher Last Name: Leavy Suffix:

Marijuana Establishment Name: Ascend Mass, LLC Business Type: Marijuana Retailer

Marijuana Establishment City: Newton Marijuana Establishment State: MA

#### Individual 9

First Name: Emily Last Name: Paxhia Suffix:

Marijuana Establishment Name: Ascend Mass, LLC Business Type: Marijuana Retailer

Marijuana Establishment City: Newton Marijuana Establishment State: MA

### MARIJUANA ESTABLISHMENT PROPERTY DETAILS

Establishment Address 1: 115 Coggeshall Street

Establishment Address 2:

Establishment City: New Bedford Establishment Zip Code: 02746

Approximate square footage of the establishment: 3600 How many abutters does this property have?: 6

Have all property abutters been notified of the intent to open a Marijuana Establishment at this address?: Yes

### HOST COMMUNITY INFORMATION

Host Community Documentation:

| Document Category                         | Document Name                      | Type | ID                       | Upload Date |
|---|------------------------------------|------|--------------------------|-------------|
| Certification of Host Community Agreement | Revised HCA Certification Form.pdf | pdf  | 5e7b79c52b97cf38fa3739a9 | 03/25/2020  |

|  |   |     |                          |            |
|--|---|-----|--------------------------|------------|
| Plan to Remain<br>Compliant with Local<br>Zoning | Ascend_-_New_Bedford_-<br>_Plan_to_Remain_Compliant_with_Local_Zoning.pdf | pdf | 5e7b79f5b3c49635509e88a7 | 03/25/2020 |
| Community Outreach<br>Meeting<br>Documentation   | Revised Community Outreach Attestation Form -<br>Southcoast.pdf           | pdf | 5e84d0df2b97cf38fa37537a | 04/01/2020 |

Total amount of financial benefits accruing to the municipality as a result of the host community agreement. If the total amount is zero, please enter zero and provide documentation explaining this number.: \$1

#### PLAN FOR POSITIVE IMPACT

Plan to Positively Impact Areas of Disproportionate Impact:

| Document<br>Category           | Document Name   | Type | ID                       | Upload<br>Date |
|--------------------------------|---|------|--------------------------|----------------|
| Plan for<br>Positive<br>Impact | RFI Revised - Ascend_-_New_Bedford_-<br>_Plan_to_Positively_Impact_Areas_of_Disproportionate_Impact.pdf | pdf  | 5edf8bfe1c2dbc24d01a0dcd | 06/09/2020     |

#### ADDITIONAL INFORMATION NOTIFICATION

Notification: I understand

#### INDIVIDUAL BACKGROUND INFORMATION

##### Individual Background Information 1

Role: Other Role:  
First Name: Andrea Last Name: Cabral Suffix:  
RMD Association: Not associated with an RMD  
Background Question: yes

##### Individual Background Information 2

Role: Other Role:  
First Name: Francis Last Name: Perullo Suffix:  
RMD Association: Not associated with an RMD  
Background Question: no

##### Individual Background Information 3

Role: Other Role:  
First Name: Steven Last Name: Rohlfing Suffix:  
RMD Association: Not associated with an RMD  
Background Question: no

##### Individual Background Information 4

Role: Other Role:  
First Name: Christopher Last Name: Leavy Suffix:  
RMD Association: Not associated with an RMD  
Background Question: no

##### Individual Background Information 5

|  |                                       |
|--|---------------------------------------|
| <b>Role:</b>                                       | <b>Other Role:</b>                    |
| <b>First Name:</b> Scott                           | <b>Last Name:</b> Swid <b>Suffix:</b> |
| <b>RMD Association:</b> Not associated with an RMD |                                       |
| <b>Background Question:</b> no                     |                                       |

#### Individual Background Information 6

|  |   |
|--|---|
| <b>Role:</b>                                       | <b>Other Role:</b>                      |
| <b>First Name:</b> Emily                           | <b>Last Name:</b> Paxhia <b>Suffix:</b> |
| <b>RMD Association:</b> Not associated with an RMD |   |
| <b>Background Question:</b> no                     |   |

#### ENTITY BACKGROUND CHECK INFORMATION

##### Entity Background Check Information 1

|  |   |
|--|---|
| <b>Role:</b> Parent Company  | <b>Other Role:</b>  |
| <b>Entity Legal Name:</b> Ascend Wellness Holdings, LLC  | <b>Entity DBA:</b>  |
| <b>Entity Description:</b> Capital contributor and sole member of the applicant Southcoast Apothecary, LLC |   |
| <b>Phone:</b> 617-724-5844   | <b>Email:</b> fperullo@awholdings.com                                       |
| <b>Primary Business Address 1:</b> 500 Totten Pond Road  | <b>Primary Business Address 2:</b>  |
| <b>Primary Business City:</b> Waltham  | <b>Primary Business State:</b> MA <b>Principal Business Zip Code:</b> 02451 |
| <b>Additional Information:</b>   |   |

#### MASSACHUSETTS BUSINESS REGISTRATION

##### Required Business Documentation:

| Document Category  | Document Name   | Type | ID                       | Upload Date |
|--|---|------|--------------------------|-------------|
| Secretary of Commonwealth - Certificate of Good Standing | SoC Cert of Good Standing Southcoast Apothecary 10.10.19.pdf            | pdf  | 5db75da3b35b62300f5d9ad6 | 10/28/2019  |
| Articles of Organization                                 | Southcoast Apothecary - Cert. of Organization.pdf                       | pdf  | 5db75da473225f2fcd76651f | 10/28/2019  |
| Bylaws   | Southcoast Apothecary - OA.pdf  | pdf  | 5db75da6c9aebd2b498aa02e | 10/28/2019  |
| Department of Revenue - Certificate of Good standing     | Southcoast Apothecary - Cert. of Good Standing DOR.pdf                  | pdf  | 5db89921cdbfc22fc658dd17 | 10/29/2019  |
| Secretary of Commonwealth - Certificate of Good Standing | Revised Secretary of the Commonwealth Business Summary.pdf              | pdf  | 5e7bae512eba6d38ef16352a | 03/25/2020  |
| Secretary of Commonwealth - Certificate of Good Standing | MA Dept of Unemployment Assistance Cert of Good Standing - Mar 2020.pdf | pdf  | 5e84ae4c1cdd2e3910a523f4 | 04/01/2020  |
| Secretary of Commonwealth - Certificate of Good Standing | DBA Certificate from New Bedford.pdf                                    | pdf  | 5edf8bb02d9da4181de9e0da | 06/09/2020  |

##### Certificates of Good Standing:

| Document Category  | Document Name        | Type | ID                       | Upload Date |
|--|----------------------|------|--------------------------|-------------|
| Department of Unemployment Assistance - Certificate of Good standing | Southcoast - DUA.pdf | pdf  | 60881b6985675207abc77da3 | 04/27/2021  |

|  |  |      |                          |            |
|--|--|------|--------------------------|------------|
| Secretary of Commonwealth - Certificate of Good Standing | IMG_6627.jpeg                                      | jpeg | 6099403185675207abc7ac3c | 05/10/2021 |
| Department of Revenue - Certificate of Good standing     | Southcoast Certificate of Good Standing 052021.pdf | pdf  | 60ac02ee874c4807a95b2531 | 05/24/2021 |

**Massachusetts Business Identification Number:** 001370265

**Doing-Business-As Name:** Ascend

**DBA Registration City:** New Bedford

### BUSINESS PLAN

Business Plan Documentation:

| Document Category            | Document Name   | Type | ID                       | Upload Date |
|------------------------------|---|------|--------------------------|-------------|
| Plan for Liability Insurance | Ascend_-_New_Bedford_-_Plan_for_Obtaining_Liability_Insurance.pdf | pdf  | 5e7baebf554b033566cce8c4 | 03/25/2020  |
| Business Plan                | Ascend_-_New_Bedford_-_Business_Plan.pdf                          | pdf  | 5e7bb1e01cdd2e3910a50d39 | 03/25/2020  |
| Proposed Timeline            | Southcoast Apothecary - Timeline.pdf                              | pdf  | 608820a9e54b280786bae712 | 04/27/2021  |

### OPERATING POLICIES AND PROCEDURES

Policies and Procedures Documentation:

| Document Category                              | Document Name  | Type | ID                       | Upload Date |
|--|--|------|--------------------------|-------------|
| Restricting Access to age 21 and older         | SouthCoast - Plan for Restricting Access to Age 21 and Older.pdf | pdf  | 609a9d8f031c12076ccf3d5b | 05/11/2021  |
| Security plan                                  | SouthCoast - Security Plan.pdf                                   | pdf  | 609a9d9a3bbe600765b4e4e6 | 05/11/2021  |
| Prevention of diversion                        | SouthCoast - Prevention of Diversion.pdf                         | pdf  | 609a9db409011007a03d21dc | 05/11/2021  |
| Storage of marijuana                           | SouthCoast - Storage of Marijuana.pdf                            | pdf  | 609a9dc368436d078d6b3bf4 | 05/11/2021  |
| Transportation of marijuana                    | SouthCoast - Transportation of Marijuana.pdf                     | pdf  | 609a9dd33fd8b2075df9e85b | 05/11/2021  |
| Inventory procedures                           | SouthCoast - Inventory Procedures.pdf                            | pdf  | 609a9de468436d078d6b3bfa | 05/11/2021  |
| Quality control and testing                    | SouthCoast - Quality Control and Testing.pdf                     | pdf  | 609a9df7954bd3079c69161a | 05/11/2021  |
| Dispensing procedures                          | SouthCoast - Dispensing Procedures.pdf                           | pdf  | 609a9e013bbe600765b4e4f4 | 05/11/2021  |
| Personnel policies including background checks | SouthCoast - Personnel Policies Including Background Checks.pdf  | pdf  | 609a9e0a8ecb05074fe6b4dd | 05/11/2021  |
| Record Keeping procedures                      | SouthCoast - Recordkeeping Procedures.pdf                        | pdf  | 609a9e17d91389075ed3a8a0 | 05/11/2021  |
| Maintaining of financial records               | SouthCoast - Maintaining of Financial Records.pdf                | pdf  | 609a9e22247e180786c96ea2 | 05/11/2021  |
| Qualifications and training                    | SouthCoast - Qualifications and Training.pdf                     | pdf  | 609a9e36e54b280786bb1c16 | 05/11/2021  |
| Energy Compliance Plan                         | SouthCoast - Energy Compliance Plan.pdf                          | pdf  | 609a9e44954bd3079c691625 | 05/11/2021  |

### MARIJUANA RETAILER SPECIFIC REQUIREMENTS

No documents uploaded

No documents uploaded

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## ATTESTATIONS

I certify that no additional entities or individuals meeting the requirement set forth in 935 CMR 500.101(1)(b)(1) or 935 CMR 500.101(2)(c)(1) have been omitted by the applicant from any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: I Agree

I understand that the regulations stated above require an applicant for licensure to list all executives, managers, persons or entities having direct or indirect authority over the management, policies, security operations or cultivation operations of the Marijuana Establishment; close associates and members of the applicant, if any; and a list of all persons or entities contributing 10% or more of the initial capital to operate the Marijuana Establishment including capital that is in the form of land or buildings.: I Agree

I certify that any entities who are required to be listed by the regulations above do not include any omitted individuals, who by themselves, would be required to be listed individually in any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: I Agree

Notification: I Understand

I certify that any changes in ownership or control, location, or name will be made pursuant to a separate process, as required under 935 CMR 500.104(1), and none of those changes have occurred in this application.: I Agree

I certify that to the best knowledge of any of the individuals listed within this application, there are no background events that have arisen since the issuance of the establishment's final license that would raise suitability issues in accordance with 935 CMR 500.801.: I Agree

I certify that all information contained within this renewal application is complete and true.: I Agree

## ADDITIONAL INFORMATION NOTIFICATION

Notification: I Understand

## COMPLIANCE WITH POSITIVE IMPACT PLAN

### Progress or Success Goal 1

**Description of Progress or Success:** Ascend will develop a partnership with the Suffolk County Sheriff Department ("SCSD") to provide referrals of qualified applicants, with a specific focus on hiring individuals with past drug convictions, that have completed job-training and re-entry programs, are under court supervision, and who otherwise meet Ascend's criteria for employment. This initiative will be managed by the Chief Executive Officer, Human Resources Director, and Dispensary Manager. Ascend will initially measure its progress through the successful development of a partnership with SCSD. Based on the specifics of that partnership, Ascend's goal is to hire six (6) individuals from this partnership. All employees will receive significant training to reduce barriers to entry to the cannabis industry.

**Progress:** Ascend is finalizing the build out of its New Bedford facility. Once completed, it will begin the hiring process. Please see the attached letter from the Suffolk County Sheriff Department indicating its continued commitment to participating in such a program.

### Progress or Success Goal 2

**Description of Progress or Success:** Ascend will contribute 0.5% of its net revenue to the WeGrowFoundation (the "Foundation"), a fund set up by Ascend Wellness Holdings, the parent company of Ascend. It will be independently run, with its own President/CEO, Executive Director and Board. The specific organizations, businesses and individuals who might receive grants or other assistance from the Foundation will be chosen by the Foundation, based upon the purpose, goals and criteria that it, not Ascend Mass, chooses. As an operationally independent charitable organization, the Foundation, through grants and other giving, will support eligible organizations and programs that provide services to: 1. Past or present residents of the geographic "areas of disproportionate impact," which have been denied by the Commission and identified in its Guidance for Identifying Areas of Disproportionate Impact; 2. Commission-designated Economic Empowerment Priority applicants; 3. Commission-designated Social Equity Program participants; 4. Massachusetts residents who have past drug convictions; and 5. Massachusetts residents with parents or spouses who have drug convictions are classified as areas of disproportionate impact. **Progress:** Ascend is not yet operational and, as such, cannot yet contribute a portion of its net revenue. However, the Foundation has made great strides to develop its inaugural board of directors as evidenced in the attached corporate filing.

## COMPLIANCE WITH DIVERSITY PLAN

### Diversity Progress or Success 1

**Description of Progress or Success:** Hire a staff comprised of at least 45 percent of individuals who are minorities, women, veterans, people with disabilities, and people who identify as LGBTQ+. **Progress:** Ascend has not yet started hiring for its New Bedford facility at this time. When it begins hiring, it will seek to meet the program goals in the attached plan.

#### HOURS OF OPERATION

|                         |                       |
|-------------------------|-----------------------|
| Monday From: 9:00 AM    | Monday To: 9:00 PM    |
| Tuesday From: 9:00 AM   | Tuesday To: 9:00 PM   |
| Wednesday From: 9:00 AM | Wednesday To: 9:00 PM |
| Thursday From: 9:00 AM  | Thursday To: 9:00 PM  |
| Friday From: 9:00 AM    | Friday To: 9:00 PM    |
| Saturday From: 9:00 AM  | Saturday To: 9:00 PM  |
| Sunday From: 9:00 AM    | Sunday To: 9:00 PM    |

## Host Community Agreement Certification Form

The applicant and contracting authority for the host community must complete each section of this form before uploading it to the application. Failure to complete a section will result in the application being deemed incomplete. Instructions to the applicant and/or municipality appear in italics. Please note that submission of information that is "misleading, incorrect, false, or fraudulent" is grounds for denial of an application for a license pursuant to 935 CMR 500.400(1).

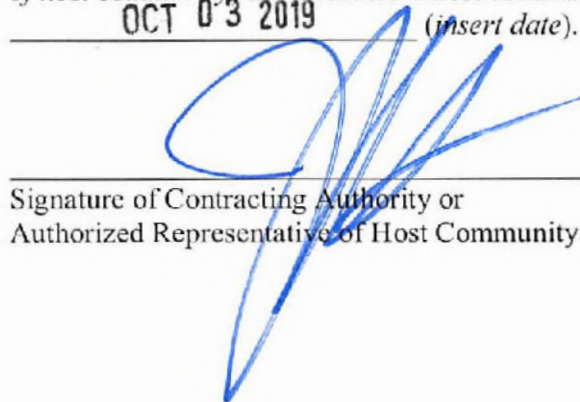
### Applicant

I, Stephen S. Brown, Esq., (insert name) certify as an authorized representative of Southcoast Apothecary, LLC (insert name of applicant) that the applicant has executed a host community agreement with the City of New Bedford (insert name of host community) pursuant to G.L.c. 94G § 3(d) on October 3, 2019 (insert date).

  
Signature of Authorized Representative of Applicant

### Host Community

I, JONATHAN F. MITCHELL, (insert name) certify that I am the contracting authority or have been duly authorized by the contracting authority for THE CITY OF NEW BEDFORD (insert name of host community) to certify that the applicant and THE CITY OF NEW BEDFORD (insert name of host community) has executed a host community agreement pursuant to G.L.c. 94G § 3(d) on OCT 03 2019 (insert date).

  
Signature of Contracting Authority or  
Authorized Representative of Host Community





March 12, 2020

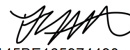
Cannabis Control Commission  
Union Station, 2 Washington Square  
Worcester, MA 01604  
cannabislicensing@cccmass.com

Re: Explanation of Signature on HCA Certification Form.

To Whom it May Concern:

Please note that the Host Community Agreement (“HCA”) Certification Form uploaded as part of this application was executed by Mr. Stephen S. Brown Esq. At the time of the execution of the HCA with the City of New Bedford, Attorney Brown served as outside counsel to Southcoast Apothecary, LLC and was authorized to execute this document. Attorney Brown no longer serves in that role and does not otherwise have any control (direct or indirect) over or financial interest in Southcoast Apothecary, LLC.

Sincerely,

DocuSigned by:  
  
4145BE165974490...

Francis Perullo



### **Plan to Remain Compliant with Local Zoning**

The City of New Bedford (the “City”) amended its Zoning Ordinance at a City Council hearing on September 13, 2018, to allow the dispensing of marijuana for adult-use in the Industrial A (IA), B (IB) and C (IC) zoning districts. Ascend will at all times remain compliant at all times with the local zoning requirements set forth in the City of New Bedford's Zoning Code.

Ascend is proposing to develop and operate a Marijuana Retailer Establishment at 115 Coggeshall Street, New Bedford, MA 02746. This site is located in the Industrial B zoning district, which permits the operation of a marijuana establishment, specifically a marijuana retail, facility pursuant to Section 4131B(i) of the New Bedford Zoning Ordinance (the “Ordinance”), subject to the granting of a Special Permit from the Planning Board (the “Board”).

Ascend has discussed its marijuana retail facility with City officials, including the special committee on cannabis regulation, Mayor’s office, planning department, building department, police department, and health department and has appeared before the City Council and entered into a host community agreement with the City. Ascend appeared before the City Council on September 23, 2019 and September 26, 2019.

Additionally, the Ordinance requires that Ascend be in receipt of a Provisional License from the Commission prior to applying for a Special Permit from the Board. Accordingly, Ascend will apply for, and diligently pursue, a Special Permit from the Board in the event that it is issued a Provisional License from the Commission. Ascend plans to continue to work with officials from the City to ensure the operations will have a positive impact on the community and will work diligently to obtain all necessary approvals and permitting. Finally, Ascend hereby submits that it will continue to comply with all local and state requirements

## Community Outreach Meeting Attestation Form

The applicant must complete each section of this form and initial each page before uploading it to the application. Failure to complete a section will result in the application being deemed incomplete. Instructions to the applicant appear in italics. Please note that submission of information that is “misleading, incorrect, false, or fraudulent” is grounds for denial of an application for a license pursuant to 935 CMR 500.400(1).

I, Frank Perullo, (*insert name*) attest as an authorized representative of Southcoast Apothecary, LLC (*insert name of applicant*) that the applicant has complied with the requirements of 935 CMR 500 and the guidance for licensed applicants on community outreach, as detailed below.

1. The Community Outreach Meeting was held on October 17, 2019 (*insert date*).
2. A copy of a notice of the time, place, and subject matter of the meeting, including the proposed address of the Marijuana Establishment, was published in a newspaper of general circulation in the city or town on October 9, 2019 (*insert date*), which was at least seven calendar days prior to the meeting. A copy of the newspaper notice is attached as Attachment A (*please clearly label the newspaper notice in the upper right hand corner as Attachment A and upload it as part of this document*).
3. A copy of the meeting notice was also filed on October 7, 2019 (*insert date*) with the city or town clerk, the planning board, the contracting authority for the municipality, and local licensing authority for the adult use of marijuana, if applicable. A copy of the municipal notice is attached as Attachment B (*please clearly label the municipal notice in the upper right-hand corner as Attachment B and upload it as part of this document*).
4. Notice of the time, place and subject matter of the meeting, including the proposed address of the Marijuana Establishment, was mailed on October 7, 2019 (*insert date*), which was at least seven calendar days prior to the community outreach meeting to abutters of the proposed address of the Marijuana Establishment, and residents within 300 feet of the property line of the petitioner as they appear on the most recent applicable tax list, notwithstanding that the land of any such owner is located in another city or town. A copy of one of the notices sent to abutters and parties of interest as described in this section is attached as Attachment C (*please clearly label the municipal notice in the upper right hand corner as Attachment C and upload it as part of this document; please only include a copy of one notice and please black out the name and the address of the addressee*).

5. Information was presented at the community outreach meeting including:
  - a. The type(s) of Marijuana Establishment to be located at the proposed address;
  - b. Information adequate to demonstrate that the location will be maintained securely;
  - c. Steps to be taken by the Marijuana Establishment to prevent diversion to minors;
  - d. A plan by the Marijuana Establishment to positively impact the community; and
  - e. Information adequate to demonstrate that the location will not constitute a nuisance as defined by law.
6. Community members were permitted to ask questions and receive answers from representatives of the Marijuana Establishment.

**Attachment A**  
**Newspaper Notice**

# Classified MarketPlace

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## 979-4408

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**COMMONWEALTH OF MASSACHUSETTS**  
**DEPARTMENT OF THE TOL COURT**  
**CRIME & JUSTICE**  
**Section A: Amari**  
and the persons entitled to the right of the State, including the State, the U.S.C. 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 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2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2

**Attachment B**  
**Municipal Notice**

Law Office of

Stephen S. Brown, LLC



P.O. Box 50055  
New Bedford, MA 02745  
Telephone: (508) 999-4800  
Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

New Bedford City Clerk  
133 William Street  
Room 118  
New Bedford, MA 02740

Monday, October 7, 2019

Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02740  
October 17, 2019, at 6:30 p.m.

CITY CLERKS OFFICE  
NEW BEDFORD, MA  
2019 OCT -7 A 9:57  
CITY CLERK

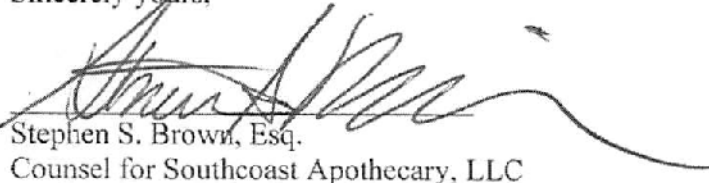
Dear New Bedford City Clerk:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

**Please post a copy of the included notice at City Hall.**

Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,



Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board



SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

New Bedford City Clerk  
133 William Street  
Room 118  
New Bedford, MA 02740

CITY CLERKS OFFICE  
NEW BEDFORD, MA  
2019 OCT - 1 AM 10:57  
CITY CLERK

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
**SOUTHCOAST APOTHECARY, LLC**

Notice is hereby given that a community outreach meeting for Southcoast Apothecary, LLC ("Southcoast")'s proposed Adult Use Marijuana Establishment is scheduled for Thursday, October 17, 2019, at the Whaler Inn and Suites, 500 Hathaway Road, New Bedford, MA 02740, at 6:30 p.m. The proposed Marijuana Retailer is anticipated to be located at 115 Coggeshall Street, New Bedford, MA 02745 (the "Property"). Community Members and members of the public are encouraged to attend, and will be permitted to ask questions and receive answers from representatives of Southcoast.

A copy of this notice is on file with the office of the Town Clerk, City Council, City Mayor, Planning Board, Board of Health, and Licensing Board at New Bedford City Hall, 133 William Street, New Bedford, Massachusetts, 02740. A copy of this notice was published in a newspaper of general circulation and mailed at least seven (7) calendar days prior to the community outreach meeting to abutters of the Property, owners of land directly opposite the Property on any public or private street or way, and abutters to the abutters within three hundred (300) feet of the property line of the Property as they appear on the most recent applicable tax list, notwithstanding that the land of any such owner is located in another city or town.



Law Office of

Stephen S. Brown, LLC



P.O. Box 50055  
New Bedford, MA 02745  
Telephone: (508) 999-4800  
Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

Mayor's Office of the City of New Bedford  
133 William Street  
Room 311  
New Bedford, MA 02740

OCT 7 2019 AM 10:05  
CITY OF NEW BEDFORD

MAYOR'S OFFICE

Monday, October 7, 2019

Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02740  
October 17, 2019, at 6:30 p.m.

Dear Office of New Bedford Mayor, Jon F. Mitchell:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,

Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board

SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

Mayor's Office of the New Bedford  
133 William Street  
Room 311  
New Bedford, MA 02740

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
**SOUTHCOAST APOTHECARY, LLC**

Notice is hereby given that a community outreach meeting for Southcoast Apothecary, LLC ("Southcoast")'s proposed Adult Use Marijuana Establishment is scheduled for **Thursday, October 17, 2019, at the Whaler Inn and Suites, 500 Hathaway Road, New Bedford, MA 02740, at 6:30 p.m.** The proposed Marijuana Retailer is anticipated to be located at **115 Coggeshall Street, New Bedford, MA 02745** (the "Property"). Community Members and members of the public are encouraged to attend, and will be permitted to ask questions and receive answers from representatives of Southcoast.

A copy of this notice is on file with the office of the Town Clerk, City Council, City Mayor, Planning Board, Board of Health, and Licensing Board at New Bedford City Hall, 133 William Street, New Bedford, Massachusetts, 02740. A copy of this notice was published in a newspaper of general circulation and mailed at least seven (7) calendar days prior to the community outreach meeting to abutters of the Property, owners of land directly opposite the Property on any public or private street or way, and abutters to the abutters within three hundred (300) feet of the property line of the Property as they appear on the most recent applicable tax list, notwithstanding that the land of any such owner is located in another city or town.



Law Office of

Stephen S. Brown, LLC



P.O. Box 50055  
New Bedford, MA 02745  
Telephone: (508) 999-4800  
Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

Office of the Planning Board for the City of New Bedford  
133 William Street  
Room 303  
New Bedford, MA 02740

Monday, October 7, 2019

Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02745  
October 17, 2019, at 6:30 p.m.

Dear Planning Board for the City of New Bedford:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,

---

Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board

OCT 07 2019

SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

Office of the Planning Board for the City of New Bedford  
133 William Street  
Room 303  
New Bedford, MA 02740

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
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Law Office of

Stephen S. Brown, LLC



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Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

City of New Bedford Licensing Board  
133 William Street  
Room 206  
New Bedford, MA 02740

Monday, October 7, 2019

Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02745  
October 17, 2019, at 6:30 p.m.

Dear City of New Bedford Licensing Board:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,

Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board

OCT 7 REC'D  
NP

SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

City of New Bedford Licensing Board  
133 William Street  
Room 206  
New Bedford, MA 02740

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
**SOUTHCOAST APOTHECARY, LLC**

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Law Office of

Stephen S. Brown, LLC



P.O. Box 50055  
New Bedford, MA 02745  
Telephone: (508) 999-4800  
Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

City of New Bedford Health Department  
1213 Purchase Street  
New Bedford, MA 02740

Monday, October 7, 2019

Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02745  
October 17, 2019, at 6:30 p.m.

Dear City of New Bedford Health Department:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,

Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board





SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

City of New Bedford Health Department  
1213 Purchase Street  
New Bedford, MA 02740

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
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Law Office of  
Stephen S. Brown, LLC



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Telephone: (508) 999-4800  
Fax: (508) 990-0875  
Email: [steve@newbedfordlegal.net](mailto:steve@newbedfordlegal.net)

City Council Office of New Bedford  
133 William Street  
Room 215  
New Bedford, MA 02740

Monday, October 7, 2019

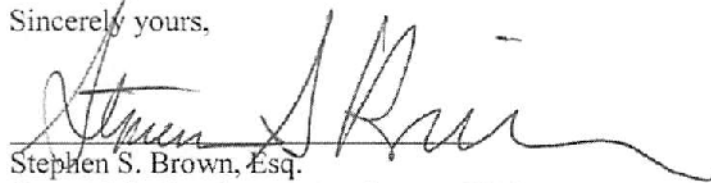
Re: **Southcoast Apothecary, LLC**  
Notice of Community Outreach Meeting  
To be held at Whaler Inn  
500 Hathaway Rd., New Bedford, MA 02740  
October 17, 2019, at 6:30 p.m.

Dear Office of City Council Office of New Bedford:

Included herewith, please find Legal Notice of Community Outreach Meeting Regarding Adult Use Marijuana Establishment Proposed by Southcoast Apothecary, LLC.

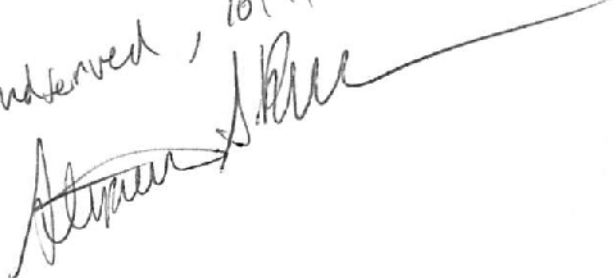
Please contact me if you have any questions or concerns regarding this matter.

Sincerely yours,



Stephen S. Brown, Esq.  
Counsel for Southcoast Apothecary, LLC

cc. Offices of New Bedford City Clerk, Mayor, City Council, Planning Board, Board of Health, Licensing Board

Handserved, 10/7/19  


SOUTHCOAST  
*APOTHECARY*

NATURAL WELLNESS & RECREATIONAL

EST. 2019

City of New Bedford City Council Office  
133 William Street  
Room 215  
New Bedford, MA 02740

**LEGAL NOTICE OF COMMUNITY OUTREACH MEETING**  
**REGARDING AN ADULT USE MARIJUANA ESTABLISHMENT PROPOSED BY**  
**SOUTHCOAST APOTHECARY, LLC**

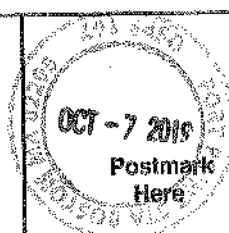
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**Attachment C**  
**Abutter Notice**

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

|   |   |
|---|---|
| USPS® ARTICLE NUMBER<br>9414 7266 9904 2138 7484 91<br>Acushnet, MA 02743   |   |
| Certified Mail Fee \$<br>Return Receipt (Hardcopy) \$<br>Return Receipt (Electronic) \$<br>Certified Mail Restricted Delivery \$<br>Postage 108969-000000 \$<br>Total Postage and Fees \$ |  |
| Sent to:  |   |
| Reference Information   |   |
| PS Form 3800, Facsimile, July 2015  |   |

|   |   |
|---|---|
| Return Receipt (Form 3811) Barcode<br><br>9414 7266 9904 2138 7484 91 | <b>COMPLETE THIS SECTION ON DELIVERY</b><br>A. Signature <input type="checkbox"/> Agent<br>X <i>Kerry Ward</i> <input type="checkbox"/> Addressee<br>B. Received by (Printed Name) C. Date of Delivery<br>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No |
| 1. Article Addressed to:<br>[Redacted]<br>867 Middle Road<br>Acushnet, MA 02743   | Reference Information<br>3. Service Type:<br><input checked="" type="checkbox"/> Certified Mail 108969-000000<br><input type="checkbox"/> Certified Mail Restricted Delivery<br>Reference Information<br>[Redacted]   |
| 2. Certified Mail (Form 3800) Article Number<br>9414 7266 9904 2138 7484 91   |   |
| PS Form 3811, Facsimile, July 2015  |   |

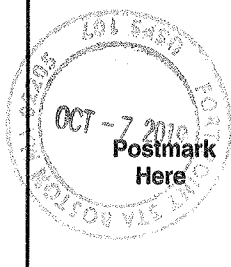
Domestic Return Receipt

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7485 52

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage \$  
Total Postage and Fees \$



Sent to: [Redacted] oration

PO Box 182571  
Columbus, OH 43218

Reference Information

Ashley Tan  
108969-000000

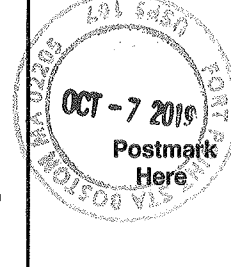
PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7484 91  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000  
Total Postage and Fees \$



Sent to:

Reference Information

PS Form 3800, Facsimile, July 2015

9414 7266 9904 2097 2095 21

TO: [Redacted]  
867 Middle Road  
Acushnet, MA 02743

SENDER: [Redacted]

REFERENCE: 108969-000000

PS Form 3800, January 2005

|                              |                      |  |
|------------------------------|----------------------|--|
| RETURN<br>RECEIPT<br>SERVICE | Postage              |  |
|                              | Certified Fee        |  |
|                              | Return Receipt Fee   |  |
|                              | Restricted Delivery  |  |
|                              | Total Postage & Fees |  |

**USPS®**  
**Receipt for**  
**Certified Mail®**

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE



9414 7266 9904 2097 2095 38

TO: [Redacted]  
867 Middle Road  
Acushnet, MA 02743

SENDER: [Redacted]

REFERENCE: 108969-000000

PS Form 3800, January 2005

|                              |                      |  |
|------------------------------|----------------------|--|
| RETURN<br>RECEIPT<br>SERVICE | Postage              |  |
|                              | Certified Fee        |  |
|                              | Return Receipt Fee   |  |
|                              | Restricted Delivery  |  |
|                              | Total Postage & Fees |  |

**USPS®**  
**Receipt for**  
**Certified Mail®**

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE



9414 7266 9904 2097 2095 83

TO: [REDACTED] LLC  
875 East Street  
Tewksbury, MA 01876-1469

SENDER: Ashley Tan

REFERENCE: 108969-000000

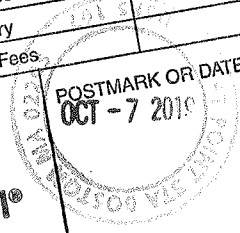
PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

|                      |  |
|----------------------|--|
| Postage              |  |
| Certified Fee        |  |
| Return Receipt Fee   |  |
| Restricted Delivery  |  |
| Total Postage & Fees |  |

USPS®  
Receipt for  
Certified Mail®

No Insurance Coverage Provided  
Do Not Use for International Mail



WALZ  
CERTIFIED  
MAILER®

FROM

WALZ

Label #1

PO Box 182571  
Columbus, OH 43218

Label #2

PO Box 182571  
Columbus, OH 43218

Label #3

Suite 3700  
Boston, 02110

**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7484 60  
PO Box 182571

Columbus, OH 43218  
Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

PS Form 3800, Facsimile, July 2015

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)



Columbus, OH 43218

Label #6 - Return Receipt Barcode (Sender's Record)



9414 7266 9904 2138 7484 63

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7484 60

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7484 63

1. Article Addressed to:

PO Box 182571  
Columbus, OH 43218

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7484 60

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

PS Form 3811, Facsimile, July 2015

Domestic Return Receipt

Thank you for using Return Receipt Service



WALZ  
CERTIFIED  
MAILER®

FROM

**WALZ**

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7484 77

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

TEAR ALONG THIS LINE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

867 Middle Road  
Acushnet, MA 02743

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7484 70

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7484 77

Certified Article Number

9414 7266 9904 2138 7484 77

SENDER'S RECORD

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7484 70

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7484 77

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

Thank you for using Return Receipt Service

WALZ  
FROM  
CERTIFIED  
MAILER®

WALZ

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

U.S. Postal Service®  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7484 84

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

TEAR ALONG THIS LINE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

867 Middle Road  
Acushnet, MA 02743

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7484 87

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7484 84

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7484 87

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7484 84

PS Form 3811, Facsimile, July 2015

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Thank you for using Return Receipt Service

Thank you for using Return Receipt Service

WALZ  
FROM  
CERTIFIED  
MAILER®

WALZ

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

PAV New Bedford  
USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7484 91  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

TEAR ALONG THIS LINE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

867 Middle Road  
Acushnet, MA 02743

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7484 94

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7484 91

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7484 94

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7484 91

PS Form 3811, Facsimile, July 2015

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
**X** ☐ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

Thank you for using Return Receipt Service

Domestic Return Receipt

WALZ  
FROM  
CERTIFIED  
MAILER®

WALZ

Label #1

115 Coggeshall Street  
New Bedford, MA 02746

Label #2

115 Coggeshall Street  
New Bedford, MA 02746

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

Label #5 (OPTIONAL)

115 Coggeshall Street  
New Bedford, MA 02746

Label #6 - Return Receipt Barcode (Sender's Record)



9590 9266 9904 2138 7485 00

# CERTIFIED MAIL® RECEIPT

Domestic Mail Only

Paul R. Rommel and Michael R. Rommel

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7485 07  
New Bedford, MA 02746

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

PS Form 3800, Facsimile, July 2015

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7485 07

FOLD AND TEAR THIS WAY

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7485 00

1. Article Addressed to:

115 Coggeshall Street  
New Bedford, MA 02746

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7485 07

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
**X** ☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

PS Form 3811, Facsimile, July 2015

Domestic Return Receipt

Thank you for using Return Receipt Service

WALZ  
FROM  
CERTIFIED  
MAILER®

WALZ

Label #1

c/o 7-11 Inc.  
Tenants Tax Dept.  
PO Box 711  
Dallas, TX 75221-0711

Label #2

c/o 7-11 Inc.  
Tenants Tax Dept.  
PO Box 711  
Dallas, TX 75221-0711

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

c/o 7-11 Inc.  
Tenants Tax Dept.  
PO Box 711  
Dallas, TX 75221-0711

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7485 17

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7485 17

1. Article Addressed to:

c/o 7-11 Inc.  
Tenants Tax Dept.  
PO Box 711  
Dallas, TX 75221-0711

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7485 14

PS Form 3811, Facsimile, July 2015

# CERTIFIED MAIL® RECEIPT

Domestic Mail Only

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7485 14

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$

Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$

Postage 108969-000000 \$

Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

PS Form 3800, Facsimile, July 2015

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



9414 7266 9904 2138 7485 14

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

Domestic Return Receipt

WALZ  
FROM  
CERTIFIED  
MAILER®

WALZ

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

# CERTIFIED MAIL® RECEIPT

Domestic Mail Only

USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7485 21  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

TEAR ALONG THIS LINE

PS Form 3800, Facsimile, July 2015

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

867 Middle Road  
Acushnet, MA 02743

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7485 24

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



9414 7266 9904 2138 7485 21

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7485 24

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7485 21

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Thank you for using Return Receipt Service

Thank you for using Return Receipt Service

PS Form 3811, Facsimile, July 2015

Domestic Return Receipt

WALLZ  
FROM  
CERTIFIED  
MAILER®

FROM

WALLZ

U.S. PAT. NO. 5,501,393

9414 7266 9904 2097 2095 21

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

TO:

Highwayview LLC  
867 Middle Road  
Acushnet, MA 02743

SENDER: Ashley Tan

REFERENCE: 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage

Certified Fee

Return Receipt Fee

Restricted Delivery

Total Postage & Fees

USPS®

Receipt for  
Certified Mail®

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5

867 Middle Road  
Acushnet, MA 02743

Charge  
Amount:

Charge  
To:

108969-000000

FOLD AND TEAR THIS WAY →

Certified Article Number

9414 7266 9904 2097 2095 21

SENDERS RECORD

Label #6

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2097 2095 21

2. Article Number



9414 7266 9904 2097 2095 21

3. Service Type **CERTIFIED MAIL®**

4. Restricted Delivery? (Extra Fee)

☐ Yes

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

☐ Agent  
☐ Addressee

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

☐ Yes  
☐ No

Reference Information

108969-000000

Ashley Tan

PS Form 3811, January 2005

Domestic Return Receipt

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Thank you for using Return Receipt Service

WALZ  
CERTIFIED  
MAILER®

FROM

WALZ

U.S. PAT. NO. 5,501,393

9414 7266 9904 2097 2095 38

Label #1

867 Middle Road  
Acushnet, MA 02743

Label #2

867 Middle Road  
Acushnet, MA 02743

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

TO:

Riverside Landing LLC  
867 Middle Road  
Acushnet, MA 02743

SENDER: Ashley Tan

REFERENCE: 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage

Certified Fee

Return Receipt Fee

Restricted Delivery

Total Postage & Fees

USPS®

Receipt for  
Certified Mail®

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5

867 Middle Road  
Acushnet, MA 02743

Charge  
Amount:

Charge  
To:

108969-000000

FOLD AND TEAR THIS WAY →

Label #6

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2097 2095 38

2. Article Number



9414 7266 9904 2097 2095 38

3. Service Type **CERTIFIED MAIL®**

4. Restricted Delivery? (Extra Fee)

☐ Yes

1. Article Addressed to:

867 Middle Road  
Acushnet, MA 02743

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent  
☐ Addressee

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

☐ Yes  
☐ No

Reference Information

108969-000000

Ashley Tan

PS Form 3811, January 2005

Domestic Return Receipt

Certified Article Number

9414 7266 9904 2097 2095 38

SENDERS RECORD

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Thank you for using Return Receipt Service

Thank you for using Return Receipt Service



WALZ  
CERTIFIED  
MAILER®

FROM

WALZ

U.S. PAT. NO. 5,501,393

9414 7266 9904 2097 2095 83

Label #1  
875 East Street  
Tewksbury, MA 01876-1469

Label #2  
875 East Street  
Tewksbury, MA 01876-1469

Label #3  
Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

TO:  
DSM MB II LLC  
c/o Demoulas Super Markets Inc  
875 East Street  
Tewksbury, MA 01876-1469

SENDER: Ashley Tan

REFERENCE: 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage

Certified Fee

Return Receipt Fee

Restricted Delivery

Total Postage & Fees

USPS®  
Receipt for  
Certified Mail®

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5

875 East Street  
Tewksbury, MA 01876-1469

Charge  
Amount:

Charge  
To: 108969-000000

FOLD AND TEAR THIS WAY →

Label #6

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



9414 7266 9904 2097 2095 83

2. Article Number



9414 7266 9904 2097 2095 83

3. Service Type CERTIFIED MAIL®

4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:

875 East Street  
Tewksbury, MA 01876-1469

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent  
☐ Addressee

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

☐ Yes  
☐ No

Reference Information

108969-000000

Ashley Tan

PS Form 3811, January 2005

Domestic Return Receipt

Certified Article Number

9414 7266 9904 2097 2095 83

SENDERS RECORD

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Thank you for using Return Receipt Service

WALL  
FROM  
CERTIFIED  
MAILER®

WALL

Label #1 [REDACTED]  
875 East Street  
Tewksbury, MA 01876-1469

Label #2 [REDACTED]  
875 East Street  
Tewksbury, MA 01876-1469

Label #3 Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

U.S. Postal Service®  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER  
9414 7266 9904 2138 7485 38  
Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

[REDACTED]  
875 East Street  
Tewksbury, MA 01876-1469

Label #6 - Return Receipt Barcode (Sender's Record)



9590 9266 9904 2138 7485 31

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7485 38

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7485 31

1. Article Addressed to:

[REDACTED]  
875 East Street  
Tewksbury, MA 01876-1469

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7485 38

PS Form 3811, Facsimile, July 2015

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent  
☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:  
☒ Certified Mail 108969-000000  
☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

Thank you for using Return Receipt Service

WALL  
FROM  
CERTIFIED  
MAILER®

WALL

Label #1 [Redacted]  
875 East Street  
Tewksbury, MA 01876-1469

Label #2 [Redacted]  
875 East Street  
Tewksbury, MA 01876-1469

Label #3  
Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, 02110

U.S. Postal Service®  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

PS Form 3800, Facsimile, July 2015

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7486 06  
875 East Street

Tewksbury, MA 01876-1469

Return Receipt (Hardcopy) \$

Return Receipt (Electronic) \$  
Ashley Tan

Certified Mail Restricted Delivery \$

Postage 108969-000000 \$

Total Postage and Fees \$

Postmark  
Here

Sent to:

Reference Information

TEAR ALONG THIS LINE

FOLD AND TEAR THIS WAY → OPTIONAL

Label #5 (OPTIONAL)

[Redacted]  
875 East Street  
Tewksbury, MA 01876-1469

Label #6 - Return Receipt Barcode (Sender's Record)



108969-000000 9904 2138 7486 09

Label #7 - Certified Mail Article Number

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9414 7266 9904 2138 7486 06

FOLD AND TEAR THIS WAY →

FOLD AND TEAR THIS WAY →

Thank you for using Return Receipt Service

RETURN RECEIPT REQUESTED  
USPS® MAIL CARRIER  
DETACH ALONG PERFORATION

Return Receipt (Form 3811) Barcode



9590 9266 9904 2138 7486 09

1. Article Addressed to:

[Redacted]  
Tewksbury, MA 01876-1469

2. Certified Mail (Form 3800) Article Number

9414 7266 9904 2138 7486 06

PS Form 3811, Facsimile, July 2015

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

Reference Information

3. Service Type:

☒ Certified Mail 108969-000000

☐ Certified Mail Restricted Delivery

Reference Information  
Ashley Tan

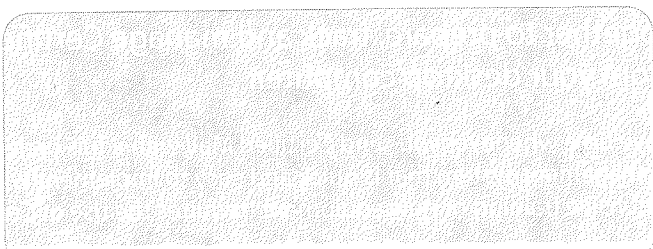
Thank you for using Return Receipt Service

**WALZ  
CERTIFIED  
MAILER®**

FROM

**WALZ**

Label #1



Label #2

PO Box 182571  
Columbus, OH 43218

Label #3

Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, MA 02110

← TEAR ALONG THIS LINE

**FOLD AND TEAR THIS WAY → OPTIONAL**

**Label #5 (OPTIONAL)**

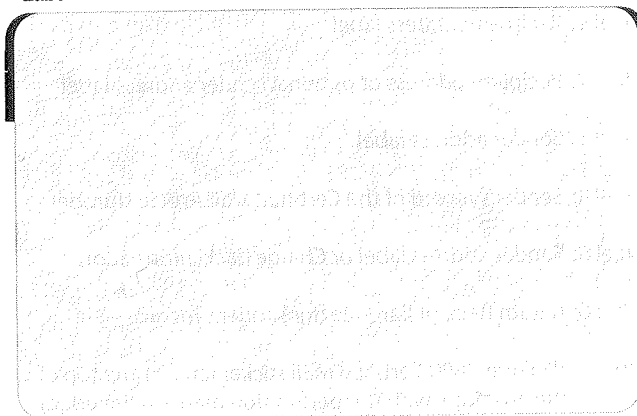
Prince Lobel Tye LLP  
One International Place  
Suite 3700  
Boston, MA 02110

**Label #6 - Return Receipt Barcode (Sender's Record)**



9590 9266 9904 2138 7485 55

**Label #7 - Certified Mail Article Number**



**FOLD AND TEAR THIS WAY →**

**A**

**B**

**Certified Article Number**

9414 7266 9904 2138 7485 52

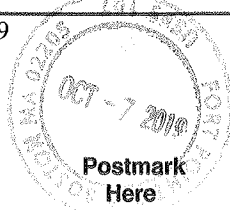
**SENDER'S RECORD**

**Label #4**

U.S. Postal Service®  
CERTIFIED MAIL® RECEIPT

875 East Street  
Tewksbury, MA 01876-1469

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



Sent to:

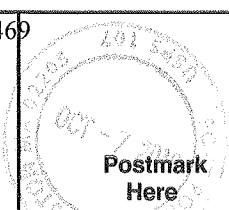
Reference Information

PS Form 3800, Facsimile, July 2015

U.S. Postal Service®

875 East Street  
Tewksbury, MA 01876-1469

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



Sent to:

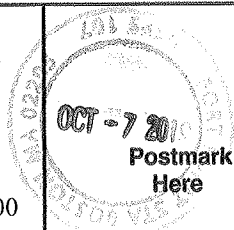
Reference Information

PS Form 3800, Facsimile, July 2015

U.S. Postal Service®  
CERTIFIED MAIL® RECEIPT

Tenants Tax Dept.  
PO Box 711  
Dallas, TX 75221-0711

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



Sent to:

Reference Information

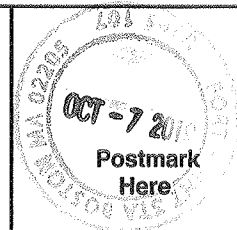
PS Form 3800, Facsimile, July 2015

U.S. Postal Service®  
CERTIFIED MAIL® RECEIPT

Dom

4414 7255 4404 2138 7485 07  
New Bedford, MA 02746

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



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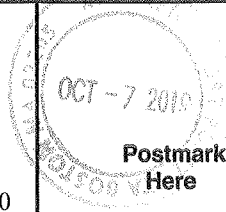
Reference Information

PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

9414 7266 9984 2138 7484 77  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



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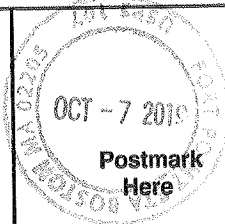
Reference Information

PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

887 Middle Road  
9414 7266 9984 2138 7484 84  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
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Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



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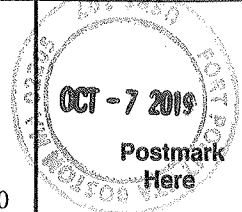
Reference Information

PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

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Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Ashley Tan  
Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



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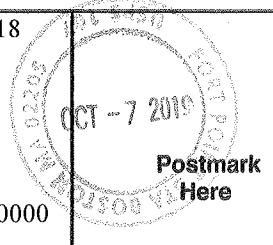
Reference Information

PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

PO Box 182571  
9414 7266 9984 2138 7484 84  
Columbus, OH 43218

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
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Certified Mail Restricted Delivery \$  
Postage 108969-000000 \$  
Total Postage and Fees \$



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Reference Information

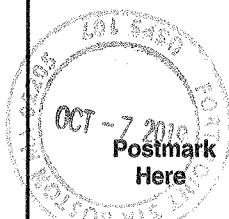
PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7485 52

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage \$



PO Box 182571  
Columbus, OH 43218

Ashley Tan

108969-000000

Reference Information

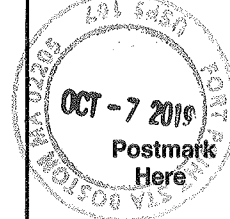
PS Form 3800, Facsimile, July 2015

**U.S. Postal Service®**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

USPS® ARTICLE NUMBER

9414 7266 9904 2138 7484 91  
Acushnet, MA 02743

Certified Mail Fee \$  
Return Receipt (Hardcopy) \$  
Return Receipt (Electronic) \$  
Certified Mail Restricted Delivery \$  
Postage 108969-000000  
Total Postage and Fees \$



Sent to:

Reference Information

PS Form 3800, Facsimile, July 2015

9414 7266 9904 2097 2095 21

TO:

867 Middle Road  
Acushnet, MA 02743

**SENDER:** Ashley Tan

**REFERENCE:** 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage  
Certified Fee  
Return Receipt Fee  
Restricted Delivery  
Total Postage & Fees

**USPS®**  
**Receipt for**  
**Certified Mail®**

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE

OCT - 7 2019

9414 7266 9904 2097 2095 38

TO:

867 Middle Road  
Acushnet, MA 02743

**SENDER:** Ashley Tan

**REFERENCE:** 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage  
Certified Fee  
Return Receipt Fee  
Restricted Delivery  
Total Postage & Fees

**USPS®**  
**Receipt for**  
**Certified Mail®**

No Insurance Coverage Provided  
Do Not Use for International Mail

POSTMARK OR DATE

OCT - 7 2019

9414 7266 9904 2097 2095 83

TO

875 East Street  
Tewksbury, MA 01876-1469

**SENDER:** Ashley Tan

**REFERENCE:** 108969-000000

PS Form 3800, January 2005

RETURN  
RECEIPT  
SERVICE

Postage

Certified Fee

Return Receipt Fee

Restricted Delivery

Total Postage & Fees

POSTMARK OR DATE  
OCT - 7 2019

**USPS®**  
**Receipt for**  
**Certified Mail®**

No Insurance Coverage Provided  
Do Not Use for International Mail





April 27, 2021

Mayor Jonathan Mitchell  
City of New Bedford  
133 William Street  
New Bedford, MA 02740

Re: Request for Records of Costs Related to Southcoast Apothecary, LLC

Dear Mayor Mitchell:

Please be advised that as a requirement of Southcoast Apothecary, LLC's ("Ascend") license renewal for its marijuana establishment in the City of New Bedford, the Cannabis Control Commission (the "Commission") requires Ascend to submit, (1) documentation that it requested from its Host Community the records of any cost to the City, whether anticipated or actual, resulting from the licensee's operation within its borders, and (2) any response received from the Host Community in connection with such request, and if no response is received, an attestation to that effect.

Accordingly, please accept this correspondence as Ascend's formal request to the City to produce the records of any cost, whether anticipated or actual, resulting from Ascend's operation within the City. Please note that a copy of this correspondence along with any response received from the City, or barring receipt of any response, an attestation to that effect, shall be submitted by Ascend to the Commission. As the City is aware, in accordance with M.G.L. c. 94G, § 3(d), any cost to the City imposed by the operation of a Marijuana Establishment shall be documented and considered a public record as defined by M.G.L. c. 4, § 7, cl. 26.

If we can provide additional information, please do not hesitate to ask.

Sincerely,

A handwritten signature in blue ink, appearing to read "Andrea Cabral", written over a horizontal line.

Andrea Cabral  
Chief Executive Officer

**Attestation Regarding Outreach to City of New Bedford re:  
Records of Municipal Cost Relating to Southcoast Apothecary, LLC's Operations**

I, Andrea Cabral, the Chief Executive Officer of Southcoast Apothecary, LLC, attest that a letter requesting the records of any cost to City of New Bedford whether anticipated or actual, resulting from Southcoast Apothecary, LLC's operation within its borders, was sent to the City of New Bedford on April 27, 2021. As of this date, no response has been received.



June 18, 2021

Date

Name: Andrea Cabral

Title: Chief Executive Officer



## **Plan for Positive Impact on Areas of Disproportionate Impact**

### **Overview**

Ascend is dedicated to serving and supporting areas of disproportionate impact, which the Cannabis Control Commission has identified as the following:

1. Past or present residents of the geographic “areas of disproportionate impact,” which have been defined by the Commission and identified in its Guidance for Identifying Areas of Disproportionate Impact;
2. Commission-designated Economic Empowerment Priority applicants;
3. Commission-designated Social Equity Program participants;
4. Massachusetts residents who have past drug convictions; and
5. Massachusetts residents with parents or spouses who have drug convictions are classified as areas of disproportionate impact.
6. To support such populations, Ascend has created the following Plan to Positively Impact Areas of Disproportionate Impact (the “Plan”) and has identified and created numerous goals and priorities.

### **Goals**

Ascend seeks to:

1. Reduce barriers to entry in the commercial adult-use cannabis industry; and
2. Provide business assets (time, organization skills, financial resources) towards endeavors that will have a positive impact towards the promotion of sustainable, socially, and economically reparative practices in the cannabis industry in Massachusetts.

### **Programs**

Our commitment is an essential part of the company’s ethos. Specifically, Ascend will:

1. In partnership with Suffolk County Sheriff Steven W. Tompkins, Ascend intends to hire ex-offenders from the Suffolk County House of Corrections that have completed job-training and re-entry programs to work within Ascend’s dispensary and who otherwise meet Ascend’s criteria for employment. As outlined below, Ascend’s goal is to hire six individuals through this program; and
2. Establish an independent charitable foundation in partnership with Ascend Wellness Holdings, LLC.

These initiatives are further outlined in the plan below.

### Re-Entry Programs

Ascend will develop a partnership with the Suffolk County Sheriff Department (“SCSD”) to provide referrals of qualified applicants, with a specific focus on hiring individuals with past drug convictions, that have completed job-training and re-entry programs, are under court supervision, and who otherwise meet Ascend’s criteria for employment. This initiative will be managed by the Chief Executive Officer, Human Resources Director, and Dispensary Manager.

Ascend will initially measure its progress through the successful development of a partnership with SCSD. Based on the specifics of that partnership, Ascend’s goal is to hire six (6) individuals from this partnership. All employees will receive significant training to reduce barriers to entry to the cannabis industry.

If Ascend does not meet its goals, it must exceed its above-described hiring goals the following year by the number it missed the year before.

### The WeGrow Foundation

Ascend will contribute 0.5% of its net revenue to the WeGrow Foundation (the “Foundation”), a fund set up by Ascend Wellness Holdings, LLC, the parent company of the applicant Southcoast Apothecary, LLC (d/b/a Ascend). It will be independently run, with its own President/CEO, Executive Director and Board. The specific organizations, businesses and individuals who might receive grants or other assistance from the Foundation will be chosen by the Foundation, based upon the purpose, goals and criteria that it chooses. As an operationally-independent charitable organization, the Foundation, through grants and other giving, will support eligible organizations and programs that provide services to:

1. Past or present residents of the geographic “areas of disproportionate impact,” which have been defined by the Commission and identified in its Guidance for Identifying Areas of Disproportionate Impact;
2. Commission-designated Economic Empowerment Priority applicants;
3. Commission-designated Social Equity Program participants;
4. Massachusetts residents who have past drug convictions; and
5. Massachusetts residents with parents or spouses who have drug convictions are classified as areas of disproportionate impact.

The Foundation will have a board comprised of independent directors with no affiliation or financial interest in Ascend or Ascend Wellness Holdings, LLC. Ms. Cabral is serving on the board in an interim capacity until the final board is selected and installed, at which time she will resign.

## **Measurement**

The Community Engagement Officer will administer the Plan. The Community Engagement Officer will be responsible developing specific initiatives, creating partnerships and achieving measurable outcomes to ensure that Ascend meets the Plan's goals. Ascend will audit the Plan annually upon license renewal and will disclose and track measurement metrics. Metrics tracked will include the following:

1. Number of employees hired as part of Ascend's partnership with SCSD. The applicant will count the number of employees hired as part of this partnership and compare to its goal number of six;
2. Funds raised by the WeGrow Foundation; and
3. Measures undertaken by the WeGrow Foundation that positively impact areas of disproportionate impact. The applicant will outline a list of all of the philanthropic activities that the WeGrow Foundation has undertaken and prepare documentation outlining how they meet the specific goals of the Cannabis Control Commission.

These metrics will be evaluated every year upon license renewal. Ascend acknowledges that the progress and success of this Plan must be documented one year from provisional licensure and each year thereafter.

## **Disclosures**

Ascend will adhere to the requirements set forth in 935 CMR 500.105(4) which provides the permitted and prohibited advertising, branding, marketing, and sponsorship practices of every Marijuana Establishment.

Any actions taken, or programs instituted, by Ascend will not violate the Commission's regulations with respect to limitations on ownership or control or other applicable state laws.

As identified above, Ascend will donate to the Foundation and acknowledges that the Foundation has been contacted and will receive the donation described herein.



STEVEN W. TOMPKINS  
SHERIFF

# Suffolk County Sheriff's Department

Jail  
200 Nashua Street  
Boston, MA 02114  
(617) 635-1100

House of Correction  
20 Bradston Street  
Boston, MA 02118  
(617) 635-1000



September 5, 2019

Cannabis Control Commission  
101 Federal Street  
13th Floor  
Boston, MA 02110

To Whom It May Concern:

This letter confirms that the Suffolk County Sheriff's Department has agreed to partner with Ascend Mass, LLC to refer and help screen appropriate candidates for employment in their retail stores. The candidates will be graduates of our Common Ground Institute (CGI) re-entry program. As part of the CGI program, the Sheriff's Department trains and prepares candidates for employment and regularly works with employers who are willing to hire them.

Please do not hesitate to contact me if you have any questions.

Sincerely,

Steven W. Tompkins  
Sheriff

June 8, 2020

Cannabis Control Commission  
Union Square  
2 Washington Square  
Worcester, MA 01604

To Whom It May Concern:

I write in my capacity as President and CEO of the WeGrow Foundation which is registered with the Secretary of the Commonwealth and applying to the Internal Revenue Service for a 501c(3) designation.

The consequences of disproportionate impact are intergenerational. In particular, the challenges faced by children of incarcerated parents and children of parents who experience chronic CORI- related unemployment and other CORI-related economic consequences are wide-ranging and well documented. As an operationally independent charitable organization, the WeGrow Foundation, through grants and other giving, will help support eligible organizations and programs in Boston and other areas of disproportionate impact that provide services to this and other affected populations.

The WeGrow Foundation will accept any funds donated to it from Ascend Mass, LLC.

Please do not hesitate to contact me if we can provide any additional information.

Sincerely,

A handwritten signature in black ink that reads "Leslie E. Harris". The signature is fluid and cursive, with the first name "Leslie" and last name "Harris" clearly legible, and "E." as a middle initial.

The Hon. Leslie Harris (Ret.), President & CEO  
The WeGrow Foundation  
137 Lewis Wharf  
Boston, MA 02110  
(617) 596-1425



William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

October 10, 2019

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

**SOUTHCOAST APOTHECARY, LLC**

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **February 22, 2019.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are:  
**MICHAEL DAMASO, TROY M DEMELLO, ERIC J COSTA**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **MICHAEL DAMASO, TROY M DEMELLO, ERIC J COSTA**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **NONE**



In testimony of which,

I have hereunto affixed the

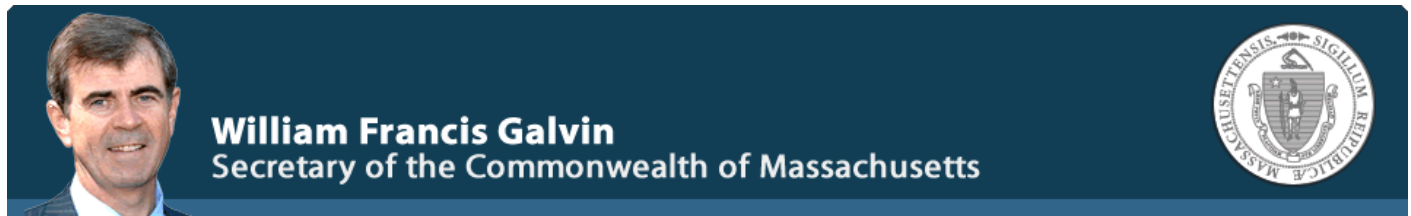
Great Seal of the Commonwealth

on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth





# Corporations Division

## Business Entity Summary

**ID Number:** 001370265

[Request certificate](#)

[New search](#)

**Summary for:** SOUTHCOAST APOTHECARY, LLC

**The exact name of the Domestic Limited Liability Company (LLC):** SOUTHCOAST APOTHECARY, LLC

**Entity type:** Domestic Limited Liability Company (LLC)

**Identification Number:** 001370265

**Date of Organization in Massachusetts:**  
02-22-2019

**Last date certain:**

**The location or address where the records are maintained** (A PO box is not a valid location or address):

Address: 170 HADLEY STREET

City or town, State, Zip code, NEW BEDFORD, MA 02745 USA

Country:

**The name and address of the Resident Agent:**

Name: MICHAEL DAMASO

Address: 170 HADLEY STREET

City or town, State, Zip code, NEW BEDFORD, MA 02745 USA

Country:

**The name and business address of each Manager:**

| Title   | Individual name | Address                                     |
|---------|-----------------|---|
| MANAGER | MICHAEL DAMASO  | 170 HADLEY STREET NEW BEDFORD, MA 02745 USA |
| MANAGER | TROY M DEMELLO  | 170 HADLEY STREET NEW BEDFORD, MA 02745 USA |
| MANAGER | ERIC J COSTA    | 170 HADLEY STREET NEW BEDFORD, MA 02745 USA |

**In addition to the manager(s), the name and business address of the person(s) authorized to execute documents to be filed with the Corporations Division:**

| Title | Individual name | Address |
|-------|-----------------|---------|
|       |                 |         |

**The name and business address of the person(s) authorized to execute, acknowledge, deliver, and record any recordable instrument purporting to affect an interest in real property:**

| Title | Individual name | Address |
|-------|-----------------|---------|
|       |                 |         |

☐**Consent**☐**Confidential  
Data**☐**Merger  
Allowed**☐**Manufacturing**

**View filings for this business entity:**

ALL FILINGS  
Annual Report  
Annual Report - Professional  
Articles of Entity Conversion  
Certificate of Amendment  
Certificate of Cancellation

[View filings](#)

**Comments or notes associated with this business entity:**

[New search](#)

# **OPERATING AGREEMENT**

## **OF**

### **SOUTHCOAST APOTHECARY, LLC**

#### **A MASSACHUSETTS LIMITED LIABILITY COMPANY**

This Operating Agreement of Southcoast Apothecary, LLC (the "LLC"), dated as of February 22, 2019, is made by Michael Damaso, Troy M. Demelo, and Eric J. Costa (collectively, the "Members," and individually, a "Member"). The Members, intending to form a limited liability company pursuant to the Massachusetts Limited Liability Company Act (the "Act"), hereby agree as follows:

#### **1. Name of LLC.**

The name of the LLC is Southcoast Apothecary, LLC (the "LLC").

#### **2. Business of LLC; Purposes and Powers.**

(a) The general character of the business of the LLC is to engage in the management of a licensed marijuana dispensary in the Commonwealth of Massachusetts and to engage in any activities directly or indirectly related or incidental thereto.

(b) The LLC shall be member-managed. All decisions respecting any matter set forth herein or otherwise affecting or arising out of the conduct of the business of the LLC shall be made by the Members, by action of a majority in number thereof, unless pursuant to this Agreement, the Act or other applicable law, a greater number or percentage of Members is required.

The Members shall have the exclusive right and full authority to manage, conduct and operate the LLC's business. Specifically, but not by way of limitation, the Members shall be authorized, for and on behalf of the LLC to do the following:

(i) to borrow money, to issue evidences of indebtedness and to guarantee the debts of others for whatever purposes they may specify, whether or not related to the LLC or the LLC's assets, and, as security therefor, to mortgage, pledge or otherwise encumber the assets of the LLC;

(ii) to cause to be paid on or before the due date thereof all amounts due and payable by the LLC to any person or entity;

(iii) to employ such agents, employees, managers, accountants, attorneys, consultants and other persons necessary or appropriate to carry out the business and affairs of the LLC, whether or not any such persons so employed are Members or are affiliated or related to any Member; and to pay such fees, expenses, salaries, wages and other compensation to such persons as the Members shall in their sole discretion determine;

(iv) to pay, extend, renew, modify, adjust, submit to arbitration, prosecute, defend or compromise, upon such terms as they may determine and upon such evidence as they may deem sufficient, any obligation, suit, liability, cause of action or claim, including taxes, either in favor of or against the LLC;

(v) to pay any and all fees and to make any and all expenditures that the Members, in their discretion, deem necessary or appropriate in connection with the organization of the LLC, and the carrying out of its obligations and responsibilities under this or any other Agreement;

(vi) to cause the LLC's property to be maintained and operated in a manner that satisfies in all respects the obligations imposed with respect to such maintenance and operation by law, by any mortgages encumbering such property from time to time, and by any lease, agreement or rental arrangement pertaining to such property;

(vii) to cause necessary and proper repairs to be made, and supplies necessary for the proper operation, maintenance and repair of the LLC's property to be obtained;

(viii) to lease, sell, finance or refinance all or any portion of the LLC's property; and

(ix) to exercise all powers and authority granted by the Act to Members, except as otherwise specifically provided in this Agreement.

### **3. Office of the Limited Liability Company.**

The address of the office of the LLC for purposes of Section 5 of the Act is 170 Hadley Street, New Bedford, Massachusetts, 02745.

### **4. Agent for Service of Process.**

The name and address of the resident agent for service of process for the LLC is Michael Damaso, 170 Hadley Street, New Bedford, Massachusetts, 02745.

### **5. Members' Names and Business Addresses.**

The names and business addresses of the Members are set forth on Schedule A attached hereto.

### **6. Term of the LLC.**

(a) The term of the LLC commenced upon filing on the date hereof a Certificate of Organization in the Office of the Secretary of State of the Commonwealth of Massachusetts. The term shall continue until the LLC is terminated by agreement of the Members unless earlier dissolved upon the occurrence of an event of dissolution under Section 43 of the Act (subject to the right to continue the LLC as set forth in Section 6(b) below or pursuant to the Act).

(b) The Members may continue the business of the LLC upon the occurrence of any event that constitutes an event of dissolution of an LLC under the Act by electing to do so within 90 days after the occurrence of any of such event. Any such election shall be made by Members whose capital

contributions to the LLC represent at least a majority of the capital contributions made by all Members.

#### **7. Capital Contributions, Capital Accounts and Liability of Members.**

(a) Each Member has contributed in cash to the capital of the LLC the amount set forth opposite such Member's name on Schedule A hereto. Additional capital contributions may be made by any Member if agreed to by all Members.

Except as otherwise provided in this Section 7, no Member shall be obligated or permitted to contribute any additional capital to the LLC. No interest shall accrue on any contributions to the capital of the LLC, and no Member shall have the right to withdraw or be repaid any capital contributed by it or to receive any other payment in respect of its interest in the LLC, including, without limitation, as a result of the withdrawal or resignation of such Member from the LLC, except as specifically provided in this Agreement.

(b) A "Capital Account" shall be maintained for each Member and adjusted in accordance with Regulations under Section 704 of the Internal Revenue Code of 1986, as amended (the "Code"). To the extent consistent with such Regulations, the adjustments to such Capital Accounts shall include the following: (i) there shall be credited to each Member's Capital Account the amount of any cash or the net fair market value of any property actually contributed by such Member to the capital of the LLC and such Member's share of the net profits of the LLC and of any items in the nature of income or gain separately allocated to the Members; and (ii) there shall be charged against each Member's Capital Account the amount of any cash and the net fair market value of any property distributed to such Member and such Member's share of the net losses of the LLC and of any items in the nature of losses or deductions separately allocated to the Members.

(c) The liability of the Members for the losses, debts and obligations of the LLC shall be limited to their capital contributions; provided, however, that under applicable law, the Members may under certain circumstances be liable to the LLC to the extent of previous distributions made to them in the event that the LLC does not have sufficient assets to discharge its liabilities. Without limiting the foregoing, (i) no Member, in his, her or its capacity as a Member shall have any liability to restore any negative balance in his, her or its Capital Account and (ii) the failure of the LLC to observe any formalities or requirements relating to exercise of its powers or management of its business or affairs under this Agreement or the Act shall not be grounds for imposing personal liability on the Members or Managers for liabilities of the LLC.

#### **8. Return of Contributions.**

The contribution of each Member is to be returned to such Member only upon the termination and liquidation of the LLC, but contributions may be returned prior to such time if agreed upon by all Members.

#### **9. Share of Net Profits, Net Losses and Cash Distributions.**

(a) During the term of the LLC, the net cash flow, net proceeds of any sale or refinancing of any property of the LLC, and any other distributions of cash or other property of the LLC, shall be allocated among the Members in proportion to their respective capital contributions. Subject to the foregoing,

distributions to the Members shall be made at such times and in such amounts as the Members shall determine.

Distributions of net proceeds of liquidation of the LLC (whether of cash or other assets) shall be distributed to all Members with positive Capital Account balances (after such balances have been adjusted to reflect the allocation of net profits or net losses and items thereof through the date of liquidation pursuant to Section 9(b)) in proportion to and to the extent of such positive balances.

A Member, regardless of the nature of such Member's contribution to the LLC, shall have no right to demand or receive any distribution from the LLC in any form other than cash. The LLC may, at any time, and from time to time, make distributions in kind to the Members. If any assets of the LLC are distributed in kind, such assets shall be distributed on the basis of their fair market value as determined by the Members.

(b) Net profits and net losses shall, for both accounting and tax purposes, be net profits and net losses as determined for purposes of adjusting Capital Account balances as provided in Treasury Regulations Section 1.704-1(b)(2)(iv)(b). Net profits and net losses of the LLC shall be allocated among the members in proportion to their respective capital contributions. For tax purposes, all items of depreciation, gain, loss, deduction or credit shall be determined in accordance with the Treasury Regulations under I.R.C. § 704(b), and, except to the extent otherwise required by the Code, allocated to and among the Members in the same percentages in which the Members share in net profits and net losses.

(c) Eric J. Costa shall be the "tax matters partner" of the LLC for purposes of the Code.

(d) No Member shall have any right to distributions respecting such Member's interest (upon withdrawal or resignation from the LLC or otherwise) except as expressly set forth in this Agreement.

#### **10. Substitution and Assignment of a Member's Interest; Resignation; Additional Members.**

(a) No Member may sell, assign, give, pledge, hypothecate, encumber or otherwise transfer, including, without limitation, any assignment or transfer by operation of law or by order of court, such Member's interest in the LLC or any part thereof, or in all or any part of the assets of the LLC, without the unanimous written consent of all of the other Members, and any purported assignment without such consent shall be null and void and of no effect whatsoever.

(b) No assignee of the interest of a Member may be substituted as a member of the LLC without the unanimous written consent of all other Members.

(c) A Member may not resign from or otherwise terminate such Member's membership in the LLC without the prior approval of all other Members.

(d) Additional Members may be admitted to the LLC if agreed to by all Members.

#### **11. Miscellaneous.**

(a) The Members shall cause the LLC to keep just and true books of account with respect to the operations of the LLC. Such books shall be maintained at the principal place of business of the LLC, or at such other place as the Members shall determine, and all Members, and their duly authorized representatives, shall at all reasonable times have access to such books.

(b) Such books shall be kept on the accrual method of accounting or on such other method of accounting as the Members may from time to time determine, and shall be closed and balanced as of December 31 each year. The same method of accounting shall be used for both LLC accounting and tax purposes. The fiscal year of the LLC shall be the calendar year.

(c) If and when the LLC has any cash receipts or expenses, the Members shall cause the LLC to maintain one or more accounts in a bank (or banks) that is a member of the Federal Deposit Insurance Corporation (FDIC), which accounts shall be used for the payment of the expenditures incurred by the Members in connection with the business of the LLC, and in which shall be deposited any and all cash receipts. All such amounts shall be and remain the property of the LLC, and shall be received, held and disbursed by the Members for the purposes specified in this Agreement.

(d) Subject to the restrictions on transfers set forth herein, this Agreement, and each and every provision hereof, shall be binding upon and shall inure to the benefit of the Members, their respective successors, successors in title, heirs and assigns, and each and every successor in interest to any Member, whether such successor acquires such interest by way of gift, purchase, foreclosure or any other method, and each party shall hold such interest subject to all of the terms and provisions of this Agreement.

(e) No change, modification or amendment of this Agreement shall be valid or binding unless such change, modification or amendment shall be in writing and duly executed by all of the Members.

(f) This Agreement and the rights and obligations of the parties hereunder shall be governed by and interpreted, construed and enforced in accordance with the laws of the Commonwealth of Massachusetts.

(g) This Agreement may be executed in a number of counterparts, all of which together shall for all purposes constitute one Agreement, binding on all the Members, notwithstanding that all Members have not signed the same counterpart.

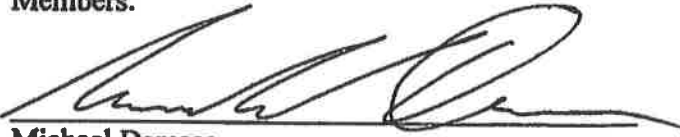
(h) None of the provisions of this Agreement shall be for the benefit of or enforceable by any creditor of any Member, or any creditor of the LLC other than a member who is such a creditor of the LLC.

(i) The Members hereby agree that no Member or any successor in interest to any Member shall have the right while this Agreement remains in effect to have the property of the LLC partitioned, or to file a complaint or institute any proceeding at law or in equity to have the property of the LLC partitioned, and that each Member, on behalf of such Member and such Member's successors, representatives, heirs and assigns, hereby waives any such right. It is the intention of the Members that during the term of this Agreement, the rights of the Members and their successors in interest, as among themselves, shall be governed by the terms of this Agreement, and that the right of any Member or successor in interest to assign, transfer, sell or otherwise dispose of his or her interest in the LLC shall be subject to the limitations and restrictions of this Agreement.

(j) This Agreement constitutes the full and complete agreement of the parties hereto with respect to the subject matter hereof.

In Witness Whereof, the Members have signed and sworn to this Agreement under penalties of perjury as of the date first above written.

Members:

A handwritten signature in black ink, appearing to be "Michael Damaso", written over a horizontal line.

Michael Damaso

A handwritten signature in black ink, appearing to be "Troy M. Demelo", written over a horizontal line.

Troy M. Demelo

A handwritten signature in black ink, appearing to be "Eric J. Costa", written over a horizontal line.

Eric J. Costa



**SOUTHCOAST APOTHECARY, LLC**

**SCHEDULE "A" OF OPERATING AGREEMENT**

**Members' names and business addresses:**

- (1) Michael Damaso, 170 Hadley Street, New Bedford, Massachusetts, 02745;
- (2) Troy M. Demello, 170 Hadley Street, New Bedford, Massachusetts, 02745; and
- (3) Eric J. Costa, 170 Hadley Street, New Bedford, Massachusetts, 02745.



## CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



SOUTHCOAST APOTHECARY, LLC  
170 HADLEY ST  
NEW BEDFORD MA 02745-6001

### ***Why did I receive this notice?***

The Commissioner of Revenue certifies that, as of the date of this certificate, SOUTHCOAST APOTHECARY, LLC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

**This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.**

### ***What if I have questions?***

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 8:30 a.m. to 4:30 p.m..

### ***Visit us online!***

Visit [mass.gov/dor](http://mass.gov/dor) to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief  
Collections Bureau



## Corporations Division

### Business Entity Summary

ID Number: 001370265

[Request certificate](#)

[New search](#)

Summary for: **SOUTHCOAST APOTHECARY, LLC**

|  |                 |   |
|--|-----------------|---|
| <b>The exact name of the Domestic Limited Liability Company (LLC):</b> SOUTHCOAST APOTHECARY, LLC  |                 |   |
| <b>Entity type:</b> Domestic Limited Liability Company (LLC)   |                 |   |
| <b>Identification Number:</b> 001370265  |                 |   |
| <b>Date of Organization in Massachusetts:</b> 02-22-2019   |                 |   |
| <b>Last date certain:</b>  |                 |   |
| <b>The location or address where the records are maintained</b> (A PO box is not a valid location or address):   |                 |   |
| Address: 170 HADLEY STREET   |                 |   |
| City or town, State, Zip code, Country: NEW BEDFORD, MA 02745 USA  |                 |   |
| <b>The name and address of the Resident Agent:</b>   |                 |   |
| Name: DANIEL A. DIPIETRO, ESQ.   |                 |   |
| Address: 10 BRYN MAWR RD   |                 |   |
| City or town, State, Zip code, Country: WELLESLEY, MA 02482 USA  |                 |   |
| <b>The name and business address of each Manager:</b>  |                 |   |
| Title  | Individual name | Address                                     |
| MANAGER  | FRANCIS PERULLO | 170 HADLEY STREET NEW BEDFORD, MA 02745 USA |
| <b>In addition to the manager(s), the name and business address of the person(s) authorized to execute documents to be filed with the Corporations Division:</b>                           |                 |   |
| Title  | Individual name | Address                                     |
|  |                 |   |
| <b>The name and business address of the person(s) authorized to execute, acknowledge, deliver, and record any recordable instrument purporting to affect an interest in real property:</b> |                 |   |
| Title  | Individual name | Address                                     |
| REAL PROPERTY  | FRANCIS PERULLO | 170 HADLEY STREET NEW BEDFORD, MA 02745 USA |
| <input type="checkbox"/> <b>Consent</b> <input type="checkbox"/> <b>Confidential Data</b> <input type="checkbox"/> <b>Merger Allowed</b> <input type="checkbox"/> <b>Manufacturing</b>     |                 |   |
| <b>View filings for this business entity:</b>  |                 |   |
| <div> ALL FILINGS<br/> Annual Report<br/> Annual Report - Professional<br/> Articles of Entity Conversion<br/> Certificate of Amendment<br/> Certificate of Consolidation </div>           |                 |   |
| <a href="#">View filings</a>   |                 |   |
| <b>Comments or notes associated with this business entity:</b>   |                 |   |
|  |                 |   |

[New search](#)



THE COMMONWEALTH OF MASSACHUSETTS  
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT  
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Charles D. Baker  
GOVERNOR

Karyn E. Polito  
LT. GOVERNOR



184434135

Rosalin Acosta  
SECRETARY

Richard A. Jeffers  
DIRECTOR

Southcoast Apothecary, LLC  
170 HADLEY ST  
NEW BEDFORD, MA 02745-6001

EAN: 22161746  
March 31, 2020

Certificate Id:36529

The Department of Unemployment Assistance certifies that as of 3/31/2020 ,Southcoast Apothecary, LLC is current in all its obligations relating to contributions, payments in lieu of contributions, and the employer medical assistance contribution established in G.L.c.149,§189.

This certificate expires in 30 days from the date of issuance.

Richard A. Jeffers, Director

Department of Unemployment Assistance

**RECORD OF PAYMENT  
CITY CLERK'S OFFICE  
NEW BEDFORD, MASS.  
NO REFUNDS OR RETURNS**

**Tender Type :** Check

**Customer Name** Foley & Hoag

**3/27/2020**

| <b>Item Description</b>     | <b># of Units</b> | <b>Total Amount</b> |
|-----------------------------|-------------------|---------------------|
| Business Certificate (40.00 | 1                 | \$40.00             |
| <b>Total Amount Paid:</b>   |                   | \$40.00             |

**Receipt #** 158516



# BUSINESS CERTIFICATE

City of New Bedford

☒ New Filing

☐ Renewal

Filing Fee: \$40.00

This Certificate, file # 1391143 Expires 3-27-2024

In conformity with the provisions of Chapter one hundred and ten, Section five of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of.

Business Name: Ascend

(Please Print)

Corporate Name: Southcoast Apothecary, LLC

(Please Print)

is conducted at 115 Coggeshall Street, New Bedford Zip 02746

(P.O. Box not permitted)

Business Phone: 617-724-5844

by the following named person(s)

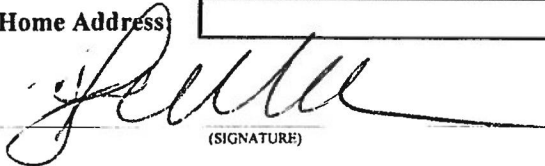
Owner Name: Ascend Wellness Holdings, LLC Owner Tel: 517-742-5844

Owner Home Address: 500 Totten Pond Road, Waltham, MA 02451

Owner Name 2: \_\_\_\_\_

Owner 2 Home Address: \_\_\_\_\_

Signed



(SIGNATURE)

(SIGNATURE)

(SIGNATURE)

(SIGNATURE)

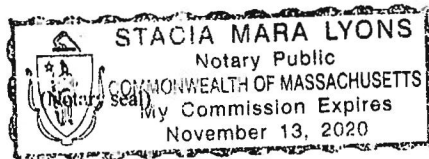
## Commonwealth of Massachusetts

County: Middlesex

Date 3/11/2020

Personally appeared before me, the named individual(s) Francis Perullo

On the above date and made oath that the foregoing statement is true.



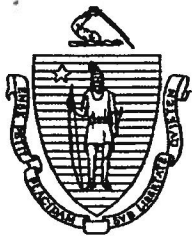
Signature:

  
Notary Public / Designated Clerk

Commission Expires: 11/13/2020

**Important Notice:** This certificate expires four years from the date of issue. If you cease conducting business before that time, the law requires that you withdraw this certificate with the Office of the City Clerk. Any change of location, residence or owner must be filed in the office of the City Clerk. A business operating in violation of this State Law "shall be punished by a fine of not more than \$300. for each month during which such violation occurs."

**THIS CERTIFICATE DOES NOT GRANT PERMISSION TO CONDUCT BUSINESS IN VIOLATION OF ZONING LAWS.**



The Commonwealth of Massachusetts  
Department of Industrial Accidents  
Office of Investigations  
600 Washington Street  
Boston, MA 02111  
www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses

Applicant Information

Please Print Legibly

Business/Organization Name: AWH MGMT GRP, LLC

Address: c/o AWH - 500 Totten Pond Road, 6th Floor

City/State/Zip: Waltham, MA 02451

Phone #: +1 (781) 703-7800

Are you an employer? Check the appropriate box:

1. ☒ I am a employer with 50 employees (full and/or part-time).\*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
3. ☐ We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
4. ☐ We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

5. ☒ Retail
6. ☐ Restaurant/Bar/Eating Establishment
7. ☐ Office and/or Sales (incl. real estate, auto, etc.)
8. ☐ Non-profit
9. ☐ Entertainment
10. ☐ Manufacturing
11. ☐ Health Care
12. ☐ Other

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: Protective Insurance

Insurer's Address: P.O. Box 7099

City/State/Zip: Indianapolis, IN 46207

Policy # or Self-ins. Lic. #: SS-2307330-01

Expiration Date: 06/25/2020

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature:

Date: 03/11/2020

Print Name: Francis Perullo

Phone #:

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: Permit/License #

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office  
6. Other

Contact Person:

Phone #:

Home Address



### **Plan for Obtaining Liability Insurance**

Ascend plans to contract with Eastern Insurance to maintain general liability insurance coverage for no less than \$1,000,000 per occurrence and \$2,000,000 in aggregate annually and product liability coverage for no less than \$1,000,000 per occurrence and \$2,000,000 in aggregate annually. The policy deductible will be no higher than \$5,000 per occurrence. Ascend will consider additional coverage based on availability & cost-benefit analysis. If adequate coverage is unavailable at a reasonable rate, Ascend will place in escrow at least \$250,000 to be expended for liabilities coverage. Any withdrawal from such escrow will be replenished within 10 business days. Ascend will keep reports documenting compliance with 935 CMR 500.105(10).





**Ascend Mass, LLC**

**Business Plan**

**March 2020**

## **Table of Contents**

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## **1. EXECUTIVE SUMMARY**

### **1.1. Mission Statement and Message from the CEO**

Ascend is a medical and adult-use cannabis company that holds itself to a higher standard. As pioneers in an emerging industry in Massachusetts, we believe it is our duty to set an example as to how business should be conducted in the Commonwealth.

Ascend's executive management team members are life-long or long-time local residents who care deeply about maintaining the community fabric that makes the Eastern Massachusetts area special. Ascend is led by lifelong public servants with a deep-rooted commitment to social justice, community enrichment, and regulatory development and implementation.

We seek to lead through excellence in operational protocol, security, compliance, and education.

### **1.2. Our Values**

- We care about our customers' unique, individual needs.
- We provide an approachable and trusted cannabis experience.
- We deliver unrivaled quality, consistency and meticulously curated products.
- We simplify the customer experience with easy to understand effect-based categorization.
- We are a trusted partner in the community as a safe secure neighbor looking to make a positive impact.

### **1.3. License Type**

Ascend is applying for a Certificate of Registration from the Massachusetts Cannabis Control Commission (the “**Commission**”) to operate a Marijuana Establishment (“ME”) Retailer license in New Bedford Massachusetts.

### **1.4. Product**

Ascend will sell a variety of product offerings that will be fully compliant with the guidelines and regulations set out by the Cannabis Control Commission.

Products that Ascend intends to offer include, but will not be limited to:

1. Sativa, indica, and hybrid cannabis flower
2. Pre-dosed oil vaporizers
3. Sublingual tablets

4. Topical salves, creams, and lotions
5. Concentrates
6. Food and beverages
7. Tinctures
8. Sprays
9. Patches
10. Capsules

### **1.5. Customers**

Ascend's target customers be adults 21 years of age and older. Ascend anticipates that most of its customers will live or work in the Greater New Bedford community.

### **1.6. What Drives Us**

Ascend's goals include:

1. Serving customers 21 years of age or older with a wide variety of high quality, consistent, laboratory-tested cannabis and derivatives;
2. Assisting local communities in offsetting the cost of Ascend's operations within their communities;
3. Hiring employees and contractors from within the communities served;
4. Hiring employees and contractors from communities that have been particularly harmed by the war on drugs;
5. Hiring employees from economically distressed communities and giving them the space and knowledge to flourish professionally within Ascend and the cannabis industry as a whole;
6. Having a diverse and socially representative pool of employees;
7. Empowering the next generation of entrepreneurs and leaders through hiring, training, and teaching;
8. Maintaining the Social Justice leadership rating from the Cannabis Control Commission;
9. Running an environmentally friendly ME in the Commonwealth of Massachusetts; and

10. Creating branded marijuana products that are safe, effective, consistent, and high quality.

## **2. COMPANY DESCRIPTION**

### **2.1. Structure**

Ascend is applying for a Certificate of Registration from the Massachusetts Cannabis Control Commission (the “**Commission**”) to operate a Marijuana Retailer Establishment in the Commonwealth.

### **2.2. Operations**

Ascend’s New Bedford Marijuana Retailer Establishment will be located at 115 Coggeshall Street, New Bedford, MA 02746.

Ascend will establish inventory controls and procedures for reviewing comprehensive inventories of marijuana products and stored marijuana; conduct a monthly inventory of marijuana; conduct a comprehensive annual inventory at least once every year after the date of the previous comprehensive inventory; and promptly transcribe inventories if taken by use of an oral recording device.

Ascend will tag and track all marijuana and marijuana products using a seed-to-sale methodology in a form and manner approved by the Commission.

No marijuana products will be sold or otherwise marketed that is not tested by Independent Testing Laboratories, except as allowed under 935 CMR 500.000.

Ascend will maintain records which will be available for inspection by the Commission upon request. The records will be maintained in accordance with generally accepted accounting principles. Records will be maintained for at least 12 months, or such longer periods as required pursuant to Commission regulations.

Ascend will obtain and maintain general liability insurance coverage for no less than \$1,000,000 per occurrence and \$2,000,000 in aggregate, annually, and product liability insurance coverage for no less than \$1,000,000 per occurrence and \$2,000,000 in aggregate, annually, except as provided in 935 CMR 500.105(10)(b) or otherwise approved by the Commission. The deductible for each policy will be no higher than \$5,000 per occurrence.

Ascend will provide adequate lighting, ventilation, temperature, humidity, space, and equipment, in accordance with applicable provisions of 935 CMR 500.105 and 500.110.

All recyclables and waste, including organic waste composed of or containing finished marijuana and marijuana products, will be stored, secured, and managed in accordance with applicable state and local statutes, ordinances, and regulations. Organic material, recyclable material, solid waste, and liquid waste containing marijuana or by-products of marijuana processing will be disposed of in compliance with all applicable state and federal requirements.

Ascend will demonstrate consideration of the factors for Energy Efficiency and Conservation outlined in 935 CMR 500.105(15) as part of its operating plan and application for licensure.

Prior to commencing operations, Ascend will provide proof of having obtained a surety bond in an amount equal to its licensure fee payable to the Marijuana Regulation Fund. The bond will ensure payment of the cost incurred for the destruction of cannabis goods necessitated by a violation of St. 2016, c. 334, as amended by St. 2017, c. 55 or 935 CMR 500.000 or the cessation of operation of Ascend.

Ascend and Ascend agents will comply with all local rules, regulations, ordinances, and bylaws.

### **2.3. Security**

Ascend will contract with a professional security and alarm company to design, implement, and monitor a comprehensive security plan to ensure that the facility is a safe and secure environment for employees and the local community.

Ascend's state-of-the-art security system will consist of perimeter windows, as well as duress, panic, and holdup alarms connected to local law enforcement for efficient notification and response in the event of a security threat. The system will also include a failure notification system that will immediately alert the executive management team if a system failure occurs.

A redundant alarm system will be installed to ensure that active alarms remain operational if the primary system is compromised.

Interior and exterior HD video surveillance of all areas that contain marijuana, entrances, exits, and parking lots will be operational 24/7 and available to the New Bedford Police Department. These surveillance cameras will remain operational even in the event of a power outage.

The exterior of the dispensary and surrounding area will be sufficiently lit, and foliage will be minimized to ensure clear visibility of the area at all times.

Only Ascend's registered agents and other authorized visitors (e.g. contractors, vendors) will be allowed access to the facility, and a visitor log will be maintained in perpetuity.

All agents and visitors will be required to visibly display an ID badge, and Ascend will maintain a current list of individuals with access.

On-site consumption of marijuana by Ascend's employees and visitors will be prohibited. Ascend will have security personnel on-site during business hours.

## **3. MARKET RESEARCH**

### **3.1. Industry**

Ascend's proposed location is located in New Bedford.

### **3.2. Customers**

In Massachusetts, marijuana sales are expected to equal \$1.4 billion in 2025, according to New Frontier Data.

### **3.3. Competitors**

Ascend's competitors include other existing and proposed dispensaries in Southeastern Massachusetts.

### **3.4. Competitive Advantage**

Ascend's competitive advantages over its competition will include its focus on effect-based products and a comprehensive customer education process to ensure that new clientele receive a wide breadth of information about their choices in strain selection; product selection; method of consumption; and other relevant information.

Ascend will seek to offer customers a best-in-class retail experience that demonstrates excellence in operational efficiency, employee knowledge, product selection and offerings; consistency and quality of product; and proximity to locations where they live and work.

### **3.5 Regulations**

Ascend's location in New Bedford will be a Marijuana Retailer Establishment and will fully comply with all applicable laws and regulations consistent including but not limited to St. 2016, c. 334, as amended by St. 2017, c. 55 and 935 CMR 500.000.

Ascend will be registered to do business in the Commonwealth as a domestic business corporation or another domestic business entity. Ascend will remain in good standing with the Massachusetts Secretary of the Commonwealth, the Department of Revenue and the Department of Unemployment Assistance.

Ascend will apply for all state and local permits and approvals required to renovate and operate the facility.

Ascend will also work cooperatively with various municipal departments to ensure that the proposed facility complies with all state and local codes, rules and regulations with respect to design, renovation, operation, and security.

## **4. PRODUCT / SERVICE**

### **4.1. Dispensing Procedures**

In accordance with 935 CMR 500.140(3), access to Ascend's facility is limited to individuals 21 years of age and older. Upon a customer's entry into the Ascend premises, an Ascend agent will immediately inspect the customer's proof of identification and determine the

individual's age.

An individual will not be admitted to the premises unless the retailer has verified that the individual is 21 years of age or older by an individual's proof of identification. At the door, a designated staff member will collect valid customer identification and confirm a minimum age of 21 years old. Failing the confirmation of 21 years of age or older, an individual will be prohibited from entering the premises.

Once inside the retail area, customers will enter a queue to obtain individualized service where they may select any of the products available to them with the help of an Ascend agent. Upon checkout, customers will be required to confirm their identities and age a second time. Check out also activates the seed-to-sale tracking system ("METRC") that is compliant with 935 CMR 500.105(8).

Per M.G.L. c. 94G § 7, sales are limited to one ounce of marijuana flower or five grams of marijuana concentrate per transaction. All required taxes will be collected at the point of sale.

Once a customer has selected a product for purchase, an Ascend agent will collect the chosen items from the designated product storage area. An Ascend agent will then scan each product barcode into the point of sale system. In the event of a flower sale, staff will weigh the chosen amount of flower and then place it in a tamper-resistant/child-resistant, resealable package that is compliant with 935 CMR 500.105(5). An Ascend agent will affix a label, as generated by the point of sale system, indicating the date, strain name, cannabinoid profile, and all applicable warnings detailed in 935 CMR 500.105.

In the event an Ascend agent determines an individual would place themselves or the public at risk, the agent will refuse to sell any marijuana products to the consumer. Ascend will use the point of sale security system to accept payment and complete sales. The system can back up and securely cache each sale for inspection.

Pursuant to 935 CMR 500.140(6)(d), Ascend will conduct a monthly analysis of its equipment and sales data to determine that no software has been installed that could be utilized to manipulate or alter sales data and that no other methodology has been employed to manipulate or alter sales data. If any such malware is found, Ascend will immediately report the occurrence to the Commission and assist in any subsequent investigation into the matter. Ascend will maintain a record of the monthly analyses and will make it available for inspection by the Commission upon request. Further, Ascend will cooperate with the Commission and the Department of Revenue to ensure compliance with any and all taxes in accordance with the laws of the Commonwealth and 935 CMR 500.000.

Ascend places a premium on cleanliness, hygiene, and proper product storage to achieve and maintain successful operation of the business. In addition to regularly sanitizing surfaces with products kept separately and away from marijuana products, Ascend staff will ensure personal hygiene including washing hands throughout the day and before handling or dispensing any marijuana products. All products available for sale and consumption will be tested for impurities and subjected to Ascend's policies governing quality control per 935 CMR 500.105.



In compliance with 935 CMR 501.140(8), Ascend will provide educational materials designed to help consumers make informed marijuana product purchases. Ascend's educational materials will describe the varying types of products available at Ascend, as well as the types and methods of consumption. The materials will offer education on cannabis titration: the method of using the smallest amount of a given marijuana product necessary to bring about the desired effect.

Additional topics discussed in consumer materials will include potency; proper dosing; the delayed effects of edible marijuana products; and substance abuse and related treatment programs, marijuana tolerance, dependence, and withdrawal.

#### **4.2. Pricing Structure**

Ascend's pricing structure will vary based on market conditions. Ascend plans to sell products of superior quality and will price its products accordingly.

#### **4.3. Customer Education**

**FIRST VISIT:** Customers visiting the facility for the first time will go through an intake process where they receive a primer on regulations surrounding cannabis; how to safely consume, store, and transport their product; and information regarding strains, dosage, and desired effects. All customers will be required to review and sign a community norms agreement, in which they certify that they understand that the ability to utilize an Ascend store is contingent on respect for the surrounding neighborhood. Public consumption, diversion, queuing, loitering, and other behaviors are not tolerated and practicing them will eliminate the opportunity for future store visits.

**VISUAL MATERIALS:** Flyers, pamphlets, and other materials will be available in the entry vestibule as well as throughout the dispensary floor. There will also be signage proximate to point-of-sale terminals reminding customers about the consequences of product diversion.

**AUDITORY REMINDERS:** In a friendly, approachable manner, customer service representatives will educate customers at the point of sale about how to safely store, consume, and transport their product.

**TAKEAWAY MATERIALS:** Product safety guides and general informational material will be placed in each and every bag to ensure customers have access to safety materials when they intend to utilize the product.

### **5. MARKETING & SALES**

#### **5.1. Growth Strategy**

Ascend's plan to grow the company includes:

1. Strong and consistent branding;
2. Intelligent, targeted, and compliant marketing programs;

3. A compelling loyalty program;
4. An exemplary customer in-store experience;
5. A caring and thoughtful staff made of consummate professionals; and
6. Company ethos that results in comprehensive social justice initiatives.

Ascend plans to seek additional, appropriate locations in the surrounding area to expand business and reach an increased number of customers in the future.

## **5.2. Communication**

Ascend will engage in reasonable marketing, advertising, and branding practices that do not jeopardize the public health, welfare, or safety of the general public, or promote the diversion of marijuana or marijuana use in individuals younger than 21 years old. Any marketing, advertising, and branding created for viewing by the public will include the statement: “Please Consume Responsibly,” in a conspicuous manner on the face of the advertisement and will include a minimum of two of the warnings, located at 935 CMR 500.105(4)(a), in their entirety in a conspicuous manner on the advertisement.

All marketing, advertising, and branding produced by or on behalf of Ascend will include the following warning, including capitalization, in accordance with M.G.L. c. 94G, § 4(a½)(xxvi): “This product has not been analyzed or approved by the Food and Drug Administration (FDA). There is limited information on the side effects of using this product, and there may be associated health risks. Marijuana use during pregnancy and breast-feeding may pose potential harms. It is against the law to drive or operate machinery when under the influence of this product. KEEP THIS PRODUCT AWAY FROM CHILDREN. There may be health risks associated with consumption of this product. Marijuana can impair concentration, coordination, and judgment. The impairment effects of edible marijuana may be delayed by two hours or more. In case of accidental ingestion, contact poison control hotline 1-800-222-1222 or 9-1-1. This product may be illegal outside of MA.”

Ascend will communicate with customers through:

1. A company run website;
2. A company blog;
3. Popular cannabis discovery networks such as WeedMaps and Leafly;
4. Popular social media platforms such as Instagram, Facebook, Twitter, and SnapChat;
5. Opt-in direct communications; and
6. In-store signage.

Ascend will provide a catalogue and a printed list of the prices and strains of marijuana available to consumers and will post the same catalogue and list on its website and in the retail store.

### **5.3. Sales**

Ascend will sell its product and service by engaging customers with knowledgeable in-store personnel.

Ascend will seek events where 85% or more of the audience is reasonably expected to be 21 years of age or older, as determined by reliable, current audience composition data. At these events, Ascend will market its products and services to reach a wide range of qualified, adult-use consumers.

Ascend will ensure that all marijuana products that are provided for sale to consumers are sold in tamper or child-resistant packaging. Packaging for marijuana products sold or displayed for consumers, including any label or imprint affixed to any packaging containing marijuana products or any exit packages, will not be attractive to minors.

Packaging for marijuana products sold or displayed for consumers in multiple servings will allow a consumer to easily perform the division into single servings and include the following statement on the exterior of the package in a printed font that is no smaller than ten-point Times New Roman, Helvetica, or Arial, including capitalization: “INCLUDES MULTIPLE SERVINGS.” Ascend will not sell multiple serving beverages and each single serving of an edible marijuana product contained in a multiple-serving package will be marked, stamped, or otherwise imprinted with the symbol issued by the Commission under 935 CMR 500.105(5) that indicates that the single serving is a marijuana product. At no point will an individual serving size of any marijuana product contain more than five (5) milligrams of delta-nine tetrahydrocannabinol.




### **5.4. Logo**

Ascend has developed a logo to be used in labeling, signage, and other materials such as letterhead and distributed materials.

The logo is discreet, unassuming, and does not use medical symbols, images of marijuana, related paraphernalia, or colloquial references to cannabis or marijuana.

## **6. FINANCIAL PROJECTIONS**

(\$ in millions)

|                                      | Fiscal Year Ended December 31,  |   |   |         |
|--------------------------------------|---|---|---|---------|
|                                      | 2021E   | 2022E   | 2023E   | 2024E   |
| <b><u>Southcoast Apothecary:</u></b> | Stub Year   |   |   |         |
| Customers Per Day                    | 450   | 428   | 436   | 445     |
| % Change Y/Y                         | -   | (5.0%)  | 2.0%  | 2.0%    |
| Average Ticket                       | \$80.00  | \$80.00  | \$80.00  | \$80.00 |
| % Change Y/Y                         | -   | 0.0%  | 0.0%  | 0.0%    |
| Revenue                              | 10.980  | 12.449  | 12.698  | 12.952  |
| % Growth Y/Y                         | -   | 13%   | 2%  | 2%      |
| Cost of Goods Sold                   | 6.039   | 6.847   | 6.984   | 7.123   |
| Gross Profit                         | 4.941   | 5.602   | 5.714   | 5.828   |
| % Gross Margin                       | 45.0%   | 45.0%   | 45.0%   | 45.0%   |
| Operating Expenses                   | 2.192   | 2.351   | 2.362   | 2.374   |
| Opex as % of Sales                   | 20.0%   | 18.9%   | 18.6%   | 18.3%   |
| Operating Income                     | 2.749   | 3.251   | 3.352   | 3.454   |
| % Operating Margin                   | N/M   | 26%   | 26%   | 27%     |
| Income Taxes                         | 1.359   | 1.541   | 1.571   | 1.603   |
| Net Income                           | 1.390   | 1.711   | 1.780   | 1.851   |

## PLAN FOR RESTRICTING ACCESS TO AGE 21 AND OLDER

Pursuant to 935 CMR 500.050(8)(b), SouthCoast Apothecary, LLC (“Ascend”) will only be accessible to individuals, visitors, and agents who are 21 years of age or older with a verified and valid government-issued photo ID. Upon entry into the premises of the marijuana establishment by an individual, visitor, or agent, a Ascend agent will immediately inspect the person’s proof of identification and determine the person’s age, in accordance with 935 CMR 500.140(2).

In the event Ascend discovers any of its agents intentionally or negligently sold marijuana to an individual under the age of 21, the agent will be immediately terminated, and the Commission will be promptly notified, pursuant to 935 CMR 500.105(1)(m). Ascend will not hire any individuals who are under the age of 21 or who have been convicted of distribution of controlled substances to minors in the Commonwealth or a like violation of the laws in other jurisdictions, pursuant to 935 CMR 500.030(1).

Pursuant to 935 CMR 500.105(4), Ascend will not engage in any advertising practices that are targeted to, deemed to appeal to or portray minors under the age of 21. Ascend will not engage in any advertising by means of television, radio, internet, mobile applications, social media, or other electronic communication, billboard or other outdoor advertising, including sponsorship of charitable, sporting or similar events, unless at least 85% of the audience is reasonably expected to be 21 years of age or older as determined by reliable and current audience composition data. Ascend will not manufacture or sell any edible products that resemble a realistic or fictional human, animal, fruit, or sporting-equipment item including artistic, caricature or cartoon renderings, pursuant to 935 CMR 500.150(1)(b). In accordance with 935 CMR 500.105(4)(a)(5), any advertising created for public viewing will include a warning stating, **“For use only by adults 21 years of age or older. Keep out of the reach of children. Marijuana can impair concentration, coordination and judgment. Do not operate a vehicle or machinery under the influence of marijuana. Please Consume Responsibly.”** Pursuant to 935 CMR 500.105(6)(b), Ascend packaging for any marijuana or marijuana products will not use bright colors, defined as colors that are “neon” in appearance, resemble existing branded products, feature cartoons, a design, brand or name that resembles a non-cannabis consumer or celebrities commonly used to market products to minors, feature images of minors or other words that refer to products commonly associated with minors or otherwise be marketed to minors. Ascend’s website will require all online visitors to verify they are 21 years of age or older prior to accessing the website, in accordance with 935 CMR 500.105(4)(b)(13).

## **QUALITY CONTROL AND TESTING**

### **Quality Control**

SouthCoast Apothecary, LLC (“Ascend”) will comply with the following sanitary requirements:

1. Any Ascend agent whose job includes contact with marijuana or nonedible marijuana products, including cultivation, production, or packaging, is subject to the requirements for food handlers specified in 105 CMR 300.000, and all edible marijuana products will be prepared, handled, and stored in compliance with the sanitation requirements in 105 CMR 590.000, and with the requirements for food handlers specified in 105 CMR 300.000.
2. Any Ascend agent working in direct contact with preparation of marijuana or nonedible marijuana products will conform to sanitary practices while on duty, including:
  - a. Maintaining adequate personal cleanliness; and
  - b. Washing hands thoroughly in an adequate hand-washing area before starting work, and at any other time when hands may have become soiled or contaminated.
3. Ascend’s hand-washing facilities will be adequate and convenient and will be furnished with running water at a suitable temperature. Hand-washing facilities will be located in Ascend’s production areas and where good sanitary practices require employees to wash and sanitize their hands, and will provide effective hand-cleaning and sanitizing preparations and sanitary towel service or suitable drying devices;
4. Ascend’s facility will have sufficient space for placement of equipment and storage of materials as is necessary for the maintenance of sanitary operations;
5. Ascend will ensure that litter and waste is properly removed and disposed of so as to minimize the development of odor and minimize the potential for the waste attracting and harboring pests. The operating systems for waste disposal will be maintained in an adequate manner pursuant to 935 CMR 500.105(12);
6. Ascend’s floors, walls, and ceilings will be constructed in such a manner that they may be adequately kept clean and in good repair;
7. Ascend’s facility will have adequate safety lighting in all processing and storage areas, as well as areas where equipment or utensils are cleaned;
8. Ascend’s buildings, fixtures, and other physical facilities will be maintained in a sanitary condition;
9. Ascend will ensure that all contact surfaces, including utensils and equipment, will be maintained in a clean and sanitary condition. Such surfaces will be cleaned and sanitized as frequently as necessary to protect against contamination, using a sanitizing agent registered by the US Environmental Protection Agency (EPA), in accordance with labeled instructions. Equipment and utensils will be so designed and of such material and workmanship as to be adequately cleanable;
10. All toxic items will be identified, held, and stored in a manner that protects against contamination of marijuana products. Toxic items will not be stored in an area containing products used in the cultivation of marijuana. Ascend acknowledges and understands that the Commission may require Ascend to demonstrate the intended and actual use of any toxic items found on Ascend’s premises;

11. Ascend will ensure that its water supply is sufficient for necessary operations, and that any private water source will be capable of providing a safe, potable, and adequate supply of water to meet Ascend's needs;
12. Ascend's plumbing will be of adequate size and design, and adequately installed and maintained to carry sufficient quantities of water to required locations throughout the marijuana establishment. Plumbing will properly convey sewage and liquid disposable waste from the marijuana establishment. There will be no cross-connections between the potable and wastewater lines;
13. Ascend will provide its employees with adequate, readily accessible toilet facilities that are maintained in a sanitary condition and in good repair;
14. Ascend will hold all products that can support the rapid growth of undesirable microorganisms in a manner that prevents the growth of these microorganisms; and
15. Ascend will store and transport finished products under conditions that will protect them against physical, chemical, and microbial contamination, as well as against deterioration of finished products or their containers.

Ascend's vehicles and transportation equipment used in the transportation of marijuana products or edibles requiring temperature control for safety will be designed, maintained, and equipped as necessary to provide adequate temperature control to prevent the marijuana products or edibles from becoming unsafe during transportation, consistent with applicable requirements pursuant to 21 CFR 1.908(c).

Ascend will ensure that Ascend's facility is always maintained in a sanitary fashion and will comply with all applicable sanitary requirements.

Ascend will follow established policies and procedures for handling voluntary and mandatory recalls of marijuana products. Such procedures are sufficient to deal with recalls due to any action initiated at the request or order of the Commission, and any voluntary action by Ascend to remove defective or potentially defective marijuana products from the market, as well as any action undertaken to promote public health and safety.

Any inventory that becomes outdated, spoiled, damaged, deteriorated, mislabeled, or contaminated will be disposed of in accordance with the provisions of 935 CMR 500.105(12), and any such waste will be stored, secured, and managed in accordance with applicable state and local statutes, ordinances, and regulations.

#### Testing

Ascend will not sell or otherwise market marijuana or marijuana products that are not capable of being tested by Independent Testing Laboratories, except as allowed under 935 CMR 500.000. No marijuana product will be sold or otherwise marketed for adult use that has not first been tested by an Independent Testing Laboratory and deemed to comply with the standards required under 935 CMR 500.160.

Any Independent Testing Laboratory relied upon by Ascend for testing will be licensed or registered by the Commission and (i) currently and validly licensed under 935 CMR 500.101: *Application Requirements*, or formerly and validly registered by the Commission; (ii) accredited

to ISO 17025:2017 or the most current International Organization for Standardization 17025 by a third-party accrediting body that is a signatory to the International Laboratory Accreditation Accrediting Cooperation mutual recognition arrangement or that is otherwise approved by the Commission; (iii) independent financially from any Medical Marijuana Treatment Center, Marijuana Establishment or Licensee; and (iv) qualified to test marijuana and marijuana products, including marijuana-infused products, in compliance with M.G.L. c. 94C, § 34; M.G.L. c. 94G, § 15; 935 CMR 500.000: *Adult Use of Marijuana*; 935 CMR 501.000: *Medical Use of Marijuana*; and Commission protocol(s).

Testing of Ascend's marijuana products will be performed by an Independent Testing Laboratory in compliance with a protocol(s) established in accordance with M.G.L. c. 94G, § 15 and in a form and manner determined by the Commission, including but not limited to, the *Protocol for Sampling and Analysis of Finished Medical Marijuana Products and Marijuana-infused Products*. Testing of Ascend's environmental media will be performed in compliance with the *Protocol for Sampling and Analysis of Environmental Media for Massachusetts Registered Medical Marijuana Dispensaries* published by the Commission.

Ascend's marijuana will be tested for the cannabinoid profile and for contaminants as specified by the Commission including, but not limited to, mold, mildew, heavy metals, plant-growth regulators, and the presence of pesticides. In addition to these contaminant tests, final ready-to-sell Marijuana Vaporizer Products shall be screened for heavy metals and Vitamin E Acetate (VEA) in accordance with the relevant provisions of the *Protocol for Sampling and Analysis of Finished Marijuana and Marijuana Products for Marijuana Establishments, Medical Marijuana Treatment Centers and Colocated Marijuana Operations*. Ascend acknowledges and understands that the Commission may require additional testing.

Ascend's policy of responding to laboratory results that indicate contaminant levels are above acceptable limits established in the protocols identified in 935 CMR 500.160(1) will include notifying the Commission (i) within 72 hours of any laboratory testing results indicating that the contamination cannot be remediated and disposing of the production batch and (ii) of any information regarding contamination as specified by the Commission immediately upon request by the Commission. Such notification will be from both Ascend and the Independent Testing Laboratory, separately and directly, and will describe a proposed plan of action for both the destruction of the contaminated product and the assessment of the source of contamination.

Ascend will maintain testing results in compliance with 935 CMR 500.000 *et seq* and the record keeping policies described herein and will maintain the results of all testing for no less than one year. Ascend acknowledges and understands that testing results will be valid for a period of one year, and that marijuana or marijuana products with testing dates in excess of one year shall be deemed expired and may not be dispensed, sold, transferred or otherwise conveyed until retested.

All transportation of marijuana to and from Independent Testing Laboratories providing marijuana testing services will comply with 935 CMR 500.105(13). All storage of Ascend's marijuana at a laboratory providing marijuana testing services will comply with 935 CMR 500.105(11). All excess marijuana will be disposed in compliance with 935 CMR 500.105(12), either by the Independent Testing Laboratory returning excess marijuana to Ascend for disposal



or by the Independent Testing Laboratory disposing of it directly. All Single-servings of marijuana products will be tested for potency in accordance with 935 CMR 500.150(4)(a) and subject to a potency variance of no greater than plus/minus ten percent (+/- 10%).

Any marijuana or marijuana products that fail any test for contaminants must either be reanalyzed without remediation, remediated or disposed of. In the event marijuana or marijuana products are reanalyzed, a sample from the same batch shall be submitted for reanalysis at the ITL that provided the original failed result. If the sample passes all previously failed tests at the initial ITL, an additional sample from the same batch previously tested shall be submitted to a second ITL other than the initial ITL for a Second Confirmatory Test. To be considered passing and therefore safe for sale, the sample must have passed the Second Confirmatory Test at a second ITL. Any Marijuana or Marijuana Product that fails the Second Confirmatory Test will not be sold, transferred or otherwise dispensed to Consumers, Patients or Licensees without first being remediated. Otherwise, any such product shall be destroyed in compliance with 935 CMR 500.105(12): *Waste Disposal*.

If marijuana or marijuana products are destined for remediation, a new test sample will be submitted to a licensed ITL, which may include the initial ITL for a full-panel test. Any failing Marijuana or Marijuana Product may be remediated a maximum of two times. Any Marijuana or Marijuana Product that fails any test after the second remediation attempt will not be sold, transferred or otherwise dispensed to Consumers, Patients or Licensees and will be destroyed in compliance with 935 CMR 500.105(12): *Waste Disposal*.

#### Quality Control Samples

Quality Control Samples provided to employees may not be consumed on Ascend's Premises nor may they be sold to another licensee or Consumer. Quality Control Samples will be tested in accordance with 935 CMR 500.160: Testing of Marijuana and Marijuana Products. Ascend will limit the Quality Control Samples provided to all employees in a calendar month period to the following aggregate amounts:

1. Five grams of Marijuana concentrate or extract, including but not limited to tinctures;
2. Five hundred milligrams of Edibles whereby the serving size of each individual sample does not exceed five milligrams and otherwise satisfies the potency levels set forth in 935 CMR 500.150(4): Dosing Limitations; and
3. Five units of sale per Cannabis product line and no more than six individual Cannabis product lines. For purposes of 935 CMR 500.130(8): Vendor Samples, a Cannabis product line shall mean items bearing the same Stock Keeping Unit Number.

If Quality Control Samples are provided as Vendor Samples pursuant to 935 CMR 500.130(8), they will be assigned a unique, sequential alphanumeric identifier and entered into the Seed-to-sale SOR in a form and manner to be determined by the Commission, and further, shall be designated as "Quality Control Sample."

Quality Control Samples will have a legible, firmly Affixed label on which the wording is no less than 1/16 inch in size containing at minimum the following information:

1. A statement that reads: “QUALITY CONTROL SAMPLE NOT FOR RESALE”;
2. The name and registration number of the Marijuana Product Manufacturer;
3. The quantity, net weight, and type of Marijuana flower contained within the package;  
and
4. A unique sequential, alphanumeric identifier assigned to the Production Batch associated with the Quality Control Sample that is traceable in the Seed-to-sale SOR.

Upon providing a Quality Control Sample to an employee, Ascend will record:

1. The reduction in quantity of the total weight or item count under the unique alphanumeric identifier associated with the Quality Control Sample;
2. The date and time the Quality Control Sample was provided to the employee;
3. The agent registration number of the employee receiving the Quality Control Sample;  
and
4. The name of the employee as it appears on their agent registration card.

## **PERSONNEL POLICIES INCLUDING BACKGROUND CHECKS**

### **Overview**

SouthCoast Apothecary, LLC (“Ascend”) will securely maintain personnel records, including registration status and background check records. Ascend will keep, at a minimum, the following personnel records:

- Job descriptions for each employee and volunteer position, as well as organizational charts consistent with the job descriptions;
- A personnel record for each marijuana establishment agent;
- A staffing plan that will demonstrate accessible business hours and safe operating conditions;
- Personnel policies and procedures; and
- All background check reports obtained in accordance with 935 CMR 500.030.

### **Agent Personnel Records**

In compliance with 935 CMR 500.105(9), personnel records for each agent will be maintained for at least twelve (12) months after termination of the agent’s affiliation with Ascend and will include, at a minimum, the following:

- All materials submitted to the Commission pursuant to 935 CMR 500.030(2);
- Documentation of verification of references;
- The job description or employment contract that includes duties, authority, responsibilities, qualifications, and supervision;
- Documentation of all required training, including training regarding privacy and confidentiality requirements, and the signed statement of the individual indicating the date, time, and place he or she received said training and the topics discussed, including the name and title of presenters;
- Documentation of periodic performance evaluations;
- A record of any disciplinary action taken;
- Notice of completed responsible vendor and eight-hour related duty training; and
- Results of initial background investigation, including CORI reports.

Personnel records will be kept in a secure location to maintain confidentiality and be only accessible to the agent’s manager or members of the executive management team.

### **Agent Background Checks**

- In addition to completing the Commission’s agent registration process, all agents hired to work for Ascend will undergo a detailed background investigation prior to being granted access to a Ascend facility or beginning work duties.
- Background checks will be conducted on all agents in their capacity as employees or volunteers for Ascend pursuant to 935 CMR 500.030 and will be used by the Director of Security, who will be registered with the Department of Criminal Justice Information Systems pursuant to 803 CMR 2.04: iCORI Registration and the Commission for purposes of determining the suitability of individuals for registration as a marijuana establishment agent with the licensee.
- For purposes of determining suitability based on background checks performed in accordance with 935 CMR 500.030, Ascend will consider:

- a. All conditions, offenses, and violations are construed to include Massachusetts law or like or similar law(s) of another state, the United States or foreign jurisdiction, a military, territorial or Native American tribal authority, or any other jurisdiction.
- b. All criminal disqualifying conditions, offenses, and violations include the crimes of attempt, accessory, conspiracy, and solicitation. Juvenile dispositions will not be considered as a factor for determining suitability.
- c. Where applicable, all look-back periods for criminal conditions, offenses, and violations included in 935 CMR 500.802 commence upon the date of disposition; provided, however, that if disposition results in incarceration in any institution, the look-back period will commence upon release from incarceration.
- Suitability determinations will be made in accordance with the procedures set forth in 935 CMR 500.800. In addition to the requirements established in 935 CMR 500.800, Ascend will:
  - a. Comply with all guidance provided by the Commission and 935 CMR 500.802: Tables B through D to determine if the results of the background are grounds for Mandatory Disqualification or Presumptive Negative Suitability Determination.
  - b. Consider whether offense(s) or information that would result in a Presumptive Negative Suitability Determination under 935 CMR 500.802. In the event a Presumptive Negative Suitability Determination is made, Ascend will consider the following factors:
    - i. Time since the offense or incident;
    - ii. Age of the subject at the time of the offense or incident;
    - iii. Nature and specific circumstances of the offense or incident;
    - iv. Sentence imposed and length, if any, of incarceration, if criminal;
    - v. Penalty or discipline imposed, including damages awarded, if civil or administrative;
    - vi. Relationship of offense or incident to nature of work to be performed;
    - vii. Number of offenses or incidents;
    - viii. Whether offenses or incidents were committed in association with dependence on drugs or alcohol from which the subject has since recovered;
    - ix. If criminal, any relevant evidence of rehabilitation or lack thereof, such as information about compliance with conditions of parole or probation, including orders of no contact with victims and witnesses, and the subject's conduct and experience since the time of the offense including, but not limited to, professional or educational certifications obtained; and
    - x. Any other relevant information, including information submitted by the subject.
  - c. Consider appeals of determinations of unsuitability based on claims of erroneous information received as part of the background check during the application process in accordance with 803 CMR 2.17: Requirement to Maintain a Secondary Dissemination Log and 2.18: Adverse Employment Decision Based on CORI or

Other Types of Criminal History Information Received from a Source Other than the DCJIS.

- All suitability determinations will be documented in compliance with all requirements set forth in 935 CMR 500 et seq. and guidance provided by the Commission.
- Background screening will be conducted by an investigative firm holding the National Association of Professional Background Screeners (NAPBS®) Background Screening Credentialing Council (BSCC) accreditation and capable of performing the searches required by the regulations and guidance provided by the Commission.
- References provided by the agent will be verified at the time of hire.
- As a condition of their continued employment, agents, volunteers, contractors, and subcontractors are required to renew their Program ID cards annually and submit to other background screening as may be required by Ascend or the Commission.

Personnel Policies and Training

As outlined in Ascend's Record Keeping Procedures, a staffing plan and staffing records will be maintained in compliance with 935 CMR 500.105(9) and will be made available to the Commission, upon request. All Ascend agents are required to complete training as detailed in Ascend's Qualifications and Training plan which includes but is not limited to Ascend's strict alcohol, smoke and drug-free workplace policy, job specific training, Responsible Vendor Training Program, confidentiality training including how confidential information is maintained at the marijuana establishment and a comprehensive discussion regarding the marijuana establishment's policy for immediate dismissal. All training will be documented in accordance with 935 CMR 105(9)(d)(2)(d).

Ascend will have a policy for the immediate dismissal of any dispensary agent who has:

- Diverted marijuana, which will be reported the Police Department and to the Commission;
- Engaged in unsafe practices with regard to Ascend operations, which will be reported to the Commission; or
- Been convicted or entered a guilty plea, plea of *nolo contendere*, or admission to sufficient facts of a felony drug offense involving distribution to a minor in the Commonwealth, or a like violation of the laws of another state, the United States or a foreign jurisdiction, or a military, territorial, or Native American tribal authority.

## **RECORDKEEPING PROCEDURES**

### **General Overview**

SouthCoast Apothecary, LLC (“Ascend”) has established policies regarding recordkeeping and record-retention in order to ensure the maintenance, safe keeping, and accessibility of critical documents. Electronic and wet signatures are accepted forms of execution of Ascend documents. Records will be stored at Ascend in a locked room designated for record retention. All written records will be available for inspection by the Commission upon request.

### **Recordkeeping**

To ensure that Ascend is keeping and retaining all records as noted in this policy, reviewing Corporate Records, Business Records, and Personnel Records to ensure completeness, accuracy, and timeliness of such documents will occur as part of Ascend’s quarter-end closing procedures. In addition, Ascend’s operating procedures will be updated on an ongoing basis as needed and undergo a review by the executive management team on an annual basis.

- **Corporate Records**

Corporate Records are defined as those records that require, at a minimum, annual reviews, updates, and renewals, including:

- Insurance Coverage:
  - Directors & Officers Policy
  - Product Liability Policy
  - General Liability Policy
  - Umbrella Policy
  - Workers Compensation Policy
  - Employer Professional Liability Policy
- Third-Party Laboratory Contracts
- Commission Requirements:
  - Annual Agent Registration
  - Annual Marijuana Establishment Registration
- Local Compliance:
  - Certificate of Occupancy
  - Special Permits
  - Variances
  - Site Plan Approvals
  - As-Built Drawings
- Corporate Governance:
  - Annual Report
  - Secretary of Commonwealth Filings

- **Business Records**

Business Records require ongoing maintenance and updates. These records can be electronic or hard copy (preferably electronic) and at minimum include:

- Assets and liabilities;
- Monetary transactions;
- Books of accounts, which will include journals, ledgers, and supporting documents, agreements, checks, invoices, and vouchers;
- Sales records including the quantity, form, and cost of marijuana products;

- Salary and wages paid to each employee, or stipend, executive compensation, bonus, benefit, or item of value paid to any persons having direct or indirect control over Ascend.
- Personnel Records
  - At a minimum, Personnel Records will include:
    - Job descriptions for each agent and volunteer position, as well as organizational charts consistent with the job descriptions;
    - A personnel record for each marijuana establishment agent. Such records will be maintained for at least twelve (12) months after termination of the agent's affiliation with Ascend and will include, at a minimum, the following:
      - All materials submitted to the Commission pursuant to 935 CMR 500.030(2);
      - Documentation of verification of references;
      - The job description or employment contract that includes duties, authority, responsibilities, qualifications, and supervision;
      - Documentation of all required training, including training regarding privacy and confidentiality requirements, and the signed statement of the individual indicating the date, time, and place he or she received said training and the topics discussed, including the name and title of presenters;
      - Documentation of periodic performance evaluations; and
      - A record of any disciplinary action taken.
      - Notice of completed responsible vendor and eight-hour related duty training.
    - A staffing plan that will demonstrate accessible business hours and safe operating conditions;
    - Personnel policies and procedures; and
    - All background check reports obtained in accordance with 935 CMR 500.030: Registration of Marijuana Establishment Agents 803 CMR 2.00: Criminal Offender Record Information (CORI).
- Handling and Testing of Marijuana Records
  - Ascend will maintain the results of all testing for a minimum of one (1) year.
- Inventory Records
  - The record of each inventory will include, at a minimum, the date of the inventory, a summary of the inventory findings, and the names, signatures, and titles of the agents who conducted the inventory.
- Seed-to-Sale Tracking Records
  - Ascend will use Metrc as the seed-to-sale tracking software to maintain real-time inventory. The seed-to-sale tracking software inventory reporting will meet the requirements specified by the Commission and 935 CMR 500.105(8)(e), including, at a minimum, an inventory of marijuana plants; marijuana plant-seeds and clones in any phase of development such as propagation, vegetation, flowering; marijuana ready for dispensing; all marijuana products; and all damaged, defective, expired, or contaminated marijuana and marijuana products awaiting disposal.
- Sales Records for Marijuana Retailer

- Ascend will maintain records that it has performed a monthly analysis of its equipment and sales data to determine that no software has been installed that could be utilized to manipulate or alter sales data and that no other methodology has been employed to manipulate the sales data and produce such records on request to the Commission.
- Incident Reporting Records
  - Within ten (10) calendar days, Ascend will provide notice to the Commission of any incident described in 935 CMR 500.110(9)(a), by submitting an incident report in the form and manner determined by the Commission which details the circumstances of the event, any corrective action taken, and confirmation that the appropriate law enforcement authorities were notified within twenty-four (24) hours of discovering the breach or incident.
  - All documentation related to an incident that is reportable pursuant to 935 CMR 500.110(9)(a) will be maintained by Ascend for no less than one year or the duration of an open investigation, whichever is longer, and made available to the Commission and law enforcement authorities within Ascend's jurisdiction on request.
- Visitor Records
  - A visitor sign-in and sign-out log will be maintained at the security office. The log will include the visitor's name, address, organization or firm, date, time in and out, and the name of the authorized agent who will be escorting the visitor.
- Waste Disposal Records
  - When marijuana or marijuana products are disposed of, Ascend will create and maintain an electronic record of the date, the type and quantity disposed of or handled, the manner of disposal or other handling, the location of disposal or other handling, and the names of the two Ascend agents present during the disposal or other handling, with their signatures. Ascend will keep disposal records for at least three (3) years. This period will automatically be extended for the duration of any enforcement action and may be extended by an order of the Commission.
- Security Records
  - A current list of authorized agents and service personnel that have access to the surveillance room will be available to the Commission upon request.
  - Recordings from all video cameras which shall be enabled to record twenty-four (24) hours each day shall be available for immediate viewing by the Commission on request for at least the preceding ninety (90) calendar days or the duration of a request to preserve the recordings for a specified period of time made by the Commission, whichever is longer.
  - Recordings shall not be destroyed or altered and shall be retained as long as necessary if Ascend is aware of pending criminal, civil or administrative investigation or legal proceeding for which the recording may contain relevant information.
- Transportation Records
  - Ascend will retain all transportation manifests for a minimum of one (1) year and make them available to the Commission upon request.
- Vehicle Records (as applicable)



- Records that any and all of Ascend's vehicles are properly registered, inspected, and insured in the Commonwealth and shall be made available to the Commission on request.
- Agent Training Records
  - Documentation of all required training, including training regarding privacy and confidentiality requirements, and a signed statement of the individual indicating the date, time, and place he or she received the training, the topics discussed and the name and title of the presenter(s).
- Responsible Vendor Training
  - Ascend shall maintain records of Responsible Vendor Training Program compliance for four (4) years and make them available to inspection by the Commission and any other applicable licensing authority on request during normal business hours.
- Closure
  - In the event Ascend closes, all records will be kept for at least two (2) years at Ascend's expense in a form (electronic, hard copies, etc.) and location acceptable to the Commission. In addition, Ascend will communicate with the Commission during the closure process and accommodate any additional requests the Commission or other agencies may have.
- Written Operating Policies and Procedures

Policies and Procedures related to Ascend's operations will be updated on an ongoing basis as needed and undergo a review by the executive management team on an annual basis. Policies and Procedures will include the following:

  - Security measures in compliance with 935 CMR 500.110;
  - Employee security policies, including personal safety and crime prevention techniques;
  - A description of Ascend's hours of operation and after-hours contact information, which will be provided to the Commission, made available to law enforcement officials upon request, and updated pursuant to 935 CMR 500.000.
  - Storage of marijuana in compliance with 935 CMR 500.105(11);
  - Description of the various strains of marijuana to be cultivated, processed or sold, as applicable, and the form(s) in which marijuana will be sold;
  - Price list for Marijuana and Marijuana Products, and alternate price lists for patients with documented Verified Financial Hardship as defined in 501.002: *Definitions*, as required by 935 CMR 501.100(1)(f);
  - Procedures to ensure accurate recordkeeping, including inventory protocols in compliance with 935 CMR 500.105(8) and (9);
  - Plans for quality control, including product testing for contaminants in compliance with 935 CMR 500.160;
  - A staffing plan and staffing records in compliance with 935 CMR 500.105(9)(d);
  - Emergency procedures, including a disaster plan with procedures to be followed in case of fire or other emergencies;
  - Alcohol, smoke, and drug-free workplace policies;
  - A plan describing how confidential information will be maintained;
  - Policy for the immediate dismissal of any dispensary agent who has:

- Diverted marijuana, which will be reported to Law Enforcement Authorities and to the Commission;
  - Engaged in unsafe practices with regard to Ascend operations, which will be reported to the Commission; or
  - Been convicted or entered a guilty plea, plea of *nolo contendere*, or admission to sufficient facts of a felony drug offense involving distribution to a minor in the Commonwealth, or a like violation of the laws of another state, the United States or a foreign jurisdiction, or a military, territorial, or Native American tribal authority.
- A list of all board of directors, members, and executives of Ascend, and members, if any, of the licensee must be made available upon request by any individual. This requirement may be fulfilled by placing this information on Ascend's website.
- Policies and procedures for the handling of cash on Ascend premises including but not limited to storage, collection frequency and transport to financial institution(s), to be available upon inspection.
- Policies and procedures to prevent the diversion of marijuana to individuals younger than 21 years old.
- Policies and procedures for energy efficiency and conservation that will include:
  - Identification of potential energy use reduction opportunities (including but not limited to natural lighting, heat recovery ventilation and energy efficiency measures), and a plan for implementation of such opportunities;
  - Consideration of opportunities for renewable energy generation, including, where applicable, submission of building plans showing where energy generators could be placed on site, and an explanation of why the identified opportunities were not pursued, if applicable;
  - Strategies to reduce electric demand (such as lighting schedules, active load management and energy storage); and
  - Engagement with energy efficiency programs offered pursuant to M.G.L. c. 25 § 21, or through municipal lighting plants.
- Policies and procedures to promote workplace safety consistent with applicable standards set by the Occupational Safety and Health Administration, including plans to identify and address any biological, chemical or physical hazards. Such policies and procedures shall include, at a minimum, a hazard communication plan, personal protective equipment assessment, a fire protection plan, and an emergency action plan.
- License Renewal Records
  - Ascend shall keep and submit as a component of the renewal application documentation that the establishment requested from its Host Community the records of any cost to a city or town reasonably related to the operation of the establishment, which would include the city's or town's anticipated and actual expenses resulting from the operation of the establishment in its community. The applicant shall provide a copy of the electronic or written request, which should include the date of the request, and either the substantive response(s) received or an attestation that no response was received from the city or town. The request should state that, in accordance with M.G.L. c. 94G, § 3(d), any cost to a city or

town imposed by the operation of a Marijuana Establishment or MTC shall be documented and considered a public record as defined by M.G.L. c. 4, § 7, cl. 26.

Record-Retention

Ascend will meet Commission recordkeeping requirements and retain a copy of all records for two (2) years, unless otherwise specified in the regulations.

## **MAINTAINING OF FINANCIAL RECORDS**

SouthCoast Apothecary, LLC's ("Ascend") operating policies and procedures ensure financial records are accurate and maintained in compliance with the Commission's Adult Use of Marijuana regulations (935 CMR 500). Financial records maintenance measures include policies and procedures requiring that:

- Confidential information will be maintained in a secure location, kept separate from all other records, and will not be disclosed without the written consent of the individual to whom the information applies, or as required under law or pursuant to an order from a court of competent jurisdiction; provided however, the Commission may access this information to carry out its official duties.
- All recordkeeping requirements under 935 CMR 500.105(9) are followed, including:
  - Keeping written business records, available for inspection, and in accordance with generally accepted accounting principles, which will include manual or computerized records of:
    - Assets and liabilities;
    - Monetary transactions;
    - Books of accounts, which will include journals, ledgers, and supporting documents, agreements, checks, invoices, and vouchers;
    - Sales records including the quantity, form, and cost of marijuana products; and
    - Salary and wages paid to each employee, or stipend, executive compensation, bonus, benefit, or item of value paid to any persons having direct or indirect control over Ascend.
- All sales recording requirements under 935 CMR 500.140(5) are followed, including:
  - Utilizing a point-of-sale (POS) system approved by the Commission, in consultation with the DOR, and a sales recording module approved by DOR;
  - Prohibiting the use of software or other methods to manipulate or alter sales data;
  - Conducting a monthly analysis of its equipment and sales data, and maintaining records, available to the Commission upon request, that the monthly analysis has been performed;
    - If Ascend determines that software has been installed for the purpose of manipulation or alteration of sales data or other methods have been utilized to manipulate or alter sales data: 1. it shall immediately disclose the information to the Commission; 2. it shall cooperate with the Commission in any investigation regarding manipulation or alteration of sales data; and 3. take such other action directed by the Commission to comply with 935 CMR 500.105.
  - Complying with 830 CMR 62C.25.1: *Record Retention* and DOR Directive 16-1 regarding recordkeeping requirements;
  - Adopting separate accounting practices at the point-of-sale for marijuana and marijuana product sales, and non-marijuana sales;
  - Maintaining such records that would allow for the Commission and the DOR to audit and examine the point-of-sale system used in order to ensure compliance with Massachusetts tax laws and 935 CMR 500.

- Additional written business records will be kept, including, but not limited to, records of:
  - Compliance with liability insurance coverage or maintenance of escrow requirements under 935 CMR 500.105(10) and all bond or escrow requirements under 935 CMR 500.105(16);
  - Fees paid under 935 CMR 500.005 or any other section of the Commission's regulations; and
  - Fines or penalties, if any, paid under 935 CMR 500.360 or any other section of the Commission's regulations.
- License Renewal Records
  - Ascend shall keep and submit as a component of the renewal application documentation that the establishment requested from its Host Community the records of any cost to a city or town reasonably related to the operation of the establishment, which would include the city's or town's anticipated and actual expenses resulting from the operation of the establishment in its community. The applicant shall provide a copy of the electronic or written request, which should include the date of the request, and either the substantive response(s) received or an attestation that no response was received from the city or town. The request should state that, in accordance with M.G.L. c. 94G, § 3(d), any cost to a city or town imposed by the operation of a Marijuana Establishment or MTC shall be documented and considered a public record as defined by M.G.L. c. 4, § 7, cl. 26.

## **QUALIFICATIONS AND TRAINING**

SouthCoast Apothecary, LLC (“Ascend”) will ensure that all employees hired to work at a Ascend facility will be qualified to work as a marijuana establishment agent and properly trained to serve in their respective roles in a compliant manner.

### **Qualifications**

In accordance with 935 CMR 500.030, a candidate for employment as a marijuana establishment agent must be 21 years of age or older. In addition, the candidate cannot have been convicted of a criminal offense in the Commonwealth involving the distribution of controlled substances to minors, or a like violation of the laws of another state, the United States, or foreign jurisdiction, or a military, territorial, or Native American tribal authority.

Ascend will also ensure that its employees are suitable for registration consistent with the provisions of 935 CMR 500.802. In the event that Ascend discovers any of its agents are not suitable for registration as a marijuana establishment agent, the agent’s employment will be terminated, and Ascend will notify the Commission within one (1) business day that the agent is no longer associated with the establishment.

### **Training**

As required by 935 CMR 500.105(2), and prior to performing job functions, each of Ascend’s agents will successfully complete a comprehensive training program that is tailored to the roles and responsibilities of the agent’s job function. A Ascend Agent will receive a total of eight (8) hours of training annually. A minimum of four (4) hours of training will be from Responsible Vendor Training Program (“RVT”) courses established under 935 CMR 500.105(2)(b). Any additional RVT over four (4) hours may count towards the required eight (8) hours of training.

Non-RVT may be conducted in-house by Ascend or by a third-party vendor engaged by the Ascend. Basic on-the-job training in the ordinary course of business may also be counted towards the required eight (8) hour training.

All Ascend Agents that are involved in the handling or sale of marijuana at the time of licensure or renewal of licensure will have attended and successfully completed the mandatory Responsible Vendor Training Program operated by an education provider accredited by the Commission.

### ***Basic Core Curriculum***

Ascend Agents must first take the Basic Core Curriculum within 90 days of hire, which includes the following subject matter:

- Marijuana's effect on the human body, including:
  - Scientifically based evidence on the physical and mental health effects based on the type of Marijuana Product;
  - The amount of time to feel impairment;
  - Visible signs of impairment; and
  - Recognizing the signs of impairment.
- Diversion prevention and prevention of sales to minors, including best practices.

- Compliance with all tracking requirements.
- Acceptable forms of identification. Training must include:
  - How to check identification;
  - Spotting and confiscating fraudulent identification;
  - Common mistakes made in identification verification.
  - Prohibited purchases and practices, including purchases by persons under the age of 21 in violation of M.G.L. c. 94G, § 13.
- Other key state laws and rules affecting Ascend Agents which shall include:
  - Conduct of Ascend Agents;
  - Permitting inspections by state and local licensing and enforcement authorities;
  - Local and state licensing and enforcement, including registration and license sanctions;
  - Incident and notification requirements;
  - Administrative, civil, and criminal liability;
  - Health and safety standards, including waste disposal;
  - Patrons prohibited from bringing marijuana and marijuana products onto licensed premises;
  - Permitted hours of sale;
  - Licensee responsibilities for activities occurring within licensed premises; xix. Maintenance of records, including confidentiality and privacy; and
  - Such other areas of training determined by the Commission to be included in a Responsible Vendor Training Program.

Ascend will encourage administrative employees who do not handle or sell marijuana to take the “Responsible Vendor” program on a voluntary basis to help ensure compliance. Ascend’s records of Responsible Vendor Training Program compliance will be maintained for at least four (4) years and made available during normal business hours for inspection by the Commission and any other applicable licensing authority on request.

After successful completion of the Basic Core Curriculum, each Ascend Agent involved in the handling or sale of marijuana will fulfill the four-hour RVT requirement every year thereafter for Ascend to maintain designation as a Responsible Vendor. Once the Ascend Agent has completed the Basic Core Curriculum, the Agent is eligible to take the Advanced Core Curriculum. Failure to maintain Responsible Vendor status is grounds for action by the Commission.

## **ENERGY COMPLIANCE PLAN**

SouthCoast Apothecary, LLC (“Ascend”) is currently exploring potential energy-use reduction opportunities such as natural lighting and energy efficiency measures and a plan for implementation of such opportunities. Ascend will update this plan as necessary and will further provide relevant documentation to the Commission during Architectural Review and during inspections processes.

### **Potential Energy-Use Reduction Opportunities**

Ascend is considering the following potential opportunities for energy-use reduction and plans for implementation of such opportunities.

1. Natural Lighting;
2. Energy efficient exterior wall construction, which may include batt insulation, continuous rigid insulation, and air and vapor barriers; and
3. Plumbing fixtures that are Water Sense rated for reduced water consumption.

As the need and opportunity for facility upgrades and maintenance arise in the future and the company becomes cash flow positive, Ascend will continue to evaluate energy-use reduction opportunities.

### **Renewable Energy Generation Opportunities**

Ascend is in the process of considering opportunities for renewable energy generation (including wind and solar options). Ascend’s preliminary examination of renewable energy generation has determined that the upfront costs of such options are too expensive at this time, although Ascend may reconsider at a future date. Ascend will also consult with its architects and engineers when designing the facility to determine the building’s capacity for renewable energy options (e.g. whether or not the roof can support the weight of solar panels). Nevertheless, our team is dedicated to consistently strive for sustainability and emissions reduction.

### **Strategies to Reduce Electric Demand**

Ascend is considering the following strategies to reduce electric demand:

1. Exterior and interior glazing on windows such that maximum natural daylight can enter the building without compromising security, reducing the reliance on artificial light during daytime hours;
2. Lighting fixtures that are energy efficient and used with Energy Star rated bulbs; and
3. Room lighting and switching will have occupancy sensors to reduce electrical consumption when rooms are unoccupied.

As the need and opportunity for facility upgrades and maintenance arise in the future and the company becomes cash flow positive, Ascend will continue to evaluate strategies to reduce electric demand.

### **Opportunities for Engagement with Energy Efficiency Programs**

Ascend also plans on engaging with energy efficiency programs offered by Mass Save and the Massachusetts Clean Energy Center and will coordinate with municipal officials to identify other



potential energy saving programs and initiatives. Ascend will also coordinate with its utility companies to explore any energy efficiency options available to Ascend.