

**Leaf Relief, Inc.**  
**0292-COO-01-0924**

**CHANGE OF OWNERSHIP AND CONTROL OVERVIEW**

1. Licensee Information:

<b>Licensee Business Name:</b>	Leaf Relief, Inc.
<b>Licensee d/b/a Name:</b>	N/A

2. License(s) Affected by this Change Request:

<b>License Number</b>	<b>License Type</b>
MR283784	Marijuana Retail

3. The licensee has paid the applicable fees for this change request.

4. The licensee is proposing to add the following as Persons Having Direct or Indirect Control:

<b>Individual</b>	<b>Role</b>
Seda Ciampa	Person with Direct or Indirect Control

5. Background checks were conducted on all proposed parties and no suitability issues were discovered.

6. The proposed parties do not appear to have exceeded any ownership or control limits over any license type.

**RECOMMENDATION**

Commission staff recommend review and decision on the request for change of ownership and control, and if approved, request that the approval be subject to the following conditions:

1. The licensee and proposed parties may now effectuate the approved change.
2. The licensee shall notify the Commission when the change has occurred.
3. The licensee shall submit a change of name request following this approval if any business or doing-business-as names associated with the license(s) will require modification.
4. The licensee is subject to inspection to ascertain compliance with Commission regulations.



5. The licensee shall remain suitable for licensure.
6. The licensee shall cooperate with and provide information to Commission staff.
7. The licensure is subject to notification to the Commission of any update to written operations plans required by 935 CMR 500.105(1) and/or 935 CMR 501.105(1) after effectuating the change, if applicable, and shall give Commission staff adequate opportunity to review said plans at the business location or the location where any such plans are maintained in the normal course of business.

