

received
8-23-23



**Archuleta County
Local Licensing Authority**
398 Lewis Street
P.O. Box 1507
Pagosa Springs, CO 81147
(970) 264-8401

APPLICATION FOR MARIJUANA BUSINESS

NEW LICENSE
 MODIFICATION

LICENSE RENEWAL
403R-00346

A SEPARATE LICENSE APPLICATION IS REQUIRED FOR EACH LICENSE TYPE

<input type="checkbox"/>	Medical Center License
<input type="checkbox"/>	Medical Center and Cultivation License
<input type="checkbox"/>	Medical Marijuana-Infused Product Manufacturer
<input type="checkbox"/>	

<input type="checkbox"/>	Retail Center License
<input checked="" type="checkbox"/>	Retail Optional Premises Cultivation License
<input type="checkbox"/>	Retail Store and Cultivation License
<input type="checkbox"/>	Retail Marijuana-Infused Product Manufacturer

Applicant is applying as:

Documents to be submitted by type of entity:

<input checked="" type="checkbox"/>	Corporation*	<input checked="" type="checkbox"/> Certificate of Incorporation
<input type="checkbox"/>	Partnership*	<input type="checkbox"/> Partnership agreement <input type="checkbox"/> Husband and Wife Partnership (no written agreement)
<input type="checkbox"/>	Limited Liability Company*	<input type="checkbox"/> Articles of Organization <input type="checkbox"/> Operating Agreement
<input type="checkbox"/>	Sole Proprietorship**	
<input type="checkbox"/>	Other:	Attach copy of agreements creating association or relationship between the parties.

*Certificate of Good Standing or Statement of Trade Named filed with the Colorado Secretary of State

**Sole Proprietorship (Individual) requires Verification of Lawful Presence per State Law (Signed Affidavit and Photo ID)

WHOLESALE SALES TAX LICENSE

**THIS LICENSE IS
NOT TRANSFERABLE**

USE ACCOUNT NUMBER for all references	LIABILITY INFORMATION		VALID THROUGH
	30837244-0000	48-0206-007	

PAGOSA THERAPEUTICS
354 BASTILLE DR PAGOSA SPRINGS CO 81147-9082



PAGOSA THERAPEUTICS
PO BOX 5843
PAGOSA SPRINGS CO 81147-5843

Executive Director
Department of Revenue



Important Verification Process

If you are new to Colorado sales tax visit: www.Colorado.gov/revenue/salestaxbasics

VERIFY that all information on your sales tax license is correct. Modify and update any errors you identify on the Internet through Revenue Online. **Access your tax account, file returns, submit payments, verify sales tax licenses and view sales tax rates through Revenue Online** at www.Colorado.gov/RevenueOnline

All the information you need to get started is on this document; have it with you before you begin. Follow these easy steps.

1. Go to www.Colorado.gov/RevenueOnline
2. **Click on Sign Up (Individual or Business) link on the right.**
3. **Click on Continue.**

Now click on: **Enter Taxpayer Information.** Click on the down arrow in the Account Type list and select Other. Use the first 8-digits of the account number shown on your license. Complete the rest of the screen. Next click on: **Enter Login Information** and complete the screen (this is information YOU get to create for the account). Next click on: **Enter Account Information** and complete the screen.

Your Letter ID is: L1657404384

Then click the **Submit** button. You will see a confirmation page on your screen. You should receive a confirmation email from the Colorado Department of Revenue. If you do not, check your Junk email folder. Once you have your Authorization Code return to Revenue Online via the link in your email. Enter the Login ID and Password you created.

1. Click on the **Login** button.
2. Enter the Authorization Code from your email (first time only).
3. Click Login. You should then be in your account. NOTE: If you have additional tax types registered under the same Account Number, such as withholding, you will be able to view those tax types through the account. You do not need to create separate Login IDs and Passwords for each tax in your account.

Filing Returns

To file a return, go to Revenue Online (www.Colorado.gov/RevenueOnline). You must file a return for each reporting period. If you have no tax to report, file a **zero** return. Tax reporting and payment are your responsibility. To avoid late penalties and interest, file online on or before the due date. If you discontinue sales, you may close your business location through Revenue Online.

Learn more and avoid unnecessary errors by attending our **free sales tax classes!** Sign up at www.TaxSeminars.state.co.us



BUSINESS INFORMATION			
Applicant's Legal Business Name/Trade Name (DBA) J and J Enterprises, Inc dba. Pagosa Therapeutics		12 Digit Parcel ID Number 5699 2030 3013	Zone District Commercial
Street Address of Business 354 Bastille Dr Pagosa Springs, CO 81147		Business Phone Number (970) 731-2970	
Mailing Address P.O. Box 5843	City Pagosa Springs	State Colorado	Zip 81147
PRIMARY CONTACT PERSON			
Primary Contact Person for Business Jeremy Bonin		Primary Contact Phone Number (970) 731-2970	Primary Contact Cell Number [REDACTED]
Primary Contact Email Address jbonin@jandjinc.net			
Primary Contact Address [REDACTED]	City Pagosa Springs	State CO	Zip 81147
STATE MARIJUANA LICENSE NUMBERS			
Medical Marijuana Center Number: _____			
Retail Marijuana Center Number: <u>402R-00263, 402R-00534, 402R-00829</u>			
Medical Optional Premises Cultivation Number: _____			
Retail Optional Premises Cultivation Number: <u>403R-00346, 403R-00955</u>			
Medical Infused Products Number: _____			
Retail Infused Products Number: _____			

Does the Applicant, as listed on Page 1 of this application, have legal possession of the premises for at least 1 year from the date that this license will be issued by virtue of ownership, lease or other arrangement?		Yes x	No
<input type="checkbox"/> Own	<input checked="" type="checkbox"/> Lease	<input type="checkbox"/> Other	
If leased, list the name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease			
Landlord 354 Bastille LLC	Tenant J and J Enterprises	Expires 3/31/26	
Does the Applicant propose to have food for retail sale at this location?		Yes	No x
If yes, describe the items:			

For the Retail Marijuana Optional Premises Cultivation facilities, do you perform cold water extractions?	Yes	No x
For the Retail Marijuana Infused Product Manufacturer facilities, what type(s) of extraction do you perform? <input type="checkbox"/> Butane <input type="checkbox"/> Propane <input type="checkbox"/> Carbon Dioxide <input type="checkbox"/> Ethanol <input type="checkbox"/> None <input type="checkbox"/> Isopropanol <input type="checkbox"/> Acetone <input type="checkbox"/> Heptane <input type="checkbox"/> Other: _____		

CHANGE TRADE NAME OR CORPORATE NAME/STRUCTURE

<input type="checkbox"/> Change of Trade Name / DBA only (attach the following supporting documents) <ol style="list-style-type: none"> Statement of Trade Name filed with the Secretary of State. 	
<input type="checkbox"/> Corporate Name/Structure Change (attach the following supporting documents) <ol style="list-style-type: none"> Certificate of Amendment filed with the Secretary of State, or Statement of Change filed with the Secretary of State, Minutes of Corporate meeting, Limited Liability Members meeting, Partnership agreement, <u>and</u> Operating Agreement. 	
Old Trade Name	New Trade Name

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

J and J Enterprises Inc

is a

Corporation

formed or registered on 07/11/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131401857 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/21/2023 that have been posted, and by documents delivered to this office electronically through 08/23/2023 @ 13:41:21 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/23/2023 @ 13:41:21 in accordance with applicable law. This certificate is assigned Confirmation Number 15259970 .



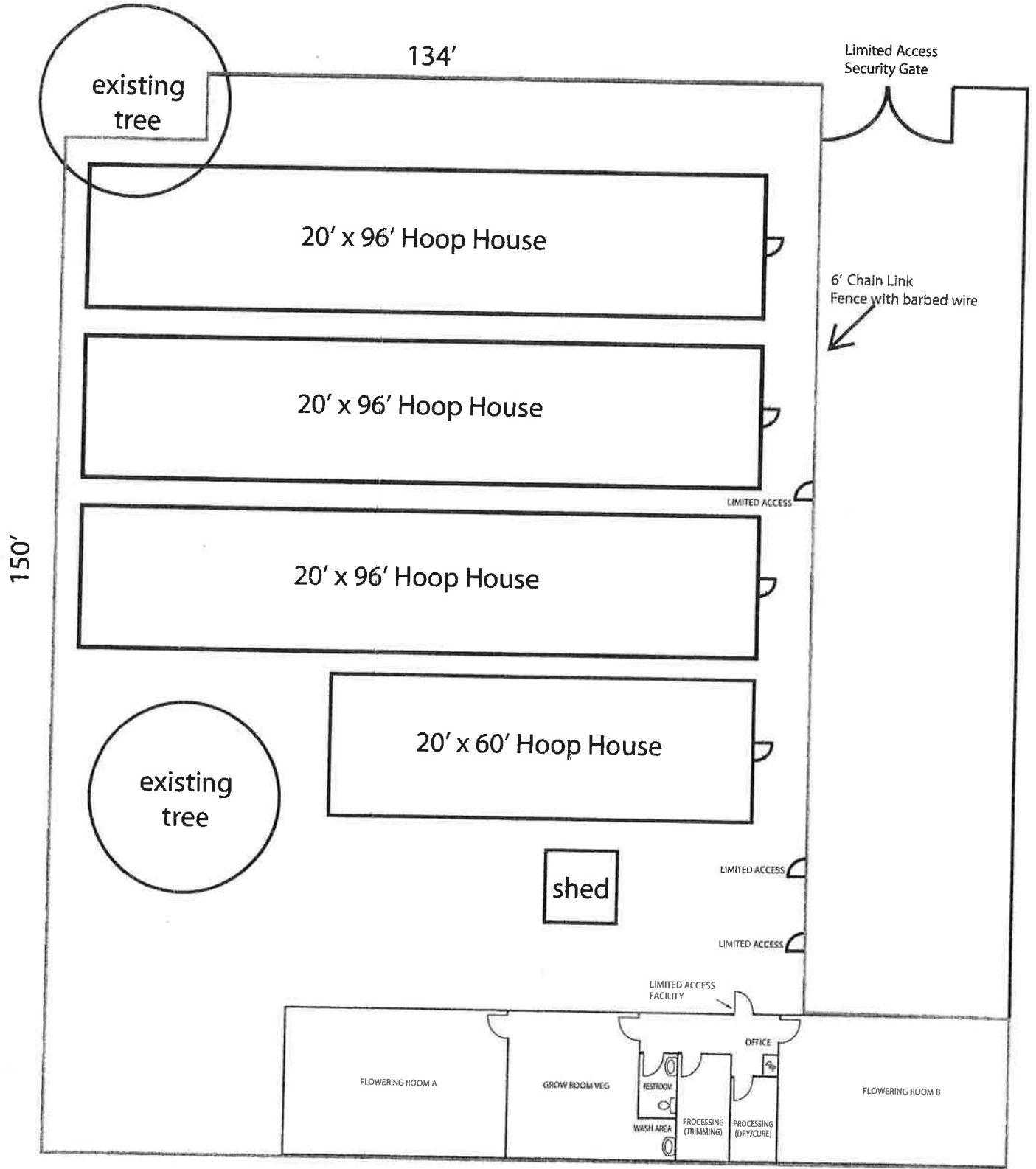
Jena Griswold

Secretary of State of the State of Colorado

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, <https://www.coloradosos.gov/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, <https://www.coloradosos.gov> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

354 Bastille Site Plan

Pagosa Therapeutics Lic# 403R-00346 OPC



354 Bastille Dr. Pagosa Springs, CO 81147

Renewal Application Information

At this time, Social Equity Fees cannot be paid when utilizing online application submission. Please use the hard copy applications, which can be dropped off or mailed to the MED Lakewood office, or an appointment can be made to submit the application in person at the MED Lakewood office.

Renewal Application Instructions and Checklist

Answer every question. If a question doesn't apply, indicate with an N/A. All renewals should be submitted prior to expiration.

The disclosure requirements and the main application must be completed in full by all applicants. If this renewal includes a PTC, QPF, QII, or Mobile Hospitality, the appropriate addendum must also be completed.

NOTE: There is no longer a grace period for the renewal of RMB licenses. If your license expires, you will need to cease operations and reapply for a new RMB license and pay all required fees.

See fee table on website: www.colorado.gov/revenue/med

All Forms Signed & Attached

Each of the following forms must be completed and signed by a CBO of the RMB and included with the application:

- Affirmation & Consent
- Tax Check Authorization
- Investigation Authorization/Authorization to Release Information
- Applicant's Request to Release Information
- Affirmation of Reasonable Care
- Upon request by the Division, an Applicant must provide additional information or documents required to process and investigate the application, within seven (7) days of the request. Please note: This deadline may be extended for a period of time commensurate with the scope of the request.

Please go [here](#) for the affidavits and release packet each owner will need to fill out and sign (only use this if more than one owner.)



Business Information

Applicant's Legal Business Name : J and J ENTERPRISES INC

License Number : 403R-00346

License Type : Retail Marijuana Cultivation Facility

License Expiration Date : 09/02/2023

Choose the type of grow if renewing a cultivation.

Indoor, Outdoor or Mixed : Indoor

If renewing a hospitality business, choose additional type below, (if applicable).

Mobile, etc. :

List all Registered Trade names here. If you do not have a trade name, please put N/A.

Trade Name(s) (DBA) : Pagosa Therapeutics

Federal Taxpayer ID (FEIN) : 901004046

Colorado Sales Tax License # : 29981376-0001

Name of Registered Agent : Jeremy Bonin

Ownership Type : Corporation

Physical Address

Street Address of Marijuana Business : 354 Bastille Drive

City : Pagosa Springs

County : Archuleta

State : Colorado - CO

ZIP : 81147

Country : United States

Phone Number : 9707312970

Business Email : admin@jandjinc.net

Mailing Address

Mailing Address (include suite or apt. #) : PO Box 5843

City : Pagosa Springs

County : Archuleta

State : Colorado - CO

Zip : 81147

Country : United States

Primary Contact Person

Primary Contact Person for Business (Full name) : Andrew Dwayne Baird

Phone Number : (970)-946-8537

Email : admin@jandjinc.net

Questions

Is the licensee (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation) under the age of twenty-one years?

Yes/No : No

Has the applicant or any business entity owned by the applicant, ever owned or applied for a Marijuana license in this or any other jurisdiction, foreign or domestic?

Yes/No : Yes

If yes, has it been subject to any of the following actions since the last renewal: (1) denial; (2) surrender; (3) order to show cause; (4) suspension; (5) fine; (6) revocation; (7) stipulation or settlement; (8) withdrawn.

Field6-17 : Yes

If yes, provide details

Details : CASE NO 20160034, We paid a \$2000 fine for using a pesticide not according to the label directions. We have not used the mentioned pesticide in several years

Please attach any applicable supporting documents.

SupportingDocumentation:

CO Dept of Law Case 20190034.pdf

Do you have legal possession of the licensed premises?

Yes/No : Yes

In the past year, has the licensee (including all parent or subsidiary companies, if any) had a tax lien filed against it, or become delinquent in the payment or filing of any judgments, taxes, interest or penalties owed to the State of Colorado.

Yes/No : No

In the past year, has the licensee (including all parent or subsidiary companies, if any), been indicted, served with a criminal summons, charged with or convicted of ANY crime or offense in any manner? Include ALL offenses regardless of class of crime or outcome, even if the charges were dismissed or you were found not guilty.

Yes/No : No

Within the last 12 months, has there been a change in ownership or ownership allocation, a transfer of stock, a change in the incorporation or in the corporate by-laws, or any other change affecting ownership or organizational structure of the licensee or its subsidiaries/affiliates?

Yes/No : No

Ownership Structure

List Controlling Beneficial Owners with 10% or greater ownership and/or Executive Officers, managers and any other individual that Controls the RMB.

Corporate Owners:

Is the Owner a Natural Person? : Yes

If the owner is a Person, enter the name below.

First Name : Jeremy

Middle Name : Douglas

Last Name : Bonin

Business Associated With : J and J Enterprises, Inc

Ownership Percentage in Controlling Entity/Parent Company : 50%

Ownership Percentage in Applicant :

Is the Owner a Natural Person? : Yes

If the owner is a Person, enter the name below.

First Name : Jason

Middle Name : Bryce

Last Name : Werby

Business Associated With : J and J Enterprises, Inc

Ownership Percentage in Controlling Entity/Parent Company : 50%

Ownership Percentage in Applicant :

Upload affirmation and release packet(s) here for at least ONE Controlling Beneficial Owner.

affirmationpacket:

Owner Packet.pdf

Are there any outstanding options, warrants or contracts, that may be exercised into an Owner's Interest in the RMB within the next 60 days that would constitute a CBO?

Yes/No : No

Are there any other Persons, other than those listed in the Ownership Structure, that can control the RMB?

Yes/No : No

Are any owners renewing their Owners Licenses with this application?

Yes/No : Yes

 **Reminder!**

Each owner must submit an Owner Renewal Application.

Has the applicant exercised reasonable care to confirm that its CBO's, PBO's (that are Non-Objecting PBO's), Qualified Institutional investors and Indirect Financial Interest Holders are NOT Person(s) prohibited under Section C.R.S. 44-10-307? (Publicly Traded Companies excluded)

Yes/No : Yes

Have any CBO's been removed or moved to PBO ownership status since the prior application?

Yes/No : No

List all Indirect Financial Interest Holders (if applicable).

Interest Holder:

Local Licensing Authority

Local Licensing Authority (Type NA if not applicable) : Archuleta County

Local Licensing Authority Contact Name (if known) : Mary Helminski

Contact Phone Number (if known) : (970) 264-8308

Contact Email (if known) : mhelminski@archueltacounty.org

Current License Status with Local Authority

Status : Licensed

Local License Expiration

Date of Expiration : 09/01/2023

Renewal Required Disclosures

Provide a copy of the Local Licensing Authority or Local Jurisdiction approval, licensure, and/or documentation demonstrating timely submission of pending local license renewal application.

CopyofLocallicense:

20230823142524.pdf

**WAIVER AND RELEASE OF LIABILITY
AND
AGREEMENT TO INDEMNIFY ARCHULETA COUNTY**

Release of Archuleta County From Liability to License Applicant and Licensee

By applying for a license pursuant to the Colorado Medical Marijuana Code (CRS §12-43.3-101, et seq.) and/or the Colorado Retail Marijuana Code (C.R.S. § 12-43.4-101, et seq.), and (if it is approved and issued) by accepting a license, from the Archuleta County Board of County Commissioners acting as the Archuleta County Local Licensing Authority, the applicant/licensee, and each of them, waives and releases Archuleta County, and its elected officials, employees, agents, insurers and attorneys, and each of them, from any liability for injuries, damages, costs and expenses of any nature whatsoever that result or relate to the investigation, arrest or prosecution of business owners, operators, employees, clients or customers of the applicant/licensee for a violation of state or federal laws, rules or regulations relating to marijuana.

Agreement to Indemnify Archuleta County

By applying for a license pursuant to the Colorado Medical Marijuana Code (CRS §12-43.3-101, et seq.) and/or the Colorado Retail Marijuana Code (C.R.S. § 12-43.4-101, et seq.), and (if it is approved and issued) by accepting a license, from the Archuleta County Board of County Commissioners acting as the Archuleta County Local Licensing Authority, the applicant/licensee, and each of them, jointly and severally if more than one, agrees to indemnify, defend and hold harmless Archuleta County, and its elected officials, employees, agents, insurers and attorneys, and each of them, against all liability, claims and demands, of any nature whatsoever, including, but not limited to, those arising from bodily injury, sickness, disease, death, property loss and property damage, arising out of or in any manner related to the operation of the medical marijuana business that is the subject of the license.

THE UNDERSIGNED AGREES TO THE RELEASE AND AGREEMENT ABOVE.

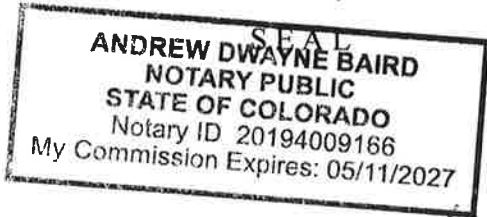
Signed on 8/29/23



Applicant

STATE OF COLORADO)
)
COUNTY OF ARCHULETA) ss.

The foregoing instrument was acknowledged before me this 23 day of August,
2023, by Jeremy Bonin, in their capacity as President
of J and J Enterprises.




Notary Public

My Commission Expires: 5/11/27