



## Massachusetts Cannabis Control Commission

### Marijuana Retailer

<b>Business Name:</b>	Berkshire Roots, Inc.	<b>License Number:</b>	MR281585
<b>Tax Identification Number:</b>	*****	<b>Issued Date:</b>	12/31/2018
<b>Business Email Address:</b>	khospot@ko-resources.com	<b>Expiration Date:</b>	12/31/2019
<b>Business Phone Number:</b>	413-553-9333	<b>Revoked Date:</b>	N/A
<b>Mailing Address:</b>	501 Dalton Ave Pittsfield MA 01201	<b>Surrendered Date:</b>	N/A
<b>Business Address:</b>	501 Dalton Ave Pittsfield MA 01201		

### CERTIFIED DISADVANTAGED BUSINESS ENTERPRISES (DBES)

Certified Disadvantaged Business Enterprises (DBEs): Not a DBE

### PRIORITY APPLICANT

Priority Applicant: yes  
 Priority Applicant Type: RMD Priority  
 Economic Empowerment Applicant Certification Number:  
 RMD Priority Certification Number: RP201903

### RMD INFORMATION

Document Category	Document Name	Type	ID	Upload Date
Final Certificate	Khem FCR (August 25 2017).pdf	pdf	5b22880ae0abb143d3545b73	06/14/2018

Name of RMD: Berkshire Roots Inc.

Department of Public Health RMD Registration Number: 19

Operational and Registration Status: Obtained Final Certificate of Registration and is open for business in Massachusetts

To your knowledge, is the existing RMD certificate of registration in good standing?: yes

If no, describe the circumstances below:

### PERSONS WITH DIRECT OR INDIRECT AUTHORITY

Person with Direct or Indirect Authority 1

<b>Percentage Of Ownership:</b> 1	<b>Percentage Of Control:</b> 16.6			
<b>Role:</b> Employee	<b>Other Role:</b> General Manager			
<b>First Name:</b> Kurt	<b>Middle Name:</b> M	<b>Last Name:</b> Hospot	<b>Suffix:</b>	<b>Former Last Name:</b>
<b>Alias - 1:</b>	<b>Alias - 2:</b>	<b>Alias - 3:</b>		
<b>Phone:</b> [REDACTED]	<b>Email:</b> [REDACTED]			
<b>Primary Address 1:</b> [REDACTED]	<b>Primary Address 2:</b>			
<b>City:</b> [REDACTED]	<b>State:</b> [REDACTED]	<b>Zip Code:</b> [REDACTED]		

Gender: Male

User Defined Gender:

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

Specify Race or Ethnicity: white

Person with Direct or Indirect Authority 2

Percentage Of Ownership: 100

Percentage Of Control: 16.6

Role: Director

Other Role: President

First Name: Albert

Middle Name: S

Last Name: Wojtkowski

Suffix:

Former Last Name:

Alias - 1:

Alias - 2:

Alias - 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Gender: Male

User Defined Gender:

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

Specify Race or Ethnicity: white

Person with Direct or Indirect Authority 3

Percentage Of Ownership: 1

Percentage Of Control: 16.6

Role: Executive / Officer

Other Role: Chief Operating Officer

First Name: Dennis

Middle Name: B

Last Name: Depaolo

Suffix:

Former Last Name:

Alias - 1:

Alias - 2:

Alias - 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Gender: Male

User Defined Gender:

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

Specify Race or Ethnicity: white

Person with Direct or Indirect Authority 4

Percentage Of Ownership: 1

Percentage Of Control: 16.6

Role: Executive / Officer

Other Role: Chief Executive Officer

First Name: Stephanie

Middle Name:

Last Name: Aussubel

Suffix:

Former Last Name:

Alias - 1:

Alias - 2:

Alias - 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Gender: Female

User Defined Gender:

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

Specify Race or Ethnicity: white

Person with Direct or Indirect Authority 5

Percentage Of Ownership: 1

Percentage Of Control:  
16.6

Role: Employee

Other Role: Director of Production

First Name: Joseph

Middle Name: C

Last Name:

Suffix:

Former Last Name:

Baillargeon

Alias - 1:

Alias - 2:

Alias - 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Gender: Male

User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French), Middle Eastern or North African (Lebanese, Iranian, Egyptian, Syrian, Moroccan, Algerian)

Specify Race or Ethnicity: white

Person with Direct or Indirect Authority 6

Percentage Of Ownership: 1

Percentage Of Control: 16.6

Role: Employee

Other Role: Operations Manager

First Name: Thomas

Middle Name: A

Last Name: McMenemy

Suffix:

Former Last Name:

Alias - 1:

Alias - 2:

Alias - 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Gender: Male

User Defined Gender:

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

Specify Race or Ethnicity: white

ENTITIES WITH DIRECT OR INDIRECT AUTHORITY

Entity with Direct or Indirect Authority 1

Percentage of Control: 100

Percentage of Ownership: 100

Entity Legal Name: KO Resources LLC

Entity DBA:

DBA

City:

Entity Description: Massachusetts LLC

Foreign Subsidiary Narrative:

Entity Phone: 413-553-5515

Entity Email: a.wojtkowski@ko-resources.com

Entity Website: n/a

Entity Address 1: 501 Dalton Avenue

Entity Address 2:

Entity City: Pittsfield

Entity State: MA

Entity Zip Code: 01201

Entity Mailing Address 1: 100 North Street

Entity Mailing Address 2: Suite 405

Entity Mailing City: Pittsfield

Entity Mailing State: MA

Entity Mailing Zip Code: 01201

Relationship Description: Berkshire Roots Inc. holds a final certificate and approval to sell issued by the Massachusetts Department of Public Health. Berkshire Roots Inc. is a wholly-owned subsidiary of KO Resources LLC. Berkshire Roots Inc. operates as directed by its officers and employees, and secures capital, real estate, equipment, payroll and operational expense and expertise from KO Resources LLC.

Berkshire Roots Inc. commenced patient sales in March 2017, having secured all required state and city approvals. The company continues to operate and remains in good standing.

CLOSE ASSOCIATES AND MEMBERS

Close Associates or Member 1

First Name: Andrea

Middle Name: F.

Last Name: Nuciforo

Suffix: Former

Jr. Last Name:

Alias 1: Alias 2: Alias 3:

Phone: [REDACTED] Email: [REDACTED]

Primary Address 1: [REDACTED] Primary Address 2:

City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

Describe the nature of the relationship this person has with the Marijuana Establishment: Andrea F. Nuciforo provides legal counsel to BRI including the preparation of application materials and regulatory compliance. Andrea is also a capital contributor as listed on various DPH filings.

Close Associates or Member 2

First Name: Matthew Middle Name: Last Name: Feeney Suffix: Former Last Name:

Alias 1: Alias 2: Alias 3:

Phone: [REDACTED] Email: [REDACTED]

Primary Address 1: [REDACTED] Primary Address 2:

City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

Describe the nature of the relationship this person has with the Marijuana Establishment: Matthew Feeney is a capital contributor.

CAPITAL RESOURCES - INDIVIDUALS

No records found

CAPITAL RESOURCES DOCUMENTATION - INDIVIDUALS

Document Category	Document Name	Type	ID	Upload Date
Bank Record	Berkshire Roots f-k-a Khem Organics App of Intent Section D - April 2017 (2).pdf	pdf	5b2294d9480890506ed9af39	06/14/2018
Bank Record	Berkshire Roots f-k-a Khem Organics App of Intent Section D - April 2017 (1).pdf	pdf	5b2294ff63f5ba502c343c52	06/14/2018

CAPITAL RESOURCES - ENTITIES

Entity Contributing Capital 1

Entity Legal Name: KO Resources LLC Entity DBA:

Email: a.wojtkowski@ko-resources.com Phone: 413-553-5515

Address 1: 501 Dalton Avenue Address 2:

City: Pittsfield State: MA Zip Code: 01201

Types of Capital: Monetary/Equity, Debt, Buildings, Land, Other Other Type of Capital: Total Value of Capital Provided: \$4000000 Percentage of Initial Capital: 100

Capital Attestation: Yes

CAPITAL RESOURCES DOCUMENTATION - ENTITY

Document Category	Document Name	Type	ID	Upload Date
Existence of Capital Verification	KOR Century Bank - 4636 March 2018.pdf	pdf	5b229557480890506ed9af3d	06/14/2018
Existence of Capital Verification	KOR Century Bank - 6508 March 2018.pdf	pdf	5b22956763f5ba502c343c56	06/14/2018

#### BUSINESS INTERESTS IN OTHER STATES OR COUNTRIES

No records found

#### BUSINESS INTEREST DOCUMENTATION

No documents uploaded

#### DISCLOSURE OF INDIVIDUAL INTERESTS

No records found

#### INDIVIDUAL INTEREST DOCUMENTATION

No documents uploaded

#### MARIJUANA ESTABLISHMENT PROPERTY DETAILS

Document Category	Document Name	Type	ID	Upload Date
Documentation of Bond	BRI - Retail Bond.pdf	pdf	5b8053493f9f81395f135e47	08/24/2018

Document Category	Document Name	Type	ID	Upload Date
Permission to Use Premises	Commercial_Assignment_and_Sublease[1].pdf	pdf	5b201fe9719dca5046294022	06/12/2018
Permission to Use Premises	501 Dalton Ave LEASE 01.06.17 SCAN.pdf	pdf	5b20239063f5ba502c343a1d	06/12/2018

Establishment Address 1: 501 Dalton Avenue

Establishment Address 2:

Establishment City: Pittsfield

Establishment Zip Code: 01201

Approximate square footage of the establishment: 24800

How many abutters does this property have?: 3

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

#### HOST COMMUNITY INFORMATION

Document Category	Document Name	Type	ID	Upload Date
Community Outreach Meeting Documentation	Host Community Certification - Berkshire Roots Inc - 2018.pdf	pdf	5b20288d10757543fbc6a696a	06/12/2018
Certification of Host Community Agreement	Berkshire Roots HCA 2018 - City of Pittsfield.pdf	pdf	5b2028b053361a503c1d4f6e	06/12/2018
Community Outreach Meeting Documentation	BRI - Community Outreach Notice and Att.pdf	pdf	5b61de59cfd7f028435e281e	08/01/2018
Community Outreach Meeting Documentation	BRI - Community Outreach Materials (A) .pdf	pdf	5b61dedb9aeb1f3479545db5	08/01/2018
Community Outreach Meeting Documentation	BRI - Community Outreach Materials (B) .pdf	pdf	5b61df24065a6d348d6fc54b	08/01/2018
Plan to Remain Compliant with Local Zoning	NLG - BRI Plan for Local Compliance .pdf	pdf	5b61df8b0dfb4034a118015f	08/01/2018
Community Outreach Meeting Documentation	Berkshire Eagle Classifieds Ad.pdf	pdf	5b884e850d95792d85f43350	08/30/2018

No documents uploaded

No documents uploaded

Date generated: 07/12/2019

Page: 5 of 12

Total amount of financial benefits accruing to the municipality as a result of the host community agreement: \$

### PLAN FOR POSITIVE IMPACT

Document Category	Document Name	Type	ID	Upload Date
Plan for Positive Impact	Berkshire Roots Inc 500 101(1)(j) Plan.pdf	pdf	5b22876d61b87343dda2ff4c	06/14/2018

### ADDITIONAL INFORMATION NOTIFICATION

Notification: I understand

### INDIVIDUAL BACKGROUND INFORMATION

#### Individual Background Information 1

Role: Other (specify)

Other Role: Capital Contributor

First Name: Matthew

Middle Name: C

Last Name: Feeney

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: Not associated with an RMD

Background Question: no

Description of Background Events:

#### Individual Background Information 2

Role: Other (specify)

Other Role: Capital Contributor

First Name: Andrea

Middle Name: F.

Last Name: Nuciforo

Suffix: Jr.

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: Not associated with an RMD

Background Question: no

Description of Background Events:

#### Individual Background Information 3

Role: Other (specify)

Other Role: President

First Name: Albert

Middle Name: S.

Last Name: Wojtkowski

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: RMD Owner

Background Question: no

Description of Background Events:

Individual Background Information 4

Role: Executive / Officer

Other Role:

First Name: Dennis

Middle Name: B.

Last Name: DePaolo

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: RMD Manager

Background Question: no

Description of Background Events:

Individual Background Information 5

Role: Manager

Other Role:

First Name: Kurt

Middle Name: M.

Last Name: Hospot

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: RMD Manager

Background Question: no

Description of Background Events:

Individual Background Information 6

Role: Manager

Other Role:

First Name: Thomas

Middle Name: A.

Last Name: McMenemy

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED]

Primary State: [REDACTED]

Primary Zip Code: [REDACTED]

Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: RMD Manager

Background Question: no

Description of Background Events:

Individual Background Information 7

Role: Director

Other Role:

First Name: Joseph

Middle Name: C.

Last Name: Baillargeon

Suffix:

Former Last Name:

Alias 1:

Alias 2:

Alias 3:

Phone: [REDACTED]

Email: [REDACTED]

Primary Address 1: [REDACTED]

Primary Address 2:

Primary City: [REDACTED] Primary State: [REDACTED] Primary Zip Code: [REDACTED] Years at this Address: [REDACTED]

Date of Birth: [REDACTED]

RMD Association: RMD Manager

Background Question: no

Description of Background Events:

Individual Background Information 8

Role: Employee Other Role: Chief Executive Officer  
First Name: Stephanie Middle Name: Last Name: Aussubel Suffix: Former Last Name:  
Alias 1: Alias 2: Alias 3:  
Phone: [REDACTED] Email: [REDACTED]  
Primary Address 1: [REDACTED] Primary Address 2:  
Primary City: [REDACTED] Primary State: [REDACTED] Primary Zip Code: [REDACTED] Years at this Address: [REDACTED]  
Date of Birth: [REDACTED]  
RMD Association: Not associated with an RMD  
Background Question: no  
Description of Background Events:

BACKGROUND CHECK SUPPORTING DOCUMENTATION

Document Category	Document Name	Type	ID	Upload Date
MA Driver's License	M.Feeney- ID.pdf	pdf	5b23cbb510757543fbca6cad	06/15/2018
Massachusetts CORI Authorization Form	M.Feeney- CORI Acknowledgement.pdf	pdf	5b23cbd8b47dfe43b93eb9c4	06/15/2018
Disclosure and acknowledgement form	M.Feeney - Disclosure and Ackn.pdf	pdf	5b23cbf2a6220743bfd9cf77	06/15/2018
IVES form 4506-T	M.Feeney- 4506T.pdf	pdf	5b23cc125617f143c98bada7	06/15/2018
Release authorization form	M.Feeney- Release Auth.pdf	pdf	5b23cc1de0abb143d3545cd4	06/15/2018
MA Driver's License	A.Nuciforo-ID.pdf	pdf	5b23d04d61b87343dda300bb	06/15/2018
Massachusetts CORI Authorization Form	A.Nuciforo- CORI Acknowledgment.pdf	pdf	5b23d09261b87343dda300bf	06/15/2018
Disclosure and acknowledgement form	A.Nuciforo- Disclosure and Ackn.pdf	pdf	5b23d09b480890506ed9b048	06/15/2018
Release authorization form	A.Nuciforo- Release Auth.pdf	pdf	5b23d0a953361a503c1d524e	06/15/2018
Release authorization form	A.Wojtkowski- Release Auth.pdf	pdf	5b23d5f1a6220743bfd9cf9d	06/15/2018
IVES form 4506-T	A.Wojtkowski-4506T.pdf	pdf	5b23d6028d1e3843f1affbda	06/15/2018
Massachusetts CORI Authorization Form	A.Wojtkowski-CORI Auth.pdf	pdf	5b23d60fb47dfe43b93eb9f0	06/15/2018
Disclosure and acknowledgement form	A.Wojtkowski-Disclosure and Ackn.pdf	pdf	5b23d619a6220743bfd9cfa1	06/15/2018
MA Driver's License	A.Wojtkowski-ID.pdf	pdf	5b23d61d5617f143c98badd1	06/15/2018
IVES form 4506-T	D.DePaolo-4506T.pdf	pdf	5b23d97907462b5064379d07	06/15/2018
Massachusetts CORI Authorization Form	D.DePaolo-CORI Auth.pdf	pdf	5b23d998b797ff43e7a5007d	06/15/2018
Disclosure and acknowledgement form	D.DePaolo-Disclosure and Ackn.pdf	pdf	5b23d9a8a6220743bfd9cfaf	06/15/2018
Release authorization form	D.DePaolo-Release Auth.pdf	pdf	5b23d9cbb797ff43e7a50081	06/15/2018

MA Driver's License	K.Hospot-ID.pdf	pdf	5b23df405246fb5032dde905	06/15/2018
Massachusetts CORI Authorization Form	K.Hospot-CORI Auth.pdf	pdf	5b23df5153361a503c1d5293	06/15/2018
IVES form 4506-T	K.Hospot-4506T.pdf	pdf	5b23df62719dca5046294372	06/15/2018
Release authorization form	K.Hospot- Release Auth.pdf	pdf	5b23df70db987f505ab29a3f	06/15/2018
Disclosure and acknowledgement form	K.Hospot- Disclosure and Ackn.pdf	pdf	5b23df8407462b5064379d1f	06/15/2018
IVES form 4506-T	T.McMenemy- 4506T.pdf	pdf	5b23e29c53361a503c1d52a1	06/15/2018
Disclosure and acknowledgement form	T.McMenemy- Disclosure and Ackn.pdf	pdf	5b23e2a2719dca5046294382	06/15/2018
Release authorization form	T.McMenemy- Release Auth.pdf	pdf	5b23e2aecb211e5050f0fb3a	06/15/2018
Massachusetts CORI Authorization Form	T.McMenemy-CORI Auth.pdf	pdf	5b23e2bbdb987f505ab29a4b	06/15/2018
Other US State Driver's License	T.McMenemy-ID.pdf	pdf	5b23e2ce5246fb5032dde911	06/15/2018
Other US State Driver's License	D.DePaolo-ID.pdf	pdf	5b23e31563f5ba502c343da8	06/15/2018
IVES form 4506-T	J.Baillargeon- 4506T.pdf	pdf	5b23e5dd8d1e3843f1affc0a	06/15/2018
Massachusetts CORI Authorization Form	J.Baillargeon- CORI Auth Form.pdf	pdf	5b23e5e71075743fbca6d00	06/15/2018
Disclosure and acknowledgement form	J.Baillargeon- Disclosure and Ackn.pdf	pdf	5b23e5f3b47dfe43b93eba1a	06/15/2018
Release authorization form	J.Baillargeon- Release Auth.pdf	pdf	5b23e600b47dfe43b93eba1e	06/15/2018
MA Driver's License	J.Baillargeon-ID.pdf	pdf	5b23e60c8d1e3843f1affc0e	06/15/2018
Massachusetts CORI Authorization Form	S.Aussubel - CORI Ackn.pdf	pdf	5b48ed4608716131e75c770a	07/13/2018
Release authorization form	S.Aussubel - CORI Release.pdf	pdf	5b48ed50a208e331ed151595	07/13/2018
Disclosure and acknowledgement form	S.Aussubel - Disc and Acknw.pdf	pdf	5b48ed54c7cb5d31f7ff8a8d	07/13/2018
IVES form 4506-T	S.Aussubel - Ives.pdf	pdf	5b48ed5b109eba32018f063d	07/13/2018
MA Driver's License	S.Aussubel - MA ID.pdf	pdf	5b48ed60a18777320b0d7fa3	07/13/2018
Massachusetts CORI Authorization Form	A.Nuciforo - CORI Auth - Revised.pdf	pdf	5b61e0555db774345fa898ff	08/01/2018
IVES form 4506-T	A.Nuciforo - Ives - Revised.pdf	pdf	5b61e06a4ddf4634650174b2	08/01/2018
Massachusetts CORI Authorization Form	A.Wojtkowski - CORI Auth - Revised.pdf	pdf	5b61e07664718b346fe273d8	08/01/2018
IVES form 4506-T	A.Wojtkowski - Ives - Revised.pdf	pdf	5b61e0899aeb1f3479545dbb	08/01/2018
Massachusetts CORI Authorization Form	D.DePaolo - CORI Auth - Revised.pdf	pdf	5b61e092aec9503483dd6e4e	08/01/2018
IVES form 4506-T	D.Depaolo - Ives - Revised.pdf	pdf	5b61e0a4065a6d348d6fc551	08/01/2018
Massachusetts CORI Authorization Form	J.Baillargeon - CORI Auth - Revised.pdf	pdf	5b61e0ae74dcfa349769d0df	08/01/2018
IVES form 4506-T	J.Baillargeon - Ives - Revised.pdf	pdf	5b61e1080dfb4034a1180167	08/01/2018
Massachusetts CORI Authorization Form	S.Aussubel - CORI Auth - Revised.pdf	pdf	5b61e1105db774345fa89903	08/01/2018
IVES form 4506-T	S.Aussubel - Ives - Revised.pdf	pdf	5b61e1234ddf4634650174b6	08/01/2018

Massachusetts CORI Authorization Form	T.McMenemy - CORI Auth - Revised.pdf	pdf	5b61e13764718b346fe273dc	08/01/2018
IVES form 4506-T	T.McMenemy - Ives - Revised.pdf	pdf	5b61e148065a6d348d6fc555	08/01/2018
IVES form 4506-T	A.Nuciforo - 4506T - Revised 2.pdf	pdf	5b884edad389b22d7bd64647	08/30/2018

### ENTITY BACKGROUND CHECK INFORMATION

Entity Background Check Information 1

Role: Parent Company

Other Role:

Entity Legal Name: KO Resources, LLC

Entity DBA:

Federal Tax Identification Number EIN/TIN:



**Entity Description:** The purpose of this LLC is to own, manage, and operate real estate, to provide management and operational services, and to carry on any lawful business, trade, purpose or activity.

Phone: 413-553-5515

Email: albert@plt.com

Primary Business Address 1: 100 North Street Suite 405

Primary Business Address 2:

Primary Business City: Pittsfield

Primary Business State: MA

Principal Business

Zip Code: 01201

Additional Information:

### MASSACHUSETTS BUSINESS REGISTRATION

Document Category	Document Name	Type	ID	Upload Date
Department of Revenue - Certificate of Good standing	BRI - Fka -KHEMORGANICS - Cert of Good Standing - MA DOR April 11 2018 (1).pdf	pdf	5b27c79e10757543fbca6ef5	06/18/2018
Articles of Organization	BRI- ArticlesOfOrg.pdf	pdf	5b27c7abe0abb143d3545f32	06/18/2018
Bylaws	BRI - Bylaws.pdf	pdf	5b27cd47a6220743bfd9d1c5	06/18/2018
Secretary of Commonwealth - Certificate of Good Standing	BRI- Cert of Good Standing - Sec of State.pdf	pdf	5b28f95be0abb143d354606b	06/19/2018

No documents uploaded

Massachusetts Business Identification Number: 001319343

Doing-Business-As Name:

DBA Registration City:

### BUSINESS PLAN

Document Category	Document Name	Type	ID	Upload Date
Proposed Timeline	NLG - Berksshire Roots Inc - Proposed Timeline 06 20 2018.pdf	pdf	5b2cefc210757543fbca7381	06/22/2018
Plan for Liability Insurance	NLG - Berkshire Roots Inc - Plan to Secure Liability Insurance 06 24 2018.pdf	pdf	5b34dd1fcb211e5050f1055f	06/28/2018
Business Plan	NLG-Berkshire Roots Inc. - Biz Plan June 20 2018.pdf	pdf	5b34dd2ddb987f505ab2a484	06/28/2018
Proposed Timeline	NLG - Berksshire Roots Inc - Proposed Timeline -REVISED	pdf	5b61f628cfd7f028435e2864	08/01/2018

Proposed Timeline	BRI - Applicant Ackn - timeline - 08012018.pdf	pdf	5b61fa4d74dcfa349769d145	08/01/2018
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### OPERATING POLICIES AND PROCEDURES

Document Category	Document Name	Type	ID	Upload Date
Prevention of diversion	BRI - Diversion.pdf	pdf	5b355d70e0abb143d3546928	06/28/2018
Storage of marijuana	BRI - Storage.pdf	pdf	5b355da961b87343dda30cf3	06/28/2018
Restricting Access to age 21 and older	BRI - Restricted Access 21 and over .pdf	pdf	5b355e2e61b87343dda30cf9	06/28/2018
Transportation of marijuana	BRI - Transportation .pdf	pdf	5b355eeda6220743bfd9dbb0	06/28/2018
Qualifications and training	NLG- Berkshire Roots Inc - Qualifications and Training June 22 2018.pdf	pdf	5b355feb61b87343dda30d01	06/28/2018
Record Keeping procedures	BRI - Record Keeping .pdf	pdf	5b3560d6b47dfe43b93ec650	06/28/2018
Separating recreational from medical operations, if applicable	BRI - Seperation .pdf	pdf	5b3561de5617f143c98bba06	06/28/2018
Quality control and testing	BRI - Quality control .pdf	pdf	5b356250e0abb143d3546938	06/28/2018
Inventory procedures	BRI - Inventory Procedures .pdf	pdf	5b356313480890506ed9bc16	06/28/2018
Maintaining of financial records	NLG-Berkshire Roots Inc. - Financial Records June 22 2018.pdf	pdf	5b378cabcb211e5050f10789	06/30/2018
Diversity plan	NLG- Berkshire Roots Inc - Diversity Plan June 22 2018.pdf	pdf	5b378cdbdb987f505ab2a6c7	06/30/2018
Dispensing procedures	BRI - Dispensing Proceeedures REVISED .pdf	pdf	5b7eb2005a6f093923e4ff00	08/23/2018
Personnel policies including background checks	Berkshire Roots - Personnel Policies REVISED .pdf	pdf	5b7eb20903a477392d0a3104	08/23/2018
Security plan	BRI - Security REVISED.pdf	pdf	5b7eb20caa953e3937b5a124	08/23/2018
Security plan	Berkshire Roots - Security - Hours of Operation .pdf	pdf	5b884f7018807b2d67c40867	08/30/2018
Plan for obtaining marijuana or marijuana products	BRI - Obtaining Marijuana REVISED 8.30.18 .pdf	pdf	5b8956dc18807b2d67c40913	08/31/2018

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

**ADDITIONAL INFORMATION NOTIFICATION**

**Notification: I Understand**

**COMPLIANCE WITH POSITIVE IMPACT PLAN**

No records found

**COMPLIANCE WITH DIVERSITY PLAN**

No records found

**HOURS OF OPERATION**

<b>Monday From: 10:00 AM</b>	<b>Monday To: 8:00 PM</b>
<b>Tuesday From: 10:00 AM</b>	<b>Tuesday To: 8:00 PM</b>
<b>Wednesday From: 10:00 AM</b>	<b>Wednesday To: 8:00 PM</b>
<b>Thursday From: 10:00 AM</b>	<b>Thursday To: 8:00 PM</b>
<b>Friday From: 10:00 AM</b>	<b>Friday To: 8:00 PM</b>
<b>Saturday From: 10:00 AM</b>	<b>Saturday To: 8:00 PM</b>
<b>Sunday From: 10:00 AM</b>	<b>Sunday To: 8:00 PM</b>

**EMERGENCY CONTACTS**

No records found