

# C10-22-0000148-APP/MOM EC LLC

## Business Formation Documents

- “Your records indicate that MOM USA LLC and MOM Inc. are owners [REDACTED] [REDACTED] You must disclose all individuals who manages, direct or control the operations of the commercial cannabis business, [REDACTED] Those individuals shall also be disclosed as owners.”
- “If your business ownership is further diluted, other business documents and owner information may be required.”

This is in response to Mr. Van Cordero’s April 5th, 2022 email requesting submission of additional application information no later than May 1, 2022.

MOM USA LLC is indicated as an “Owner” [REDACTED] [REDACTED] MOM USA LLC is a limited liability company with an aggregate ownership interest [REDACTED] in MOM EC LLC. MOM USA LLC owns [REDACTED] [REDACTED] of MOM EC LLC.

MOM Inc. is indicated as an “Owner” [REDACTED] [REDACTED] MOM Inc. is a corporation with an aggregate ownership interest of [REDACTED] in MOM EC LLC, as a result of MOM Inc. owning [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC.

MOM Inc. is owned by five individual, natural person owners. Those individuals are Megan Souza, Phoebe Lipari, Allison Borges, Tarrah Graves, and Jillian Cardona.

|  |
|--|
| MOM Inc. is owned by the following five (5) natural person, individuals as follows:  |
| Megan Souza owns [REDACTED] of MOM Inc.  |
| Phoebe Lipari owns [REDACTED] of MOM Inc.  |
| Allison Borges owns [REDACTED] of MOM Inc.   |
| Tarrah Graves owns [REDACTED] of MOM Inc.  |
| Jillian Cardona owns [REDACTED] of MOM Inc.  |
| [REDACTED] Ownership Interest in MOM Inc. (Summary Capitalization Table of MOM Inc. as of April 18th, 2022 attached herein |

|  |
|--|
| MOM Inc. owns [REDACTED] Ownership Interest of MOM USA LLC   |
| MOM USA LLC owns [REDACTED] Ownership Interest of MOM EC LLC |

| Entity Name | "Owner" Analysis  | "Owner" Analysis   |
|-------------|---|--|
| MOM USA LLC | <p>MOM USA LLC is an "Owner" [REDACTED] MOM USA LLC owns [REDACTED] ownership interest of Applicant MOM EC LLC. [REDACTED] MOM USA LLC is a limited liability company with an aggregate ownership interest [REDACTED]</p> <p>[REDACTED]</p> <p>MOM USA LLC will be participating in the direction, control, or management of MOM EC LLC.</p> <p>All Officers and Individuals who are Individuals who manage, direct, or control the operations MOM Inc., MOM USA LLC, and of the commercial cannabis business have been disclosed herein.</p> | <p>"Owner" [REDACTED] MOM USA LLC'S aggregate ownership interest of [REDACTED]</p> <p>[REDACTED] the following individuals constitute all of the individuals who manages, directs, or controls the operations of the commercial cannabis business (all of which have been disclosed [REDACTED])</p> <p>[REDACTED]:</p> <ul style="list-style-type: none"> <li>- Megan Souza</li> <li>- Eric Powers</li> <li>- Nicholas Andre</li> <li>- John Buerger</li> <li>- Mark Cardona</li> <li>- Tarrah Graves</li> </ul> |
| MOM Inc.    | <p>MOM Inc. is an "Owner" of Applicant MOM EC LLC [REDACTED]</p> <p>MOM Inc. owns [REDACTED]</p>  | <p>"Owner" under CCR Title 4, Section §15003(a)(1) because MOM Inc. owns [REDACTED] of MOM USA LLC.</p>  |

|  |   |   |
|--|---|---|
|  | <p>[REDACTED] ownership interest of MOM USA LLC.</p> <p>MOM USA LLC owns [REDACTED] of Applicant MOM EC LLC.</p> <p>[REDACTED] MOM Inc. is a corporation with an aggregate ownership interest [REDACTED] in Applicant MOM EC LLC.</p> <p>All Officers and Individuals who are Individuals who manage, direct, or control the operations MOM Inc., MOM USA LLC, and of the commercial cannabis business/Applicant MOM EC LLC have been disclosed herein.</p> | <p>MOM USA LLC owns an aggregate ownership interest [REDACTED] in Applicant MOM EC LLC [REDACTED] Beneficial Ownership of Applicant MOM EC LLC on account of MOM Inc. owning [REDACTED] ownership interest of MOM USA LLC).</p> <p>[REDACTED] the following individuals constitute all of the individuals who manages, directs, or controls the operations of the commercial cannabis business (all of which have been disclosed [REDACTED]):</p> <ul style="list-style-type: none"> <li>- Megan Souza</li> <li>- Eric Powers</li> <li>- Nicholas Andre</li> <li>- John Buerger</li> <li>- Mark Cardona</li> <li>- Tarrah Graves</li> </ul> |
|--|---|---|

Here, for MOM EC LLC, the following individuals are considered an "Owner" [REDACTED]: Megan Souza, Phoebe Lipari, Allison Borges, Eric Powers, Nicholas Andre, John Buerger, Mark Cardona, and Tarrah Graves. Jillian Cardona is not considered an "Owner" [REDACTED]: (i) Jillian owns [REDACTED] ownership interest in MOM Inc. [REDACTED] ownership interest in MOM Inc. Parent Company [REDACTED] ownership interest in Applicant MOM EC LLC [REDACTED] MOM Inc.'s [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC), and (ii) Jillian does not does not participate in the direction, control, or management of MOM EC LLC, MOM USA LLC, or MOM Inc.

Here for MOM EC LLC, the following individuals are considered an “Owner” [REDACTED]: Megan Souza, Phoebe Lipari, Allison Borges, Eric Powers, Nicholas Andre, John Buerger, Mark Cardona, and Tarrah Graves. Jillian Cardona is not considered an “Owner” [REDACTED]: (i) Jillian owns [REDACTED] ownership interest in MOM Inc. [REDACTED] ownership interest in MOM Inc. Parent Company [REDACTED] ownership interest in Applicant MOM EC LLC [REDACTED] Inc.’s [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC), and (ii) Jillian does not does not participate in the direction, control, or management of MOM EC LLC, MOM USA LLC, or MOM Inc.

| Individual Full Name | [REDACTED]<br>“Owner” Analysis   | [REDACTED]<br>“Owner” Analysis   |
|----------------------|--|--|
| Megan Souza          | <p>Megan is an “Owner” [REDACTED]<br/>[REDACTED]<br/>Megan owns [REDACTED]<br/>ownership interest in MOM Inc. Megan is a person with an aggregate ownership interest [REDACTED] in [REDACTED] in MOM EC LLC, since MOM Inc., owns [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC.</p> <p>Owner [REDACTED] she is the Chief Executive Officer of MOM EC LLC.</p> <p>Owner [REDACTED] she will be participating in the direction, control, or management of MOM EC LLC, MOM USA LLC, or MOM Inc.</p> | <p>Megan is an “Owner” [REDACTED]<br/>[REDACTED]<br/>Megan’s aggregate ownership interest [REDACTED] (Megan’s ownership interest: [REDACTED])</p> <p>“Owner” [REDACTED]<br/>[REDACTED] Megan is an Individual who manages, directs, or controls the operations of the commercial cannabis business in her role as Chief Executive Officer.</p> |

|                       |   |   |
|-----------------------|---|---|
| <p>Phoebe Lipari</p>  | <p>Phoebe is an "Owner" [REDACTED]<br/> [REDACTED] Phoebe owns [REDACTED] ownership interest in MOM Inc. Phoebe is a person with an aggregate ownership interest [REDACTED] in MOM EC LLC, [REDACTED] MOM Inc., owns [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC.</p> <p>Phoebe does not participate in the direction, control, or management of MOM EC LLC.</p> | <p>Phoebe is an "Owner" [REDACTED]<br/> [REDACTED] Phoebe's aggregate ownership interest [REDACTED] (Phoebe's ownership interest: [REDACTED]).</p>    |
| <p>Allison Borges</p> | <p>Allison is an "Owner" [REDACTED]<br/> [REDACTED] Allison owns [REDACTED] ownership interest in MOM Inc. Allison is a person with an aggregate ownership interest [REDACTED] in MOM EC LLC, since MOM Inc., owns [REDACTED] of MOM USA LLC, which owns [REDACTED] of MOM EC LLC.</p> <p>Allison does not participate in the direction, control, or management of MOM EC LLC.</p>  | <p>Allison is an "Owner" [REDACTED]<br/> [REDACTED] Allison's aggregate ownership interest [REDACTED] (Allison's ownership interest: [REDACTED]).</p> |
| <p>Eric Powers</p>    | <p>Owner [REDACTED] he will be participating in the direction, control, or management of MOM EC LLC.</p>  | <p>"Owner" [REDACTED] Eric is an Individual who manages, directs, or controls the</p>   |

|                |   |  |
|----------------|---|--|
|                | <p>[REDACTED] ownership interest in Licensee.</p>   | <p>operations of the commercial cannabis business in his role as Vice President.</p>   |
| Nicholas Andre | <p>Owner [REDACTED] because he will be participating in the direction, control, or management of MOM EC LLC.</p> <p>[REDACTED] ownership interest in Applicant.</p> | <p>“Owner” [REDACTED]</p> <p>[REDACTED] Nicholas is an Individual who manages, directs, or controls the operations of the commercial cannabis business in his role as Chief Operating Officer.</p> |
| John Buerger   | <p>Owner [REDACTED] he will be participating in the direction, control, or management of MOM EC LLC.</p> <p>[REDACTED] ownership interest in Applicant.</p>         | <p>“Owner” [REDACTED]</p> <p>[REDACTED] John is an Individual who manages, directs, or controls the operations of the commercial cannabis business in his role as Chief Financial Officer.</p>     |
| Mark Cardona   | <p>Owner [REDACTED] he will be participating in the direction, control, or management of MOM EC LLC.</p> <p>[REDACTED] ownership interest in Applicant.</p>         | <p>“Owner” [REDACTED]</p> <p>[REDACTED] Mark is an Individual who manages, directs, or controls the operations of the commercial cannabis business in his role as Chief Legal Officer.</p>         |
| Tarah Graves   | <p>Owner [REDACTED] she will be participating in the direction,</p>   | <p>“Owner” [REDACTED]</p> <p>[REDACTED] Tarrah is an</p>   |

|  |   |   |
|--|---|---|
|  | <p>control, or management of MOM EC LLC.</p> <p>██████████ ownership interest in MOM Inc. Parent Company ██████████ ownership interest in Applicant MOM EC LLC (██████████ of MOM Inc.'s ██████████ of MOM USA LLC, which owns ██████████ of MOM EC LLC).</p> | <p>Individual who manages, directs, or controls the operations of the commercial cannabis business in her role as Chief Creative Officer.</p> |
|--|---|---|

Attachment 1

Summary Capitalization Table of MOM Inc. as of April 18th, 2022



**Summary Capitalization Table of MOM Inc. as of April 18th, 2022.**

| <i>Name of Stockholder</i> | <i>Total Percentage Ownership Interest Held</i> | <i>Number of Shares of Stock and Stock Certificates Numbers</i> |
|----------------------------|---|---|
| Megan Souza                | [REDACTED]                                      | [REDACTED]  |
| Allison Borges             |   |   |
| Phoebe Lipari              |   |   |
| Tarrah Graves              |   |   |
| Jillian Cardona            |   |   |
|                            | [REDACTED]                                      | [REDACTED]  |

**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|   |  |  |   |                           |                                      |
|---|--|--|---|---------------------------|--------------------------------------|
| 1. Full Name<br><b>Megan Aubrey Souza</b> |  | Date of Birth<br>[REDACTED]                    | City, State, and Country of Birth<br>[REDACTED] |                           |                                      |
| Mailing Address<br>[REDACTED]             |  | City<br>[REDACTED]                             | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]           |
| SSN or ITIN<br>[REDACTED]                 | Current Employer<br><b>MOM USA LLC</b> | Email Address<br>megan@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br>Chief Executive Officer |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority? If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business? If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged? Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asylee immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|                                 |                                    |                                 |
|---------------------------------|------------------------------------|---------------------------------|
| Signature<br><i>Megan Souza</i> | Printed Name<br><b>Megan Souza</b> | Date Signed<br><b>3/25/2022</b> |
|---------------------------------|------------------------------------|---------------------------------|

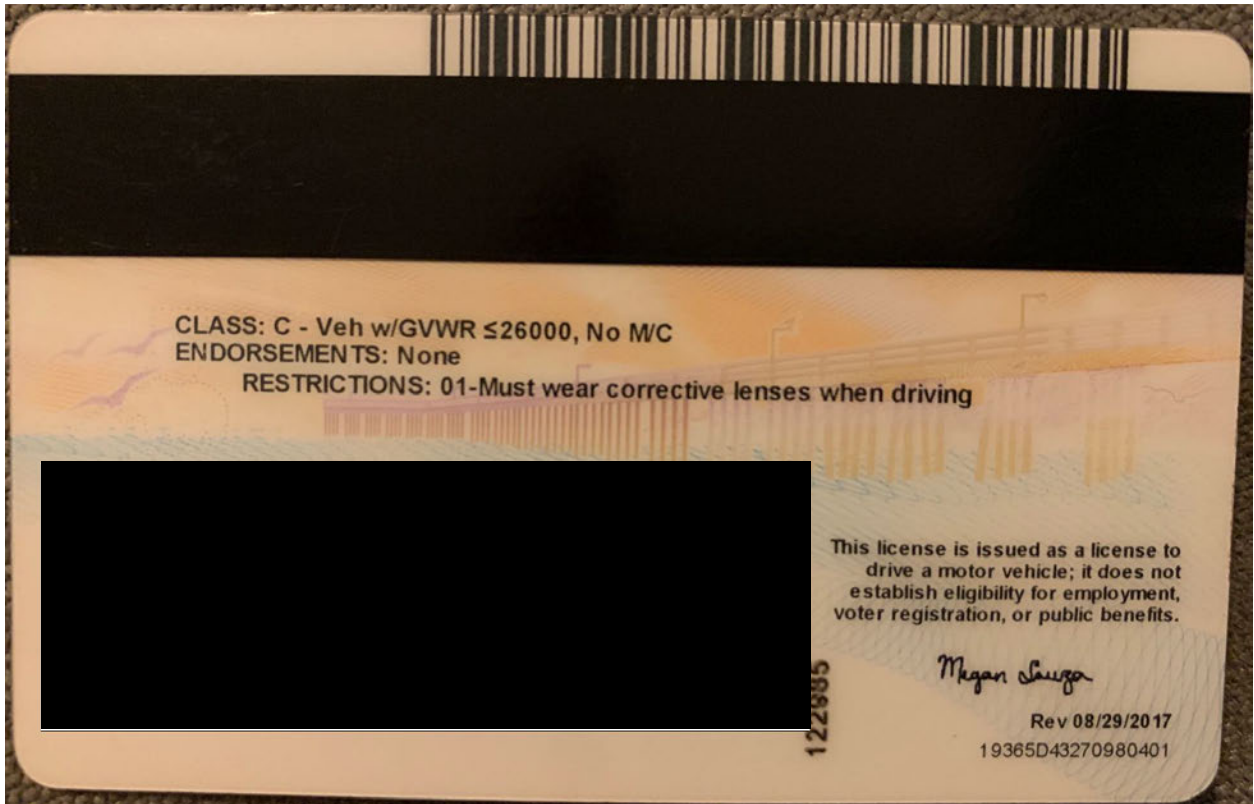
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CLEaR Application Record Number:

**See Disclosures on the Next Page**

BCC-LIC-012 (Rev. 12/20)  
California Department of Consumer Affairs  
Bureau of Cannabis Control  
www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Response to Question #7  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |



**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                      |                                 |                             |   |                           |                            |
|--------------------------------------|---------------------------------|-----------------------------|---|---------------------------|----------------------------|
| 1. Full Name<br><b>Phoebe Lipari</b> |                                 | Date of Birth<br>[REDACTED] | City, State, and Country of Birth<br>[REDACTED] |                           |                            |
| Mailing Address<br>[REDACTED]        |                                 | City<br>[REDACTED]          | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED] |
| SSN or ITIN<br>[REDACTED]            | Current Employer<br><b>None</b> | Email Address<br>[REDACTED] |   | Ownership %<br>[REDACTED] | Job Title<br><b>N/A</b>    |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority? If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business? If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged? Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asylee, immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)


|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|  |                                      |                                 |
|--|--------------------------------------|---------------------------------|
| Signature<br> | Printed Name<br><b>phoebe Lipari</b> | Date Signed<br><b>3/25/2022</b> |
|--|--------------------------------------|---------------------------------|

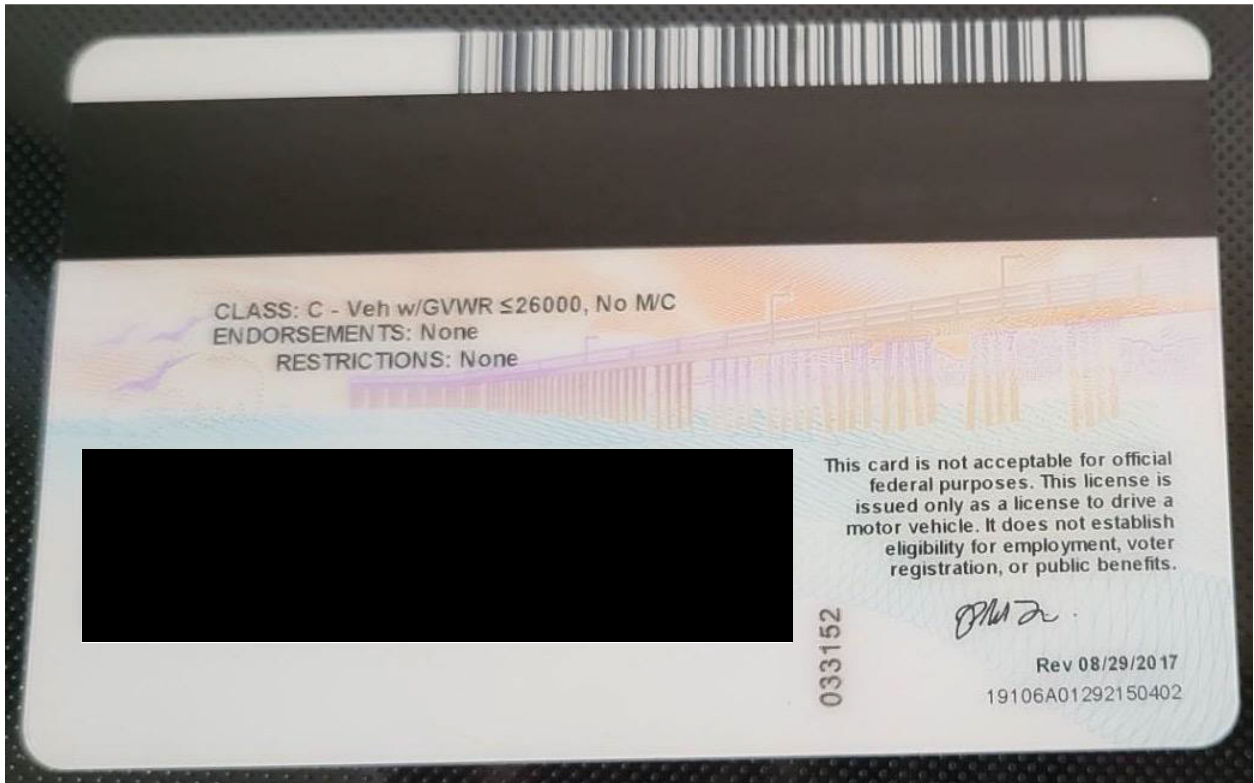
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California Department of Consumer Affairs  
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www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Response to Question #7  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |



**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                     |  |   |   |                           |                                     |
|-------------------------------------|--|---|---|---------------------------|-------------------------------------|
| 1. Full Name<br><b>Tarah Graves</b> |  | Date of Birth<br>[REDACTED]                     | City, State, and Country of Birth<br>[REDACTED] |                           |                                     |
| Mailing Address<br>[REDACTED]       |  | City<br>[REDACTED]                              | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]          |
| SSN or ITIN<br>[REDACTED]           | Current Employer<br><b>MOM USA LLC</b> | Email Address<br>tarrah@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br>Chief Creative Officer |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority? If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business? If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged? Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asyl immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)


|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

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Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|  |                                     |                                 |
|--|-------------------------------------|---------------------------------|
| Signature<br> | Printed Name<br><b>Tarah Graves</b> | Date Signed<br><b>3/28/2022</b> |
|--|-------------------------------------|---------------------------------|

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CLEaR Application Record Number:

**See Disclosures on the Next Page**



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California Department of Consumer Affairs  
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| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |



MOM EC LLC, Agent for Service of Process, Eric Powers, eric@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        | Mailing      |               |               |      |     |

MOM EC LLC, Business, , megan@megansorganicmarket.com

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1         | ADDRESS LINE2 | CITY      | ZIP       |
|------------|--------|--------------|-----------------------|---------------|-----------|-----------|
| 8054297116 |        | Mailing      |                       |               |           |           |
| 8054297116 |        | Premise      | 599 N LA BRUCHERIE RD |               | EL CENTRO | 922439575 |

MOM EC LLC, Business Owner, Allison Borges, [REDACTED]

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|------------|--------|--------------|---------------|---------------|------|-----|
| 8055921420 |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Eric Powers, eric@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, John Buerger, john@megansorganicmarket.com

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|------------|--------|--------------|---------------|---------------|------|-----|
| 8055921420 |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Mark Cardona, mark@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Megan Aubrey Souza, megan@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        | Mailing      |               |               |      |     |
|          |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Nicholas Andre, nick@megansorganicmarket.com

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|------------|--------|--------------|---------------|---------------|------|-----|
| 8055921420 |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Phoebe Lipari, [REDACTED]

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|------------|--------|--------------|---------------|---------------|------|-----|
| 8055921420 |        | Mailing      |               |               |      |     |

MOM EC LLC, Business Owner, Tarrah Graves, tarrah@megansorganicmarket.com

| PHONE1 ▲   | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|------------|--------|--------------|---------------|---------------|------|-----|
| 8055921420 |        | Mailing      |               |               |      |     |

MOM EC LLC, Owner Applicant, Megan Aubrey Souza, megan@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        | Mailing      |               |               |      |     |

MOM EC LLC, Primary Contact Person, Mark Cardona, mark@megansorganicmarket.com

| PHONE1 ▲ | PHONE2 | ADDRESS TYPE | ADDRESS LINE1 | ADDRESS LINE2 | CITY | ZIP |
|----------|--------|--------------|---------------|---------------|------|-----|
|          |        |              |               |               |      |     |

## OWNER SUBMITTAL

### SECTION A - OWNER INFORMATION

|                                       |                                |                             |   |                           |                            |
|---------------------------------------|--------------------------------|-----------------------------|---|---------------------------|----------------------------|
| 1. Full Name<br><b>Allison Borges</b> |                                | Date of Birth<br>[REDACTED] | City, State, and Country of Birth<br>[REDACTED] |                           |                            |
| Mailing Address<br>[REDACTED]         |                                | City<br>[REDACTED]          | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED] |
| SSN or ITIN<br>[REDACTED]             | Current Employer<br>[REDACTED] | Email Address<br>[REDACTED] |   | Ownership %<br>[REDACTED] | Job Title<br>N/A           |

### SECTION B - DECLARATIONS

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application?  
If "Yes", please complete item 8

---

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority?  
If "Yes", please complete item 9

---

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business?  
If "Yes", please complete item(s) 6-7

---

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged?  
Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

---

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asyle immigrant visa holder. Failure to do so may result in application review delays.
  - 6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.
  - 6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.
  - 6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

### OTHER CANNABIS LICENSE(S) (Attach additional sheets if needed)

|                                    |                |             |
|------------------------------------|----------------|-------------|
| 7. Agency<br><b>See attachment</b> | License Number | Date Issued |
| 8. Agency                          | License Number | Date Issued |

### CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority<br><b>None</b>                | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

### SECTION C - REQUIRED DOCUMENTS

- Copy of Government-Issued Identification       Proof of Military Status (if applicable)

### SECTION D - AFFIRMATION AND CONSENT

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|  |                                       |                                 |
|--|---------------------------------------|---------------------------------|
| Signature<br> | Printed Name<br><b>Allison Borges</b> | Date Signed<br><b>3/31/2022</b> |
|--|---------------------------------------|---------------------------------|

Office Use Only

CLEaR Application Record Number:

**See Disclosures on the Next Page**

BCC-LIC-012 (Rev. 12/20)  
California Department of Consumer Affairs  
Bureau of Cannabis Control  
www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Response to Question #7  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |



**California**

USA

**DRIVER LICENSE**

FEDERAL  
LIMITS  
APPLY

DL [REDACTED]

EXPIRES [REDACTED]

LN BORGES

FN ALLISON

**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                    |                                 |   |   |                           |                                    |
|------------------------------------|---------------------------------|---|---|---------------------------|------------------------------------|
| 1. Full Name<br><b>Eric Powers</b> |                                 | Date of Birth<br>[REDACTED]                   | City, State, and Country of Birth<br>[REDACTED] |                           |                                    |
| Mailing Address<br>[REDACTED]      |                                 | City<br>[REDACTED]                            | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]         |
| SSN or ITIN<br>[REDACTED]          | Current Employer<br><b>None</b> | Email Address<br>eric@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br><b>Vice President</b> |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application?  
If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority?  
If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business?  
If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged?  
Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, as immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|                                 |                                    |                                 |
|---------------------------------|------------------------------------|---------------------------------|
| Signature<br><i>Eric Powers</i> | Printed Name<br><b>Eric Powers</b> | Date Signed<br><b>2/17/2022</b> |
|---------------------------------|------------------------------------|---------------------------------|

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CLEaR Application Record Number:

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California Department of Consumer Affairs  
Bureau of Cannabis Control  
www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Responses  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 05/20/2019         |
| CDFA          | CCL20-0000232         | 06/15/2020         |
| CDFA          | CCL20-0000389         | 06/15/2020         |
| CDFA          | CCL20-0000390         | 06/15/2020         |
| CDFA          | CCL20-0000391         | 06/15/2020         |
| CDFA          | CCL20-0000392         | 06/15/2020         |
| CDFA          | CCL20-0000393         | 06/15/2020         |
| CDFA          | CCL19-0001238         | 05/17/2019         |
| CDFA          | TAL18-0010012         | 12/22/2018         |

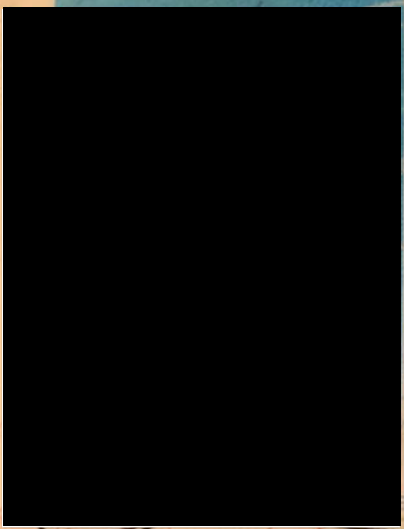


California

USA

DRIVER LICENSE

FEDERAL  
LIMITS  
APPLY

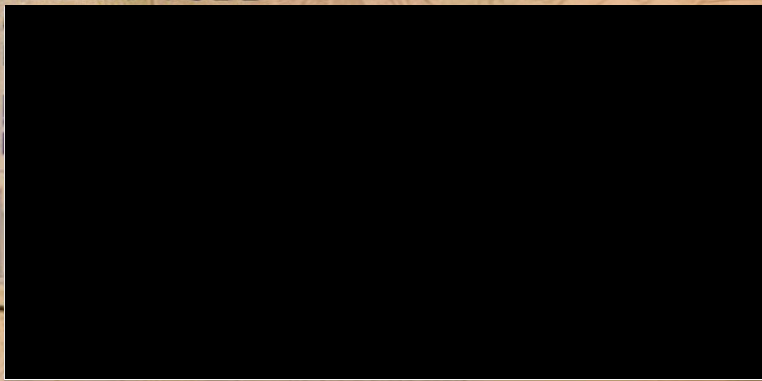


DL

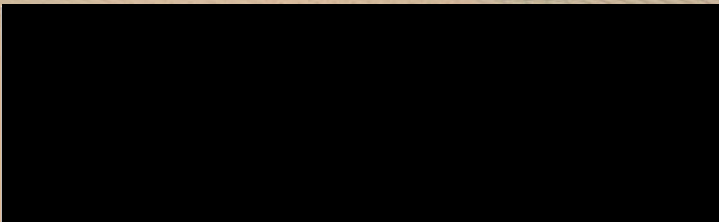
EXP

LN POWERS

FN ERIC TODD



CLASS: C - Veh w/GVWR ≤26000, No M/C  
ENDORSEMENTS: None  
RESTRICTIONS: None



This card is not acceptable for official federal purposes. This license is issued only as a license to drive a motor vehicle. It does not establish eligibility for employment, voter registration, or public benefits.

112685

Rev 08/29/2017  
19298D38240860401

**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                     |  |   |   |                           |                                      |
|-------------------------------------|--|---|---|---------------------------|--------------------------------------|
| 1. Full Name<br><b>John Buerger</b> |  | Date of Birth<br>[REDACTED]                   | City, State, and Country of Birth<br>[REDACTED] |                           |                                      |
| Mailing Address<br>[REDACTED]       |  | City<br>[REDACTED]                            | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]           |
| SSN or ITIN<br>[REDACTED]           | Current Employer<br><b>MOM USA LLC</b> | Email Address<br>john@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br>Chief Financial Officer |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority? If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business? If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged? Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asylee immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|                                  |                                     |                                 |
|----------------------------------|-------------------------------------|---------------------------------|
| Signature<br><i>John Buerger</i> | Printed Name<br><b>John Buerger</b> | Date Signed<br><b>2/16/2022</b> |
|----------------------------------|-------------------------------------|---------------------------------|

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California Department of Consumer Affairs  
Bureau of Cannabis Control  
www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Response to Question #7  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |

California

USA

DRIVER LICENSE




DL

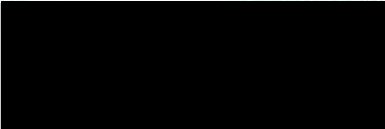

EX

LN BUERGER

FN JOHN DEWEY



CLASS: C - Veh w/GVWR ≤26000, No MC  
ENDORSEMENTS: None  
RESTRICTIONS: None



This license is issued as a license to  
drive a motor vehicle; it does not  
establish eligibility for employment,  
voter registration, or public benefits.

061359



Rev 08/29/2017  
20163N65353820401

**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                     |  |   |   |                           |                                  |
|-------------------------------------|--|---|---|---------------------------|----------------------------------|
| 1. Full Name<br><b>Mark Cardona</b> |  | Date of Birth<br>[REDACTED]                   | City, State, and Country of Birth<br>[REDACTED] |                           |                                  |
| Mailing Address<br>[REDACTED]       |  | City<br>[REDACTED]                            | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]       |
| SSN or ITIN<br>[REDACTED]           | Current Employer<br><b>MOM USA LLC</b> | Email Address<br>mark@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br>Chief Legal Officer |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

3. Have you been denied a license by the Bureau or any other state cannabis licensing authority? If "Yes", please complete item 9

4. Do you have an ownership or financial interest (as defined in Title 16 CCR 5003 and 5004) in a licensed cannabis business? If "Yes", please complete item(s) 6-7

5. Have you or your spouse served as an active duty member of the Armed Forces of the United States and were honorably discharged? Response to this question is voluntary. If "Yes", you may qualify for priority processing of your application.

6. Do any of the following statements apply to you? If you select YES, you must attach evidence of your status as a refugee, asylee immigrant visa holder. Failure to do so may result in application review delays.

6A. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.

6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority                               | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation |              |                            |
| 10. License Authority                              | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|  |                                     |                                 |
|--|-------------------------------------|---------------------------------|
| Signature <small>DocuSigned by:</small><br><i>Mark Cardona</i> | Printed Name<br><b>Mark Cardona</b> | Date Signed<br><b>2/15/2022</b> |
|--|-------------------------------------|---------------------------------|

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BCC-LIC-012 (Rev. 12/20)  
California Department of Consumer Affairs  
Bureau of Cannabis Control  
www.bcc.ca.gov

**Owner Submittal  
Additional Sheet for Response to Question #7  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |

California

USA

DRIVER LICENSE

FEDERAL  
LIMITS  
APPLY

DL [REDACTED]

EXP [REDACTED]

LN CARDONA

FN MARK BENJAMIN



CLASS: C - Veh w/GVWR ≤26000, No MC  
ENDORSEMENTS: None  
RESTRICTIONS: None

This card is not acceptable for official federal purposes. This license is issued only as a license to drive a motor vehicle. It does not establish eligibility for employment, voter registration, or public benefits.

*Wes Carr*

Rev 08/29/2017

21035D59029490401

020387



**OWNER SUBMITTAL**

**SECTION A - OWNER INFORMATION**

|                                       |  |   |   |                           |                                      |
|---------------------------------------|--|---|---|---------------------------|--------------------------------------|
| 1. Full Name<br><b>Nicholas Andre</b> |  | Date of Birth<br>[REDACTED]                   | City, State, and Country of Birth<br>[REDACTED] |                           |                                      |
| Mailing Address<br>[REDACTED]         |  | City<br>[REDACTED]                            | State<br>[REDACTED]                             | Zip Code<br>[REDACTED]    | Phone Number<br>[REDACTED]           |
| SSN or ITIN<br>[REDACTED]             | Current Employer<br><b>MOM USA LLC</b> | Email Address<br>nick@megansorganicmarket.com |   | Ownership %<br>[REDACTED] | Job Title<br>Chief Operating Officer |

**SECTION B - DECLARATIONS**

2. Have you ever been sanctioned by a licensing authority or local agency for unauthorized commercial cannabis activities and/or had a license suspended or revoked in the three years immediately preceding the date of this application? If "Yes", please complete item 8

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6B. You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code.

6C. You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

**OTHER CANNABIS LICENSE(S)** (Attach additional sheets if needed)

|   |                |             |
|---|----------------|-------------|
| 7. Agency<br><b>See attached additional sheet</b> | License Number | Date Issued |
| 8. Agency   | License Number | Date Issued |

**CANNABIS LICENSE(S) SUSPENDED, REVOKED, OR DENIED** (Attach additional sheets if needed)

|  |              |                            |
|--|--------------|----------------------------|
| 9. License Authority<br><b>See attached additional sheet</b> | License Type | Suspension/Revocation Date |
| Detailed Statement Regarding Suspension/Revocation           |              |                            |
| 10. License Authority  | License Type | Denial Date                |

**SECTION C - REQUIRED DOCUMENTS**

Copy of Government-Issued Identification       Proof of Military Status (if applicable)

**SECTION D - AFFIRMATION AND CONSENT**

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

|  |                                       |                                 |
|--|---------------------------------------|---------------------------------|
| Signature <small>DocuSigned by:</small><br><i>Nicholas Andre</i> | Printed Name<br><b>Nicholas Andre</b> | Date Signed<br><b>2/16/2022</b> |
|--|---------------------------------------|---------------------------------|

Office Use On  
CLEaR Application Record Number:

**See Disclosures on the Next Page**

BCC-LIC-012 (Rev. 12/20)  
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**Owner Submittal  
Additional Sheet for Responses  
Other Cannabis License(s)**

| <b>Agency</b> | <b>License Number</b> | <b>Date Issued</b> |
|---------------|-----------------------|--------------------|
| BCC           | C10-0000728-LIC       | 06/15/2020         |
| BCC           | C10-0000071-LIC       | 05/20/2019         |
| BCC           | C11-0000131-LIC       | 05/20/2019         |
| CDFA          | CCL18-0000662         | 03/26/2019         |

**Additional Disclosure:** Nicholas Andre was a former owner of unvested employment equity program minority interest [REDACTED]

[REDACTED]

California

USA

DRIVER LICENSE

FEDERAL  
LIMITS  
APPLY

DL

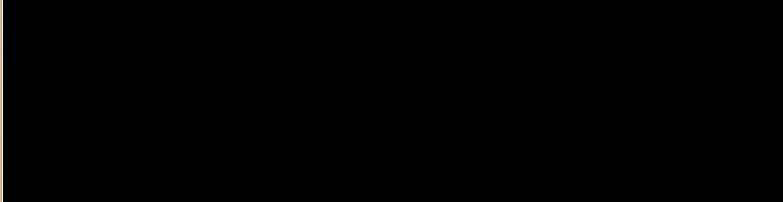
EXP

LN ANDRE

FN NICHOLAS BRANDON



CLASS: C - Veh w/GVWR ≤26000, No MC  
ENDORSEMENTS: None  
RESTRICTIONS: None



This card is not acceptable for official federal purposes. This license is issued only as a license to drive a motor vehicle. It does not establish eligibility for employment, voter registration, or public benefits.

062588

Rev 08/29/2017  
20199F26358040402

LIST OF OWNERS

| Title               | First Name | Last Name | Ownership Percentage (Number) | Phone Number | Email Address             | Address Line 1 | Address Line 2 | City | State | Zip Code | Contact Sequence N |
|---------------------|------------|-----------|-------------------------------|--------------|---------------------------|----------------|----------------|------|-------|----------|--------------------|
| Controlling Manager | Megan      | Souza     |                               |              | megan@megansorganicmar... |                |                |      |       |          |                    |
| Other               | Allison    | Borges    |                               |              |                           |                |                |      |       |          |                    |
| Other               | Phoebe     | Lipari    |                               |              |                           |                |                |      |       |          |                    |
| Officer             | Nicholas   | Andre     |                               |              | nick@megansorganicmark... |                |                |      |       |          |                    |
| Officer             | Mark       | Cardona   |                               |              | mark@megansorganicmark... |                |                |      |       |          |                    |
| Officer             | John       | Buerger   |                               |              | john@megansorganicmark... |                |                |      |       |          |                    |
| Officer             | Eric       | Powers    |                               |              | eric@megansorganicmark... |                |                |      |       |          |                    |
| Officer             | Tarrah     | Graves    |                               |              | tarrah@megansorganicma... |                |                |      |       |          |                    |

NON CONTROLLING INTEREST

First Name Last Name Phone Number Email Address Date of Birth Government-issued Identification Type Government-issued Identification Number

FICTITIOUS BUSINESS NAME

Business Name Physical Address  
Megan's Organic Market 599 N La Brucherie, El...

ENTITY OWNERSHIP

Entity Name Organizational Structure Ownership Percentage (Number) Phone Number Email Address  
MOM USA LLC Limited Liability Company  
MOM INC Corporation

MILITARY STATUS

Date of Deployment Deployment Document Date of Discharge Discharge Document

ENTITY FINANCIAL INTEREST

Legal Business Name Tax ID Number First Name Last Name Phone Number Email Address  
CDev, LLC Julian Moncur

**From:** [Megan Souza](#)  
**To:** [Cordero, Van@Cannabis](#)  
**Cc:** [Mark Cardona](#)  
**Subject:** Re: C10-22-0000148-APP — MOM EC LLC  
**Date:** Wednesday, April 27, 2022 1:11:02 PM  
**Attachments:** [image003.png](#)

---

[EXTERNAL]: [REDACTED]

**CAUTION:** THIS EMAIL ORIGINATED OUTSIDE THE DEPARTMENT OF CANNABIS CONTROL!

**DO NOT:** click links or open attachments unless you know the content is safe.

**NEVER:** provide credentials on websites via a clicked link in an Email.

---

Van,

Yes, confirming that CDev, LLC should remain listed as a financial interest holder on the record. CDev, LLC (CannDev) [REDACTED]  
[REDACTED]

Our understanding [REDACTED] is that any person or entity entitled to receive [REDACTED] profits of the commercial cannabis business qualifies as a financial interest holder. [REDACTED]  
[REDACTED]

[REDACTED] out of an abundance of caution we have disclosed them as a financial interest holder.

Please let us know if you have any more questions,

On Wed, Apr 27, 2022 at 11:29 AM Cordero, Van@Cannabis  
<[Van.Cordero@cannabis.ca.gov](mailto:Van.Cordero@cannabis.ca.gov)> wrote:

Hi Megan,

Thank you for the submissions.

Please confirm if CDev, LLC should remain listed as a financial interest holder on the record. Financial interest holders [REDACTED] may qualify under other circumstances (refer to regulations if needed).

Thank you,



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CALIFORNIA

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Department of Cannabis Control  
PO Box 419106, Rancho Cordova, CA 95741-9106  
P (844) 612-2322 | www.cannabis.ca.gov



March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC

Dear Ms./Mr. Cardona

An application has been submitted with the Department of Cannabis Control (DCC) to obtain a Cannabis - Retailer Application. You have been identified as a business owner on this application. If your business is applying for an annual license you must provide the required owner information and submit it to the Department in one of the following ways:

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For any questions, please contact the Department at (844) 612-2322.

Thank you,

Department of Cannabis Control



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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC

Dear Ms./Mr. Souza

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Owner Submittal Letter

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC

Dear Ms./Mr. Cardona

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March 31, 2022

Allison Borges  
Other  
MOM EC LLC



Dear Ms./Mr. Borges

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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC



Dear Ms./Mr. Graves

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Owner Submittal Letter



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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

Dear Ms./Mr. Buerger

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC

Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC

Dear Ms./Mr. Andre

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC

Dear Ms./Mr. Powers

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Owner Submittal Letter



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March 31, 2022

Phoebe Lipari  
Other  
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March 31, 2022

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Owner Submittal Letter



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March 31, 2022

Allison Borges  
Other  
MOM EC LLC



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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC



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March 31, 2022

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Thank you,



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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC

Dear Ms./Mr. Souza

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC

Dear Ms./Mr. Cardona

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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC



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Owner Submittal Letter



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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC



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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC



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Owner Submittal Letter

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC



Dear Ms./Mr. Lipari

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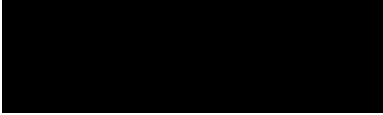
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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC



Dear Ms./Mr. Andre

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC



Dear Ms./Mr. Powers

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March 31, 2022

Allison Borges  
Other  
MOM EC LLC

Dear Ms./Mr. Borges

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Owner Submittal Letter

Department of Cannabis Control



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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC

Dear Ms./Mr. Graves

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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

Dear Ms./Mr. Buerger

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Owner Submittal Letter

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March 31, 2022

Mark Cardona  
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March 31, 2022

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Other  
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March 31, 2022

Tarah Graves  
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Thank you,

Department of Cannabis Control



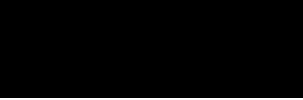
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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC



Dear Ms./Mr. Souza

An application has been submitted with the Department of Cannabis Control (DCC) to obtain a Cannabis - Retailer Application. You have been identified as a business owner on this application. If your business is applying for an annual license you must provide the required owner information and submit it to the Department in one of the following ways:

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC



Dear Ms./Mr. Cardona

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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC

Dear Ms./Mr. Cardona

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC

Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC

Dear Ms./Mr. Andre

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC

Dear Ms./Mr. Powers

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Owner Submittal Letter



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March 31, 2022

Allison Borges  
Other  
MOM EC LLC



Dear Ms./Mr. Borges

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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC



Dear Ms./Mr. Graves

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Owner Submittal Letter

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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

Dear Ms./Mr. Buerger

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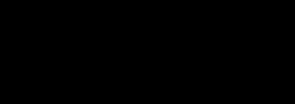
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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC



Dear Ms./Mr. Souza

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC



Dear Ms./Mr. Cardona

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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC

Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC

Dear Ms./Mr. Andre

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC

Dear Ms./Mr. Powers

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Owner Submittal Letter



**Department of Cannabis Control**  
CALIFORNIA

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March 31, 2022

Allison Borges  
Other  
MOM EC LLC



Dear Ms./Mr. Borges

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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC



Dear Ms./Mr. Graves

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Department of Cannabis Control



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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

Dear Ms./Mr. Buerger

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Department of Cannabis Control

Owner Submittal Letter



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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC



Dear Ms./Mr. Cardona

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC



Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC

Dear Ms./Mr. Andre

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Department of Cannabis Control

Owner Submittal Letter



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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC



Dear Ms./Mr. Powers

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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC



Dear Ms./Mr. Souza

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC

Dear Ms./Mr. Cardona

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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC

Dear Ms./Mr. Souza

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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC

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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC  
[REDACTED]

Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC  
[REDACTED]

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Owner Submittal Letter

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC

Dear Ms./Mr. Powers

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Thank you,



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March 31, 2022

Allison Borges  
Other  
MOM EC LLC



Dear Ms./Mr. Borges

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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC



Dear Ms./Mr. Graves

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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

Dear Ms./Mr. Buerger

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Owner Submittal Letter



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March 31, 2022

Allison Borges  
Other  
MOM EC LLC

Dear Ms./Mr. Borges

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March 31, 2022

Tarah Graves  
Officer  
MOM EC LLC

Dear Ms./Mr. Graves

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March 31, 2022

John Buerger  
Officer  
MOM EC LLC

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March 31, 2022

Megan Souza  
Controlling Manager  
MOM EC LLC



Dear Ms./Mr. Souza

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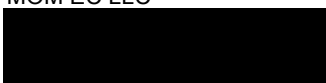
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March 31, 2022

Jillian Cardona  
Other  
MOM EC LLC



Dear Ms./Mr. Cardona

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March 31, 2022

Phoebe Lipari  
Other  
MOM EC LLC

Dear Ms./Mr. Lipari

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March 31, 2022

Nicholas Andre  
Officer  
MOM EC LLC

Dear Ms./Mr. Andre

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March 31, 2022

Eric Powers  
Officer  
MOM EC LLC

Dear Ms./Mr. Powers

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March 31, 2022

Mark Cardona  
Officer  
MOM EC LLC

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Owner Submittal Letter