

# SOUTHERN ROOTS FILLING STATION, INC. FL MMTC SUBMISSION

Designated Contact: Cameron Beard  
Phone: (904) 316-1466  
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# SOUTHERN ROOTS



Section 4.1

APPLICANT INFORMATION



## SECTION 4.1 APPLICANT INFORMATION



## FORM 1: APPLICANT GENERAL INFORMATION

Applicant Information				
Applicant Name				
Southern Roots Filling Station, Inc.				
Mailing Address				
2029 Third Street North				
City	Apt/Ste #	State	ZIP Code	Country
Jacksonville Beach	N/A	FL	32250	USA

Contact Information		
First Name	Last Name	Middle Initial
Cameron	Beard	W
Telephone Number	Designated Email (for Department/Applicant Communications)	
904-316-1466	camicus@gmail.com	

Medical Director Information		
First Name	Last Name	Middle Initial
Andrew	Vihlen	S
Florida Physician (MD or DO) License Number	Telephone Number	Email
ME109676	305.733.5537	Andrew@SouthernRoots.life



Section 4.2

DECLARATION OF EXEMPT INFORMATION



SOUTHERN  
ROOTS





**SECTION 4.2 DECLARATION OF EXEMPT INFORMATION**

Southern Roots Filling Station, Inc. (the “Company”) is an applicant for a Medical Marijuana Treatment Center license. The Company understands that the OMMU is an entity of the State of Florida and any documents or data submitted to the State of Florida may be disclosed by the State pursuant to a Florida Public Records request.

While **Section 119.0715** of the Florida Statutes (the “Public Records Law”) permits certain exclusions from disclosure, the Company understands that OMMU or the State of Florida make no guarantee or promises that such data will not be disclosed. The Company, through its legal counsel at Vicente LLP, has reviewed the Public Records Law, as well as case law relevant to this process.

The Company understands that the documentation and data in each subsection provided to the Department may not be confidential or trade secrets (as defined in Section 688.002(4) of the Florida Statutes “Uniform Trade Secrets Act”), or if confidential or a trade secret, may or may not be disclosed pursuant to the Florida Public Records Law and the Uniform Trade Secrets Act. The Company asserts that its MMTC licensure application is trade secret under the Uniform Trade Secrets Act, in that it includes information, such as formulas, patterns, compilations, programs, device, methods, techniques, or processes from which the Company 1) derives independent actual and potential economic value from not being generally known to, and being readily ascertainable by proper means, other persons who can obtain economic value from its disclosure or use; and 2) is the subject of efforts that are reasonable under the circumstances to maintain the information’s secrecy. (**§688.02(4), F.S.**)

The Company derives substantial economic value from the secrecy of this application, from the fact that its competitors, lacking plans and specifications of comparable quality, will be

less able to handle this process in a timely and efficient manner allowing the Company to capture a greater share of the market. The Company has paid over \$100,000 for the preparation of the contents of this application. The Company also protects the secrecy of this information by limiting knowledge on a need-to-know basis and protecting the same with confidentiality agreements. This information is central to marketplace competition, and the Company benefits by its competitors not knowing what strains the Company will offer and the processes and procedures related to offering such strains – otherwise, competitors of the Company could ensure that they offer, at a minimum, the same selection of medical marijuana strains and varieties to limit the Company’s ability to offer unique strains in Florida. Additionally, the information contained in this application should be excluded from disclosure under the Public Records Law since a majority of this information “relat[es] directly to the physical security... of [the Company’s] facilit[ies].” The disclosure of this information would compromise the physical security of Company inventory and facilities and endanger employees. See the corresponding table for specific citations for each section of the application:

Listing of Information Claimed to be Exempt from Public Disclosure	Specific Statutory Citation for Such Exemption	Type of Trade Secret	Notes
4.3.3 Level 2 Background Screening	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S.	Of Value	Commercial Information and List of Personnel/Suppliers Outlined

	§815.045, F.S.		
4.4 Cultivation of Marijuana and Supporting Infrastructure	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	For use or in use by the Company	Technical, Scientific, and Design Process and Procedures Outlined
4.5 Plan for Processing Marijuana and Supporting Infrastructure	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	For use or in use by the Company	Technical, Scientific, and Design Process and Procedures Outlined
4.6 Plan for Dispensing Marijuana and Supporting Infrastructure	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	For use or in use by the Company	Technical and Design Process and Procedures Outlined
4.7 Plan for Security and Accountability	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S.	For use or in use by the Company	Security and Design Process and Procedures Outlined

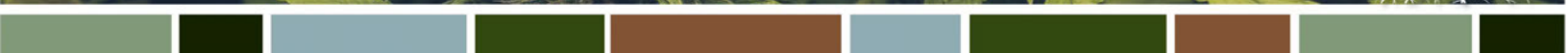


	§812.081(1)(c), F.S. §815.045, F.S.		
4.8 Ability to Execute Proposed Plans	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	Of Value	Technical Process and Procedures Outlined
4.9 Medical Director	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	Of Value	Technical Process and Procedures Outlined
4.10 Personnel	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	Of Value	Commercial Information and List of Personnel/Suppliers Outlined
4.11 Diversity Plan	§119.071, F.S. §688.002, F.S. §381.83, F.S.	Of Value	Commercial Information and List of

	§435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.		Personnel/Suppliers  Outlined
4.12 Certified Financial Documents and Available Funding	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	Secret	Commercial and Financial Information  Outlined
4.13 Business Ownership and Structure	§119.071, F.S. §688.002, F.S. §381.83, F.S. §435.09, F.S. §812.081(1)(c), F.S. §815.045, F.S.	Secret	Commercial and Financial Information  Outlined

Section 4.3

CERTIFICATION OF REGISTRATION, DACS DOCUMENTATION,  
AND BACKGROUND SCREENING





SUBSECTION 4.3.1 FLORIDA BUSINESS REGISTRATION

# *State of Florida*

## *Department of State*

I certify from the records of this office that SOUTHERN ROOTS FILLING STATION, INC is a corporation organized under the laws of the State of Florida, filed on March 5, 2015.

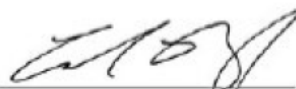
The document number of this corporation is P15000022558.

I further certify that said corporation has paid all fees due this office through December 31, 2023, that its most recent annual report/uniform business report was filed on April 18, 2023, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Eighteenth day of April, 2023*




  
Secretary of State

Tracking Number: 6719226086CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

**SUBSECTION 4.3.2 DACS DOCUMENTATION**

 COMMISSIONER WILTON SIMPSON	Florida Department of Agriculture and Consumer Services	B117440
	<b>CERTIFICATE OF NURSERY REGISTRATION</b> Section 581.131, F.S. and Rule 5B-2.002, F.A.C. 1911 S.W. 34th St. P.O. Box 147100, Gainesville, FL 32614-7100 (352) 395-4700	
<b>ISSUED TO:</b>  SOUTHERN ROOTS FILLING STATION INC. BEARD, CAMERON CR 119, RE # 23-18-23-000-0001-0000 BRYCEVILLE, FL 32009-8118		
<b>THIS CERTIFICATE EXPIRES:</b> 03/24/2024		
<b>FEE PAID:</b> \$35.00		
<b>REGISTRATION NO.:</b> 48030714		
<b>DATE ISSUED:</b> 03/24/2023		
THIS IS TO CERTIFY that the nursery stock on the premises of the nursery shown hereon has been inspected for plant pests and meets at least the minimum requirements of Section 581.131, Florida Statutes.		
THIS CERTIFICATE OF REGISTRATION MUST BE DISPLAYED or in the immediate possession of any person engaged in the sale or distribution of nursery stock.		
FDACS-08002 Revised 05/05		







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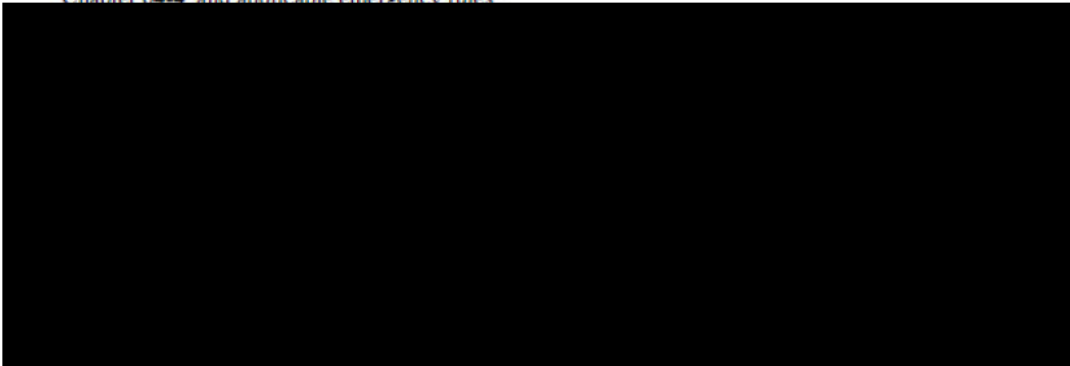


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I understand that the OMMU may disclose to the applicant for Medical Marijuana Treatment Center (MMTC) licensure listed below whether I am authorized to serve as an owner or manager for the MMTC upon licensure, as provided in section 381.986, F.S., Florida Administrative Code Chapter 64-4, and applicable emergency rules.



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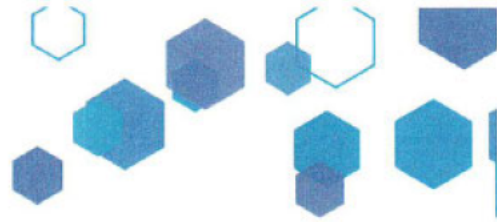
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MMTC Applicant Name

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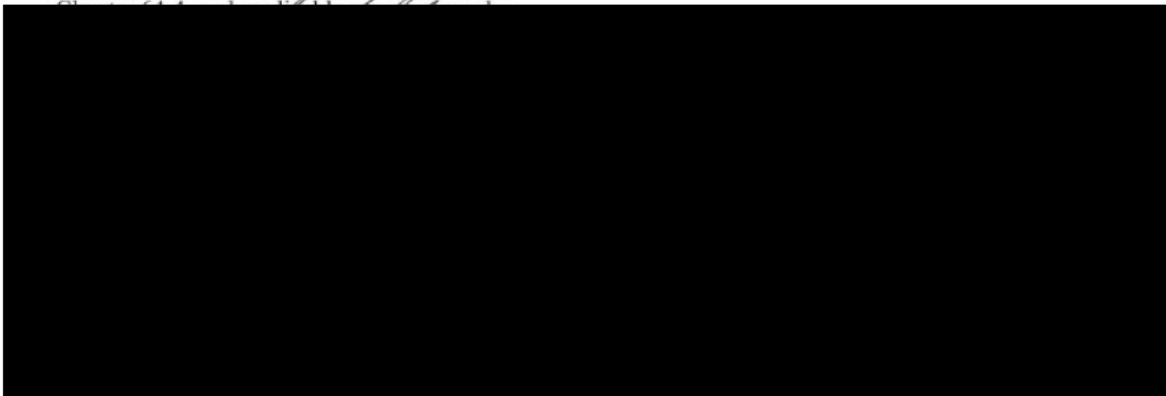


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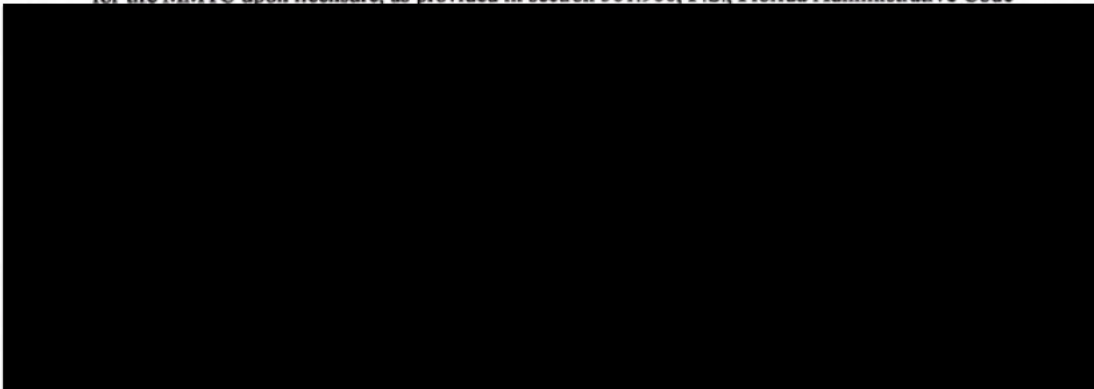


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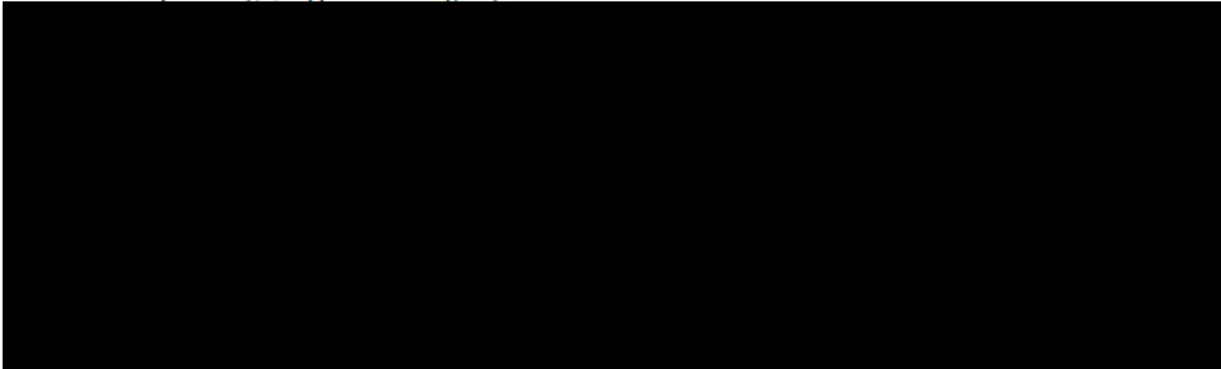


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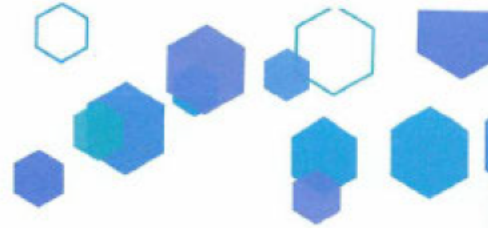


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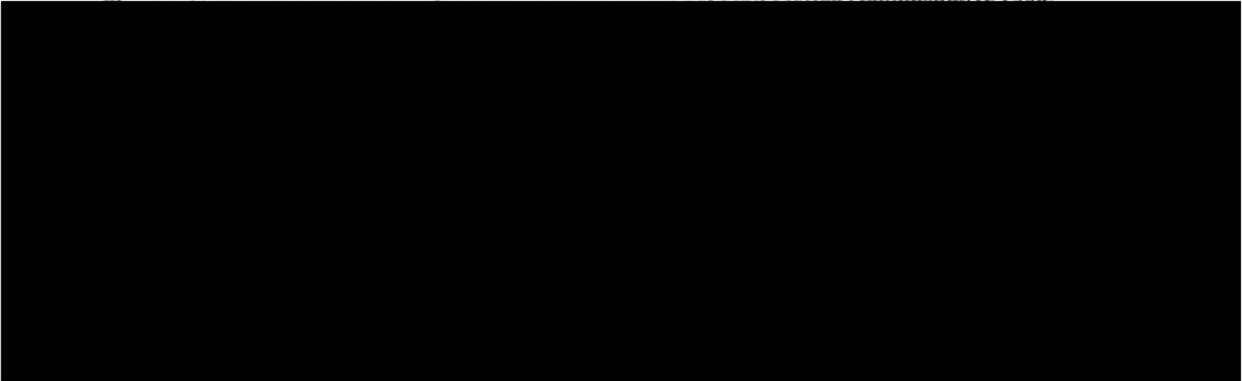


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Signature

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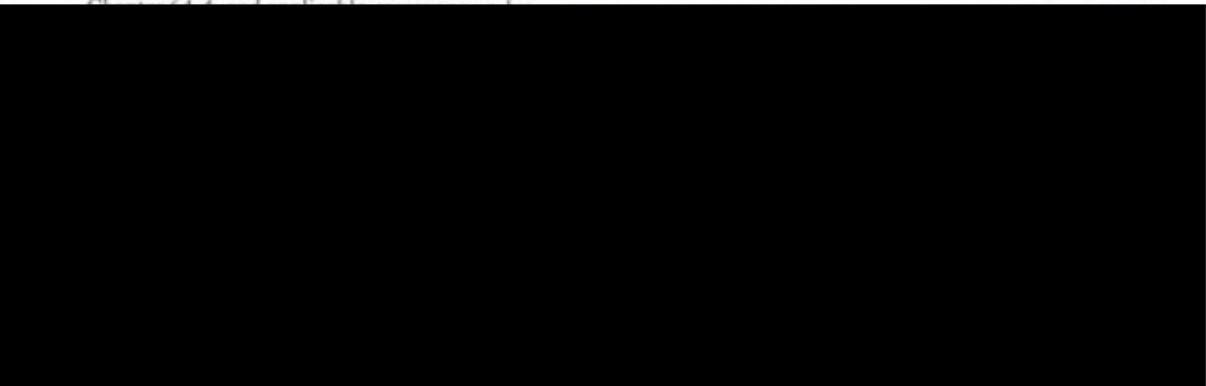
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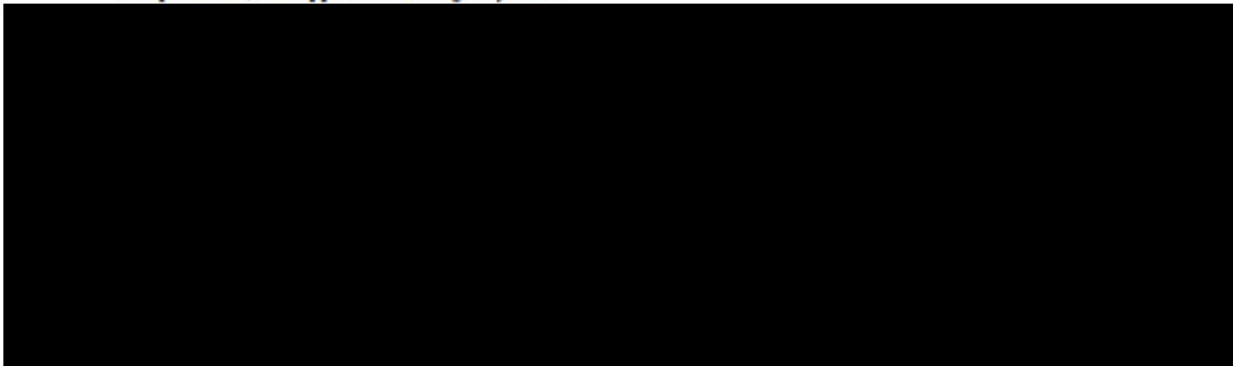


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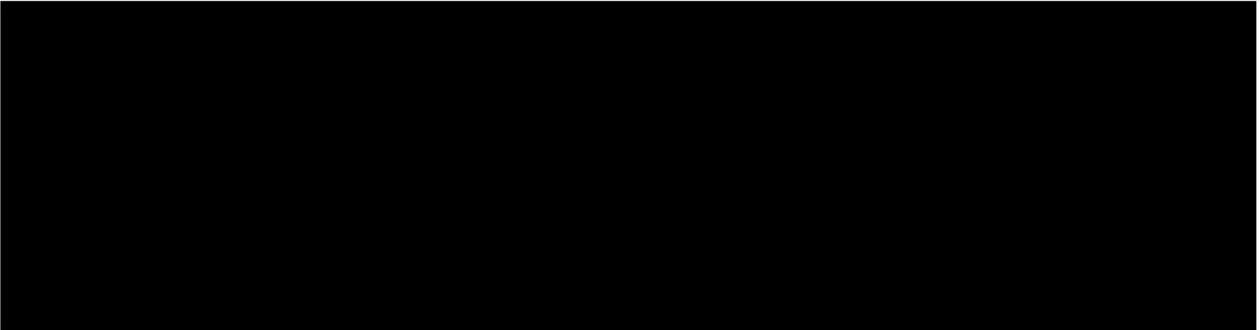


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**OMMU** Office of **MEDICAL MARIJUANA** Use

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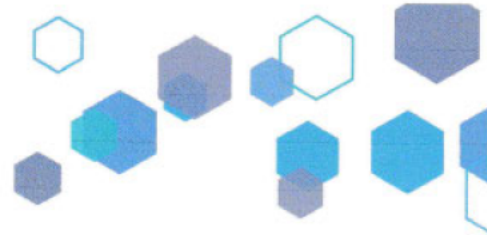
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Southern Roots Filling Station, Inc.

\_\_\_\_\_  
MMTC Applicant Name

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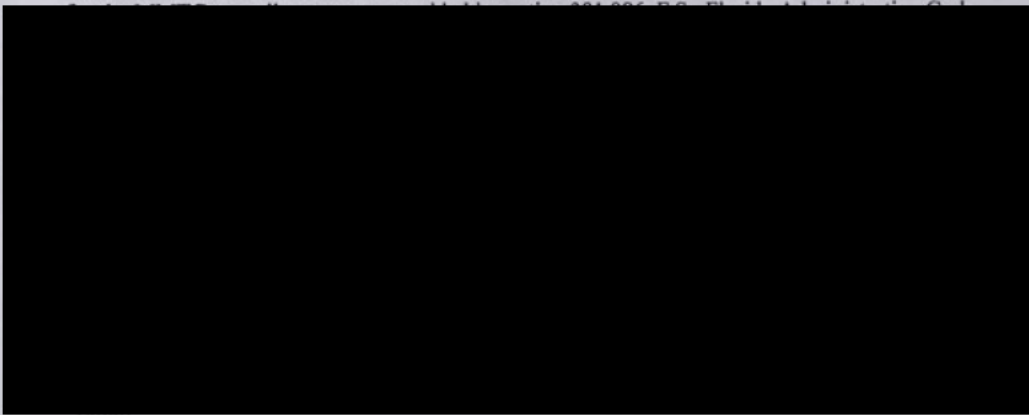


**FORM 2: WAIVER AGREEMENT AND STATEMENT  
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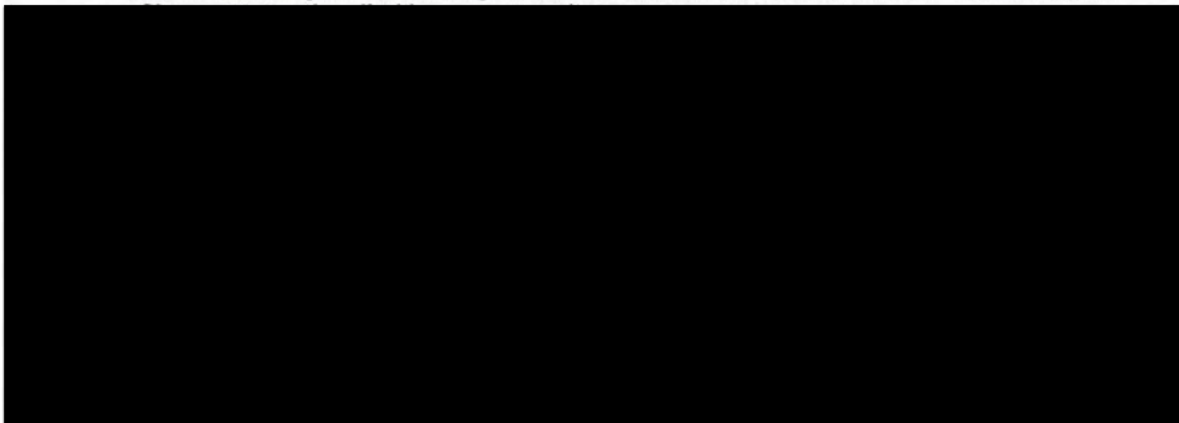


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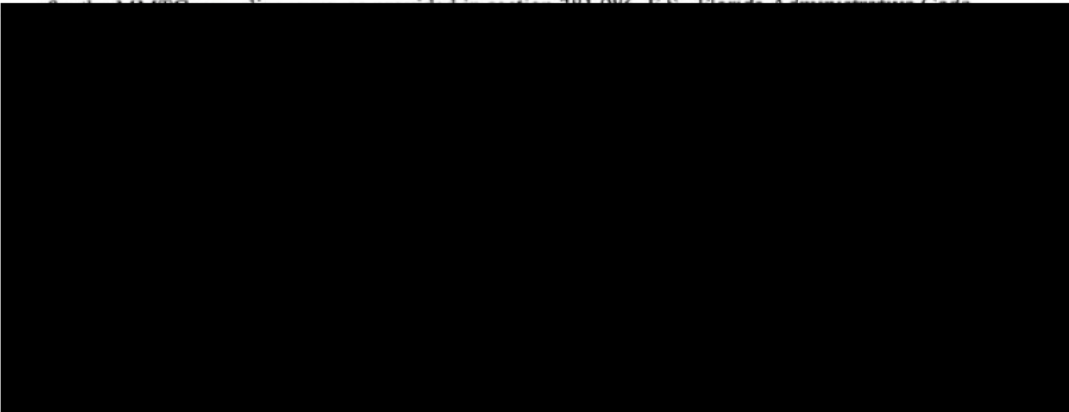


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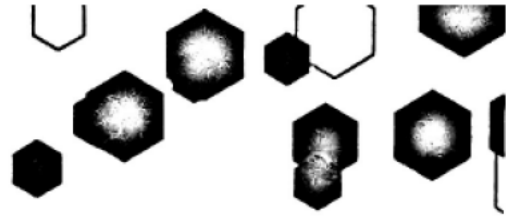
MMTC Applicant Name

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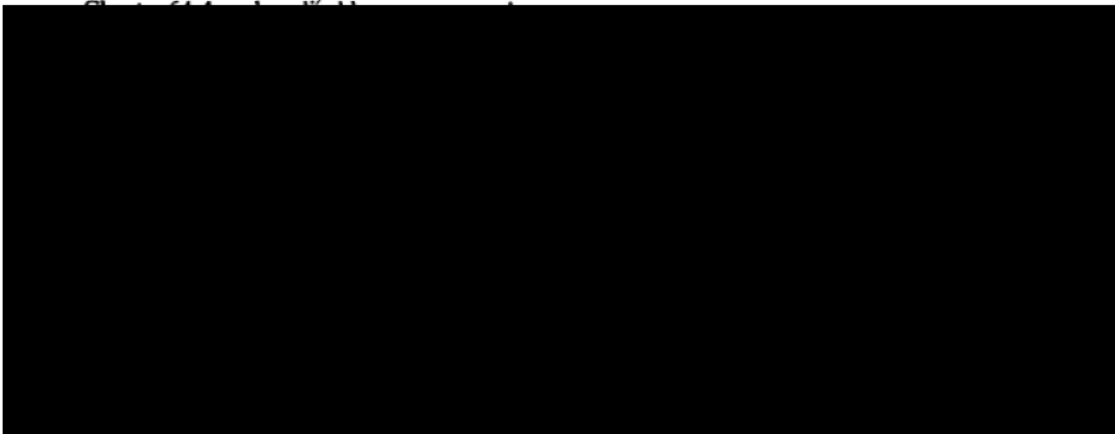


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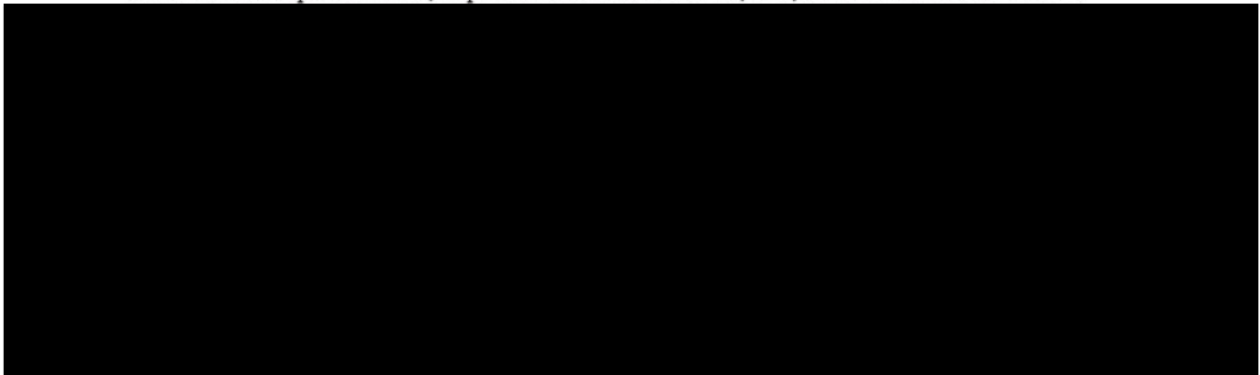


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Email

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MMTC Applicant Name

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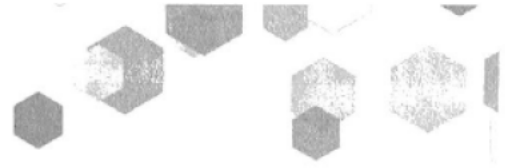
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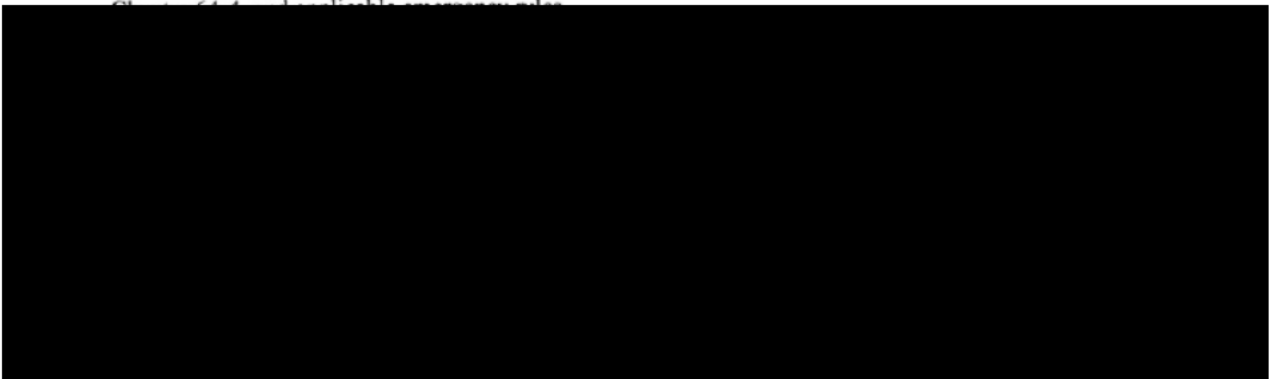


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Southern Roots Filling Station, Inc.

\_\_\_\_\_  
MMTC Applicant Name

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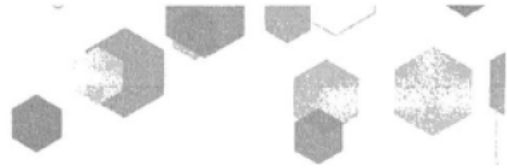
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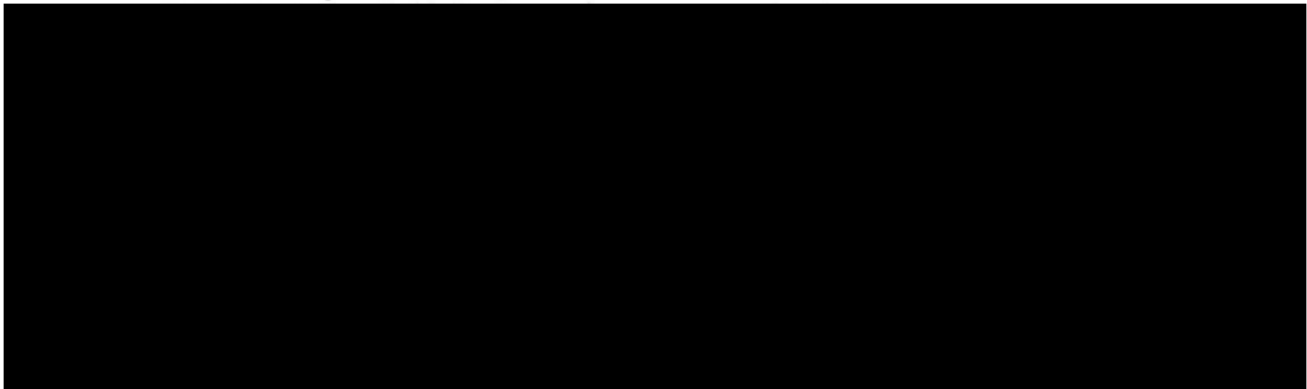


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Entity

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Section 4.4

PLAN FOR CULTIVATING MARIJUANA  
AND SUPPORTING INFRASTRUCTURE



















































































































































































































































































































































































































































## **ANDREW SCOTT VIHLEN, M.D.**

### **Southern Roots, Medical Director**

305.733.5537

Andrew@SouthernRoots.life

1832 Seminole Road

Jacksonville, FL 32205

## **WORK EXPERIENCE**

**October 2019 - present**

***President Emergency Medical Specialists of Jacksonville***

Manage group of over 80 Emergency Medical providers that staff 4 different hospital Emergency Departments

**August 2011 - present**

***Emergency Medicine Physician with EMSJ , St Vincent's Riverside Hospital, St Vincent's Southside Hospital, Ascension St John's Hospital, & St Vincent's Clay County Hospital, Jacksonville FL***

- Assess and attend to all patients who present to the hospital's emergency room.
- Immediately treat any injuries, infections or other conditions to stabilize patients. Patient types include epileptics, cancer patients, pediatrics, cardiac patients, patients with chronic pain disorders, and patients with substance abuse disorders
- Member of Credential Committee, Stroke Committee, and Pharmacy & Therapeutics Committee.

## **CERTIFICATION**

**December 2012 to present**

***Diplomat of American Board of Emergency Medicine***

## **EDUCATION**

**August 2004 – May 2008**

***University of Miami Miller School of Medicine, Miami FL.***

Doctor of Medicine, May 2008.

**August 1998 – December 2002**

***University of Florida, Gainesville, FL, B.S. Degree in Chemical Engineering with Honors***

Trained to design and develop chemical process in the manufacturing industry. Proficient understanding of chemistry, physics, biology, and other sciences to solve problems through chemistry. Developed skills in problems solving, IT, and project management.

## **POST GRADUATE TRAINING**

**July 2008 – June 2011**

***University of Florida at Jacksonville, Emergency Medicine Residency, Jacksonville, FL***

ACLS, PALS, ATLS certification

**May 2010 – June 2011**

***University of Florida at Jacksonville, Emergency Medicine Residency, Jacksonville, FL***

Chief Resident

## **HONORS & AWARDS**

Member of University of Florida Honors Program  
Member of Golden Key. Member of National Society of Collegiate Scholars  
Dean's list in Fall 1998, Spring 1999, Fall 1999, Spring 2001, Fall 2002  
President's Honor Roll Spring 1999 and Spring 2001

## **RESEARCH EXPERIENCE**

### **April 2010 CPC Case Presenter, SAEM**

Presented challenging case that presented to ED and discussed outcome

### **April 2003 – June 2004 Research Coordinator, Florida Ophthalmic Institute.**

Conducted Phase III and Phase IV pharmacologic trials. Was responsible for patient recruitment, data collection, and statistical analysis of independent research.

## **ACTIVITIES & SERVICE**

### **2016-present Jamaica Medical Mission, Volunteer**

Provided yearly physicals and medications to citizens of St Mary's Parish, Jamaica

### **2005-2006 Nicaragua Medical Missions, Volunteer**

Assisted student-run organization that makes yearly trips to Managua, Nicaragua and surrounding areas providing medical care and medications.

## **PROFESSIONAL AFFILIATIONS**

American Medical Association  
Emergency Medicine Residents Association  
American College of Emergency Physicians  
Florida College of Emergency Physicians  
Society for Academic Emergency Medicine

*References available upon request.*

























































































































































































































































SECTION 4.14 APPLICANT ACKNOWLEDGEMENT



**FORM 3(A): ENTITY APPLICANT ACKNOWLEDGMENT AND STATEMENT OF UNDERSTANDING**

I, Cameron Beard, the undersigned representative, hereby represent and warrant that I am authorized to submit this application on behalf of the entity listed on the application (the Applicant) and to attest to the following on behalf of the Applicant.


- All information included in the application is true and correct. Applicant understands that the Department will rely on such information, and that any material misrepresentation in this application is grounds for licensure denial. Further, Applicant understands that if the applicant knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty, the applicant may be found guilty of a misdemeanor of the second degree, punishable as provided in sections 775.082 or 775.083, F.S.
- Applicant understands that this application for licensure creates neither an entitlement to, nor a vested right in, licensure.
- No individual or entity that owns, controls, or holds power to vote 5 percent or more of the voting shares of the Applicant has any direct or indirect ownership or control of a voting share of any currently licensed MMTC.
- No individual or entity that owns, controls, or holds power to vote 5 percent or more of the voting shares of any currently licensed MMTC has any direct or indirect ownership or control of a voting share of the Applicant.
- No currently licensed MMTC has any direct or indirect ownership or control of any voting shares or other form of ownership of the Applicant.
- The Applicant does not have any direct or indirect ownership or control of any voting shares or other form of ownership of a currently licensed MMTC.

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- Notwithstanding the contents of the application, upon licensure, Applicant agrees to abide by, and be bound to, all the requirements of section 381.986, F.S., and all Department rules relating to medical marijuana and medical marijuana treatment centers.
- Applicant understands and agrees that if the Department determines at any point after licensure that the application contained a material misrepresentation, then the license will be revoked.

Representative Name (Printed): Cameron Beard

Representative Signature: 

MMTC Applicant Name: Southern Roots Filling Station, Inc.

Section 4.15  
CITRIS PREFERENCE DOCUMENTATION AVAILABLE (N/A)



**SECTION 4.15 – CITRUS PREFERENCE DOCUMENTATION (N/A)**

Southern Roots Filling Station, Inc. is not seeking to qualify for the citrus preference.