

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Ron DeSantis**  
Governor

**Joseph A. Ladapo, MD, PhD**  
State Surgeon General

**Vision:** To be the **Healthiest State** in the Nation

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**Sent via Electronic Delivery**

May 25, 2023

Green Essence Florida, LLC  
c/o Jasmine S. Johnson  
500 NW 54<sup>th</sup> Street  
Miami, Florida 33127  
[jjohnson@greenessenceflorida.com](mailto:jjohnson@greenessenceflorida.com)

Re: Application for MMTC Licensure – Errors and Omissions Letter

Dear Green Essence Florida, LLC,

On April 28, 2023, the Florida Department of Health received your application for MMTC licensure (the “Application”). The Department has identified the following apparent errors or omissions in your Application.

**1. Subsection 4.3.3, Level 2 Background Screening**

Subsection 4.3.3 of the Medical Marijuana Treatment Center License Application Instructions, Requirements and Forms (the “Application Instructions”) requires that the applicant submit a completed Form 2 (Waiver Agreement and Statement) for each owner or manager, as those terms are defined by Department rules. The Form 2 contained in Subsection 4.3.3 of your Application is either incomplete or incorrect for the following individuals:

- [REDACTED] 435.09 – Form 2 includes a date of birth of [REDACTED] 435.09 [REDACTED].
- [REDACTED] 435.09 – Form 2 includes a date of birth of [REDACTED] 435.09 [REDACTED].

Please provide a corrected and complete Form 2 executed by the above-listed individuals.

Additionally, it appears that your list of owners and managers in Subsection 4.3.3 of the Application may be incomplete. The Addendum to Subsection 4.10.1 of your Application identifies multiple individuals who appear to meet the definition of “owner” or “manager” in Emergency Rule 64ER20-31.

If any of these individuals meet the definition of “owner” or “manager,” they must submit a completed Form 2 to the Department and full set of fingerprints to a Livescan Service Provider for purposes of level 2 background screening. They must also be added to an updated list of owners and managers in Subsection 4.3.2 of your Application and provided to the Department.

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## 2. Subsection, 4.13.3, Capitalization Tables, Change of Control, and Related Entities

Section 381.986(8)(e)2., Florida Statutes, prohibits an MMTC, and any individual or entity who directly or indirectly owns, controls, or holds the power to vote 5 percent or more of the voting shares of an MMTC, from acquiring direct or indirect control of any voting shares or other form of ownership of any other MMTC.

For purposes of ownership attribution, please provide the nature of the familial relationship, if any, among and between the individuals listed in Subsection 4.13.3 of the Application, 119.0715 .

Additionally, if any natural person meets the definition of “owner” or “manager,” even if by familial attribution of ownership (as provide by Department rule), such natural persons must submit a completed Form 2 to the Department and a full set of fingerprints to a Livescan Service Provider for purposes of level 2 background screening. Those natural persons must also be added to an updated list of owners and managers in Subsection 4.3.3 of your Application and submitted to the Department.

Finally, please provide the operating agreement for Green Essence Florida, LLC, if any.

## 3. Section 4.15, Citrus Preference Documentation

Section 4.15 of the Application Instructions requires applicants seeking to qualify for the citrus preference, as described in section 381.986(8)(a)3., Florida Statutes, to provide certain documents and information. Among the information requested is the address for the facility (or facilities) that is or was used for the canning, concentrating, or otherwise processing of citrus fruit or citrus molasses.

Your Application states that the facility address is 119.0715 . However, other information in the Application suggests that the address is 119.0715 .

Please confirm that the correct address is 119.0715 .

Additionally, an applicant seeking to qualify for the citrus preference is required to:

Provide a deed or other recorded document demonstrating that the applicant holds legal ownership of the facility (or facilities) identified in item 1. Additionally, provide the parcel ID number associated with the facility (or facilities) . . . .

Your Application does not include a deed or other recorded document demonstrating that you, Green Essence Florida, LLC, hold legal ownership of the facility. Although the Application includes a lease by 119.0715 , those documents do not appear to be a deed or other recorded document demonstrating that Green Essence Florida, LLC holds legal *ownership* of the facility.

Please provide a deed or other recorded document demonstrating that you, Green Essence Florida, LLC, hold legal *ownership* of the facility (or facilities) that is or was used for the canning, concentrating, or otherwise processing of citrus fruit or citrus molasses, as required by section 4.15 of the Application Instructions.

## Deadline to Respond

The Department must receive the above-requested documentation and information within twenty-one (21) calendar days of the date on which the Department emails this letter to you. See Section 5.1 of the

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Application Instructions for the submission address and requirements. Failure to supply the requested documentation and information identified above may result in denial of your Application.

If any materials submitted to the Department in response to this letter contain confidential information, you must comply with the requirements of Section 2.4 of the Application Instructions when submitting such information.

Sincerely,

*Christopher Kimball*

Christopher Kimball  
Director  
Office of Medical Marijuana Use