

**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

Connaissance Software LLC  
c/o Bruce R. Knox  
9716 Wild Oak Dr.  
Windermere, Florida 34786  
bruce@knoxhort.com

Re: Application for MMTC Licensure – Errors and Omissions Letter

Dear Connaissance Software 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 and 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 individual:

- **435.09** – Form 2 is missing a date of birth.

Please provide a corrected and complete Form 2 for the above-listed individual.

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

- **435.09**

If this individual meets the definition of “owner” or “manager,” he 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; he must also be added to an updated list of owners and managers in Subsection 4.3.3 of your Application and provided to the Department.

**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