Report: MEDICAL MARIJUANA CERTIFICATION

Report Id: RCRRR783

Filename::

Run By: **PRDREP**

Report Date: 06/29/2020



STATE OF NEVADA MEDICAL MARIJUANA DISPENSARY REGISTRATION CERTIFICATE DEPARTMENT OF TAXATION

Issued Date: 07/01/2020 Expiration Date: 06/30/2021 Certificate Number: 31687553825305698491

Establishment ID: D042

Taxpayer ID: 1038390257-001 Correspondence ID:2000013515097

THIS REGISTRATION CERTIFICATE:

IS VOID IF ALTERED.

IS NOT ISSUED IN LIEU OF ANY LOCALLY REQUIRED BUSINESS LICENSE, PERMIT

OR REGISTRATION.

IS VALID UNLESS SUSPENDED OR

REVOKED.

ESSENCE CANNABIS DISPENSARY 2580 ANTHEM VILLAGE DR HENDERSON NV 89052-5503

AS DEFINED BY NRS CHAPTER 453A.

Current Registration Certificate Location

ESSENCE CANNABIS DISPENSARY 4300 E SUNSET RD STE A2A3 HENDERSON NV 89014-2267

MUST BE DISPLAYED IN PUBLIC VIEW AT ESTABLISHMENT LOCATION

(Detach Here)

Attached is your NEVADA Marijuana Dispensary Establishment Registration Certificate.

A single number, the TID (Taxpayer Identification Number), identifies a taxpayer for MOST tax types. Please use your TID and LOC (Location Number) in correspondence or telephone calls to the Department.

As stated on the application or renewal, this license is valid from the issue date through 06/30/2021.

The Department of Taxation has forms, publications and information available via the internet at https://tax.nv.gov.

This Certificate authorizes the holder to operate in accordance with the provisions of NRS 453A and NAC 453A. By accepting this license, I certify that I understand that I am required to comply with all State of Nevada laws, including, but not limited to NRS 453A and NAC 453A, and that noncompliance may result in penalties, suspension or revocation of this registration certificate and criminal prosecution.

This Nevada Marijuana Dispensary Establishment Certificate has been issued pursuant to an application or renewal duly filed and payment of prescribed fees and bond if applicable. This License shall be considered valid unless canceled, suspended or revoked for good cause in accordance with NRS chapter 453A.

OFFICE LOCATION:

Nevada Department of Taxation 1550 College Pkwy Suite 115 Carson City NV 89706 (775) 684-2000

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Total Count 1 End of Report