

Notification to Municipality OCM-06009

RE:	Notification of adult-use retail dispensary license application		
License Type:	New Establishment		
Previous DBA:			
License Number (i	f applicable):		
Applicant Name:	Henok Abraha		
Phone Number:	2067691282	Rec'd By Community Soard 3, fact.	
Email Address:	henok.abraha@gmail.com	NOV 0 9 2023	
	Clerk/NYC Community Board: Otification that I (name) Henok Abraha		
of (dba) KushKlı			
	e, file(d) an application for licensure with the	Office of Cannabis Management	
to open a(n):	, , , , , , , , , , , , , , , , , , , ,	omet er earniable managemen	
mid	ail dispensary premises (new or additional) crobusiness	registered organization with dispensing (or ROD)	
in (county name)	New York County . This busing	ness, once the license is approved, shall be located	
at:			
Address Line 1:	186 Orchard Streeet		
Address Line 2:			
City	New York		
Zip code:	10002		
The mailing addre	ss is (if different from business location): 100 suffolk st		
Address Line 2:	apt 4b		
City/Town/Village:	New York		
State: NY	Zip code: 10002		

(As applicable, nar	ne of business if different from above) has Pashmein services of (attorney or representative)	Stein Walder Hayden P.C.		
retained the legal s	ervices or (attorney or representative)			
Name:	Alana Hans-Cohen			
Address Line 1:	Court Plaza South 21 Main St #200			
Address Line 2:				
City/Town/Village:	New Jersey			
State: N5	Zip code: <u>07601</u>			
Telephone with area code: (718) 902-0486				
If the municipality or community board would like to express an opinion to the Cannabis Control Board, they must respond to this notification within 30 days by emailing an opinion to municipalities@ocm.ny.gov . This expressed opinion must be on official municipality or community board letterhead.				
If the municipality or community board would like to request a one-time 30 day extension for the municipality or community board to provide their opinion, or if the municipality or community board has any comments, concerns, or questions, they must reach out to the Office at municipalities@ocm.ny.gov with "Notification to Municipalities Municipality Opinion 30 Day Extension Request — [Insert municipality or community board name here]" in the subject line. Municipalities or community boards should be sure to provide proof of the date of receipt of the Notification to Municipalities that they wish to request an extension of time for submitting a municipality opinion. Any request that does not include such information will be rejected as incomplete.				
Signed	Today's	date: 1/-1-23		
Print Henry K	Abraha			