

Notification to Municipality OCM-06009

RE:	Notification of adult-use retail dispensary license app	lication
License Type:	New Establishment	
Previous DBA:		Rec'd By Community Board 3, Man
License Number	(if applicable): comerue -2022 - 327	HH 4 50001
Applicant Name		JUL 1 5 2024
Phone Number:	917-982-5409	
Email Address:	Timmy @ flowerguys. nyc	
	Clerk/NYC Community Board:	
of (dba)	Dai Ma LLC dba Flower &	aud
intend to, or ha	ve, file(d) an application for licensure with the O	0
to open a(n):		
	etail dispensary premises (new or additional)	registered organization with dispensing (or ROD)
in (county name	e) New York County. This busine	ss, once the license is approved, shall be located
at:		
Address Line 1:	212 East 14th street	
Address Line 2:		
City	New York	
Zip code:	(000)	
The mailing add	lress is (if different from business location):	
Address Line 1:	254 Battery Ave	
Address Line 2:		
City/Town/Villag	e: Brooklyn	
State: NH	Zip code: 11239	

	ne of business if different from above) has				
retained the legal s	ervices of (attorney or representative)				
Name:	Douglas Chau, Esq.				
Address Line 1:	8482 Bevery Rd	-			
Address Line 2:	Apt 2A				
City/Town/Village:	Kew Gardens				
State: N	Zip code: 145				
Telephone with are	a code: 646-269-4397				
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 . 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 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: 6 1171 2 0 2 4					
Signed	ma	Today's date: _	611112024		
PrintIm	my Li				