



RE: Notification of adult-use retail dispensary license application

License Type: New Establishment

Previous DBA: (none)

License Number: CAURD 2022-224

Applicant Name: WhiteboxTHC LLC

Phone Number: 646-263-7890

Email Address: wei@mrtalaw.com

RECEIVED

AUG 03 2023

BY COMMUNITY BOARD 8

Dear Municipal Clerk/NYC Community Board:

This serves as notification that I (name) Wei Hu

of (dba) WhiteboxTHC LLC (d/b/a Lenox Hill Cannabis Co.)

have obtained a provisional license from the Cannabis Control Board and intend to file an application for full licensure with the Office of Cannabis Management to open a

- retail dispensary
- on-site consumption business

in (county name) New York County. This business, once the license is approved, shall be located at:

Address Line 1: 334 East 73rd Street

Address Line 2: _____

City: New York

Zip code: 10021

The mailing address is (if different from business location):

Address Line 1: 87 Columbia Street

Address Line 2: APT 12J

City/Town/Village: New York

State: Zip code: 10002

(As applicable, name of business if different from above) has MRTA Law PC
retained the legal services of (attorney or representative)

Name: Wei Hu, Esq.
Address Line 1: 87 Columbia St.
Address Line 2: APT 12J
City/Town/Village: New York
State: Zip code: 10002
Telephone with area code: (646) 263-7890

If you would like to express an opinion to the Cannabis Control Board please respond to this notification within 30 days by certified mail, return receipt requested or overnight delivery service with proof of mailing. This expressed opinion can be mailed to:

Attn: Licensing Unit
New York State Office of Cannabis Management
P.O. Box 2071 Albany, NY 12220

If you would like to request a one-time 30 day extension for the municipality or community board to provide their opinion, or if you have any comments, concerns, or questions, please reach out to the Office at municipalities@ocm.ny.gov with "Notification to Municipalities Municipality Opinion 30 Extension Request – [Insert your municipality name here]" in the subject line. Please be sure to provide proof of the date of receipt of the Notification to Municipalities that you 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 Wei Hu Digitally signed by Wei Hu Date: 2023.08.02 19:43:44 -04'00' Today's date: 8/2/23
Print WEI HU