



## San Luis Obispo County Sheriff's Office Change of Cannabis Business Structure/Ownership



### What is this form?

*Certain changes of your business or ownership structure require that you notify the San Luis Obispo County Sheriff's Office. Use this form if you are making any change to your business structure and:*

- *Any individual or legal entity that met the definition of a "financial interest" is being removed from the business structure; or*
- *Any individual or legal entity that will meet the definition of an "applicant" or "financial interest" is being added to the business structure.*

A "change of ownership" means you are proposing to add or replace an owner or financial interest who did not hold a direct or indirect interest in the business at the start of the license year or will collectively hold a direct or indirect interest in the business moving forward.

Ownership changes are not effective until the background investigation is complete, and approval has been granted by the San Luis Obispo County Auditor-Controller-Treasurer-Tax Collector on recommendation from the Cannabis Compliance Team and the Department of Cannabis Control.

Attach copies of the updated San Luis Obispo County Sheriff's Office Cannabis Business Financial Interest Form, LLC Questionnaire, and/or Corporate Questionnaire with the submission of this form.

**Submit this notification via email to: [SH-cannabis@co.slo.ca.us](mailto:SH-cannabis@co.slo.ca.us)**

### Section 1-License Change Information

<b>Business Name or Licensee:</b>	
<b>Business License Number:</b>	
<b>DRC or CNBS Plan Number:</b>	
<b>Effective Date of Change:</b>	
<b>DCC State License Number:</b>	



**San Luis Obispo County Sheriff's Office**  
**Change of Cannabis Business Structure/Ownership**



**Removing Financial Interest(s)/Owner(s):**

*I am notifying the San Luis Obispo County Sheriff's Office that the following individuals or legal entities will no longer be "financial interests" and will not meet any of the qualifications set forth as a financial interest.*

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

**Adding Financial Interest(s)/Owner(s):**

*I am notifying the San Luis Obispo County Sheriff's Office that the following individuals or legal entities are being added as "financial interests" and will meet one or more of the qualifications set forth as a financial interest.*

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	



# San Luis Obispo County Sheriff's Office

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### Section 2- Affiliated Licenses

Does the Business or Licensee named in Section 1 hold any other San Luis Obispo County Business Licenses?    Yes     No

Are any other "financial interests" impacted by this change? (For example- Are ownership percentages changed by this Business Structure change?)

Yes     No

### Section 3- Signature

By signing this form, I attest that:

- If I am adding any individuals that will meet the definition of an "applicant" or "financial interest" for my San Luis Obispo County business license, I am attaching a contact form for each of those individuals.
- If I am adding any individuals that will meet the definition of an "applicant" or "financial interest" to my license, each of these individuals will submit to fingerprints for a background investigation.

Note: If an individual has previously submitted fingerprints with another cannabis license application or business within San Luis Obispo County, they do not need to submit new fingerprints for this notification to be considered complete. If they have never previously submitted fingerprints for a cannabis license application business within San Luis Obispo County, they must do so before this form is signed.

I HEREBY CERTIFY THAT I HAVE PERSONALLY COMPLETED EACH PIECE OF THIS FORM AND ATTACHED ANY SUPPLEMENTAL PAGE(S). I AFFIRM THAT, UNDER PENALTY OF PERJURY, THE INFORMATION CONTAINED WITHIN AND SUBMITTED WITH THIS APPLICATION FORM IS COMPLETE, TRUE AND ACCURATE. IN ADDITION, I AFFIRM THAT, UNDER PENALTY OF PERJURY, THOSE PERSON(S) LISTED ABOVE ARE THE ONLY PERSON(S) OR LEGAL ENTITIES WITH A FINANCIAL INTEREST IN THE CANNABIS BUSINESS OPERATIONS.

\* I UNDERSTAND THAT A MISREPRESENTATION OF FACT IS CAUSE FOR REJECTION OF MY APPLICATION, DENIAL OF LICENSE, OR REVOCATION OF A LICENSE ISSUED. \*

"FINANCIAL INTEREST IN THE CANNABIS OPERATIONS" INCLUDES OWNERSHIP INTEREST IN THE CANNABIS BUSINESS AS WELL AS THE PROPERTY SITE IF NOT OWNED BY THE CANNABIS BUSINESS.

Signature

Date:

Name

Title