



Amendment Application Instructions

Amendment Application Process

Cannabis Regulatory Agency
517-284-8599
mi.gov/cra
CRA-Amendments@michigan.gov

Amendment Application Instructions

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Amendment Application Instructions

General Overview

Amendment Application Instructions

General Overview

Per the MMFLA, MRTMA, and the Administrative Rules, applicants shall report to the agency any proposed material changes to the marijuana business before making a material change that may require prior authorization by the agency.

The applicant/licensee must submit the amendment application for each amendment being requested. If a proposed change applies to both Medical Facilities Licensing and Adult-Use Licensing, only one amendment should be filed as this will be indicated on the amendment application.

The amendment application must be submitted with the appropriate supporting documentation as listed on page one of the amendment application. Amendments must be filed on the Accela Citizen Access Portal (ACA). Any additional documents after the initial submission should also be uploaded to ACA. Please do not email documents.

After initial review of the amendment application, additional supporting documentation may be required, and the applicant will receive a notice of deficiency from the agency if applicable.

Upon receipt of a notice of deficiency, the applicant must submit the requested documentation to the agency within five (5) business days. If the applicant needs additional time, they may request an extension from their analyst. If the five (5) business days pass from the initial notice of deficiency, the amendment application may be administratively withdrawn for failure to respond.

Amendment Application Instructions

General Overview

An amendment cannot be amended. If the applicant wishes to change the initial amendment, they will need to withdraw the active amendment.

If the proposed amendment has been filed while there is another active application in processing (Step Two, Renewal, Etc.) the amendment will take priority and may cause delays in the other active applications. Please wait to file the amendment until all other active applications are complete.

If an amendment application is administratively withdrawn but the applicant wishes to move forward with the proposed changes, a new amendment must be submitted.

If there are any questions regarding an amendment, please contact the agency by calling (517) 284-8599 or emailing CRA-Amendments@michigan.gov.

Amendment Application Instructions

Supporting Documentation

Amendment Application Instructions

Supporting Documentation

Before initiating the amendment application process, be advised each amendment type will have a specific set of documents that will be required. These documents are required to be submitted with the amendment application. The following documentation will be required regardless of the type of amendment:

- A completed Amendment Application
- Proposed Governing Documents
 - If no changes will occur with the proposed amendment, the existing governing documents should be uploaded.
 - Do not have the proposed governing documents signed and dated until approval is received from the agency, unless the governing documents clearly identify they are not effective until receiving approval from the agency.
- Organizational Structure
 - Page 3 of the amendment application provides an example of the document required.
 - This document must include ownership percentages, spouses, and titles of all members. Please use the instructions on the example to correctly complete this requirement.

The supporting documents needed for each specific amendment type are detailed in the next few pages.

Amendment Application Instructions

Supporting Documentation - Ownership Changes

Ownership Changes (Add/Remove/Change Equity Stake): Changes include, but are not limited to, the following: Change in owners, officers, members or managers and/or the addition or removal of persons named in the application or disclosed. The supporting documents that are required to be submitted are as follows:

Change of Ownership - Adding:

- Amendment Application
- Governing Documents (proposed or current if no changes are being made)
- Organizational Structure

*Please note new supplemental applicants who have not already submitted a supplemental application with the agency will be required to do so.

Change of Ownership - Removing:

- Amendment Application
- Governing Documents (proposed or current if no changes are being made)
- Organizational Structure
- Authorizing Resolution or Withdrawal Letter

Change of Ownership - Equity Only:

- Amendment Application
- Governing Documents (proposed or current if no changes are being made)
- Organizational Structure
- Authorizing Resolution

Amendment Application Instructions

Supporting Documentation - Change in Legal Entity Name

Change in Legal Entity Name: This would be a change of the official business name (the name that would be filed on the business tax returns). This is not to be confused with any assumed name the business may be operating under. The supporting documents that are required to be submitted are as follows:

- Amendment Application
- Governing Documents (proposed or current if no changes are being made)
- Organizational Structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Amendment Application Instructions

Supporting Documentation - Converting an Entity

Converting an Entity: Converting a business from a Corporation to a Limited Liability Company or vice-versa may result in a change to the equity stake held by individuals/entities involved in the main-applicant (license holding) entity. The administrative rules identify applicants differently between a Corporation and a Limited Liability Company which may result in individuals/entities being added or removed from disclosure with the entity. The supporting documents that are required to be submitted for a conversion are as follows:

- Amendment Application
- Governing Documents (proposed or current if no changes are being made)
- Organizational Structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Amendment Application Instructions

Supporting Documentation - Asset Purchase

Asset Purchase: Changes include, but are not limited to, the following: Any attempted transfer, sale, or conveyance of an interest in a marijuana license. The direct purchase and/or transfer of a license from one entity to another will not be permitted. The purchase of all assets of a marijuana facility and/or establishment in order to operate the location under a new entity requires a proposed amendment application to be submitted to the agency. The supporting documents that are required to be submitted for an asset purchase are as follows:

- Amendment Application
- Governing Documents (purchaser proposed or current if no changes are being made)
- Organizational Structure
- Purchase Agreement

*Please note a Step 2 license application will be required to be submitted by the purchaser.

Amendment Application Instructions

Completing the Amendment Application Form

Amendment Application Instructions

Amendment Application Form - General Information

General Information: Complete all fields within the general information section.

- Main Applicant/Licensee Legal Name - This section should be the official name of the company, not an Assumed Name/Doing Business As name.
- Main Applicant/Licensee Prequalification Record Number (e.g., ERG-000000, AU-ER-000000) - This section will need all prequalification record numbers the specific amendment will apply to. If you are unsure of the record number, please login to your ACA account to find the correct numbers or send an email to CRA-Amendments@michigan.gov.
- Email - This section will need to be completed with the email address the main applicant would like associated to their record.
- Phone - This section will need to be completed with the phone number the main applicant would like associated to their record.
- Mailing Address - This section will need to be completed with the current mailing address documents should be sent to for the main applicant.

General Information			
Main Applicant/Licensee Legal Name		Main Applicant/Licensee Prequalification Record Number (e.g., ERG-000000, AU-ER-000000)	
Email		Phone	
Mailing Address (including Suite, Unit, Building #'s)	City	State	Zip Code

Amendment Application Instructions

Amendment Application Form - Amendment Type

Amendment Type: Select the checkbox that is associated to the type of amendment the applicant is requesting.

- Adding or removing any member, director, managerial employee, etc. is considered a change of ownership.

Amendment Type	
<input type="checkbox"/>	Change of Ownership (Adding/Removing/Change of Equity)
<input type="checkbox"/>	Change of Entity Name
<input type="checkbox"/>	Conversion
<input type="checkbox"/>	Asset Purchase

Amendment Application Instructions

Amendment Application Form - Description of Proposed Amendment

Provide a Detailed Description of the Proposed Amendment: Give a detailed explanation of the proposed amendment including the names of all parties involved.

- For example: ABC 123 Inc. is removing John Doe as the director, and he is being replaced with Jane Smith.

Provide a Detailed Description of the Proposed Amendment (i.e., removing John Doe as 50% owner of Entity A, LLC)

Amendment Application Instructions

Amendment Application Form - Person Completing Form

Person Completing Form: Complete all fields in this section.

- Name - Provide the name of the person completing the form.
- Affiliation with Amendment Applicant - Provide the affiliation that the person completing the form has with the amendment applicant.
- Email Address - Provide the email address of the person completing the form.
- Phone - Provide the phone number of the person completing the form.

Person Completing Form	
Name (First, Middle, Last):	Affiliation with Entity:
Email Address:	Phone:

Amendment Application Instructions

Amendment Application Form - Attestation: Section 1

Amendment Verification & Affidavit of Full Disclosure Attestation - Section 1:

- Complete the first line with the name of the amendment applicant.
- Complete the second line with the name of the individual who is authorized to sign on behalf of the amendment applicant.

AMENDMENT VERIFICATION & AFFIDAVIT OF FULL DISCLOSURE ATTESTATION

Add additional pages of this form as necessary to account for multiple contact persons.

On behalf of

Legal Name of Amendment Applicant

I

Name & Title of Individual Authorized to Sign on Behalf of Applicant

confirm the following:

1. I am the individual responsible for submitting this amendment application and have full authority to execute this amendment application.

Amendment Application Instructions

Amendment Application Form - Attestation: Section 2

Amendment Verification & Affidavit of Full Disclosure Attestation - Section 2:

- Fill in the blank with the name of the individual who is authorized to be the contact for the amendment. This person will only be able to contact the agency for information specific to this amendment.

2. I authorize the Cannabis Regulatory Agency (Agency) to add to be a contact person for this amendment. I understand that this person will have access to this amendment record. Further, I understand that this person will retain access and is authorized to communicate with and receive communication from the Agency regarding only this amendment until the licensee submits an official request to remove this person's access and cease communication with this person. The contact information for this person is provided below.

Amendment Application Instructions

Amendment Application Form - Attestation: Section 3

Amendment Verification & Affidavit of Full Disclosure Attestation - Section 3:

- Fill in the blanks with the *E-mail Address*, *Phone Number*, and *ACA Login User ID* (if applicable), of the contact person.

3. The contact information to be used in communications regarding the amendment application named above is as follows:

Contact E-mail Address:

Contact Phone Number:

Contact Person's ACA Login User ID (if applicable):

(IMPORTANT: ACA Login User ID is required if the contact person needs to have access to online records.
Please contact the Agency if you need assistance creating an ACA account.)

Amendment Application Instructions

Amendment Application Form - Attestation: Notarization Section

Amendment Verification & Affidavit of Full Disclosure Attestation - Notarization Section:

- The individual who is authorized to sign documents on behalf of the amendment applicant should sign and date the spaces provided in the presence of an active notary.
- The remaining spaces should be completed by an active notary.

**The name of the individual from section 1 of the attestation must match the individual in this section.*

**The date of the notary and the signature date of the individual must match.*

(Signature of Individual Authorized to Sign on Behalf of Main Applicant)	(Date)
<div style="border: 1px solid black; padding: 10px;"><p>Subscribed and sworn to by _____ before me on _____.</p><p style="text-align: center;">(Authorized Individual Name) (Date)</p><p>_____ (Notary Public Signature) (Notary Public Printed Name)</p><p>State of _____, County of _____, Acting in the county of _____, _____.</p><p style="text-align: center;">(county) (state)</p><p>My commission expires: _____.</p></div>	

Amendment Application Instructions

Amendment Application Form - Disclosure of Ownership

Disclosure of Ownership - Parties & Spouses

- Enter the name and phone number of the amendment applicant on the top of the form.
- Disclose the information of each associated applicant in the spaces provided.
 - Read the instructions on this page of the document carefully. Any member listed on this page is considered an applicant and must have a supplemental application on file or will need to submit a supplemental application.
 - Spouses are required to be listed.
 - Owners of supplemental entities, applicant or not, must be disclosed on this document.
 - All sections of a row must be completed as applicable.
 - Missing information will result in a notice of deficiency.

DISCLOSURE OF OWNERSHIP

Entity Name
Phone No.

Parties & Spouses

Disclose all managerial employees and the following for the entity types below. Add additional pages of this disclosure if necessary.

- **For a limited liability company (LLC):** Disclose all managers, all members that have greater than 10% direct or indirect ownership interest and/or that exercise control over or participate in the management of the LLC, and the spouses of these individuals.
- **For a publicly or privately held corporation:** Disclose all corporate officers or persons with equivalent titles, all directors, all shareholders holding a direct or indirect interest of greater than 10% in the corporation, and the spouses of these individuals.
- **For a trust:** Disclose all trustees, all individuals or bodies able to control or direct the affairs of the trust, all beneficiaries receiving or who have the right to receive greater than 10% of the gross or net profit of the trust during any full or partial calendar or fiscal year, and the spouses of these beneficiaries.
- **For a partnership or limited liability partnership:** Disclose all partners and their spouses.
- **For a limited partnership and limited liability limited partnership:** Disclose all general and limited partners with greater than 10% ownership interest and their spouses.
- **For a nonprofit corporation:** Disclose all entities and individuals with membership or shareholder rights and their spouses.

Entity or Individual Name	FEIN or SSN	E-mail Address	Date of Birth (if applicable)	Out of Country Applicant?
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes

Amendment Application Instructions

Amendment Application Form - Disclosure of Ownership, Continued

Disclosure of Ownership, Continued - Ten Percent or Less

- Enter the name and phone number of the amendment applicant on the top of the form.
- Disclose the information of each entity and individuals with 10% or less ownership.
 - Read the instructions on this page of the document carefully.
 - All sections of a row must be completed as applicable.
 - Missing information will result in a notice of deficiency.

DISCLOSURE OF OWNERSHIP, CONTINUED

Entity Name
Phone No.

Ten Percent or Less

List all entities and individuals with 10% or less direct or indirect ownership in the entity for which this application is being completed. Those holding less than 2.5% direct or indirect ownership interest in the main entity are not required to be disclosed.

- **For a limited liability company (LLC):** Disclose all members with 10% or less ownership interest in the main applicant seeking licensure.
- **For a publicly and privately held corporation:** Disclose all shareholders holding an interest of 10% or less in the main applicant seeking licensure. Shareholders holding an interest of 5% or less in the main applicant seeking licensure are not required to be disclosed.
- **For a trust:** Disclose all beneficiaries receiving or who have the right to receive 10% or less of the gross or net profit of the trust during any full or partial calendar or fiscal year
- **For a limited partnership and limited liability limited partnership:** Disclose all general and limited partners with 10% or less ownership interest.

Entity or Individual Name	Mailing Address	Email Address	Date of Birth (if applicable)

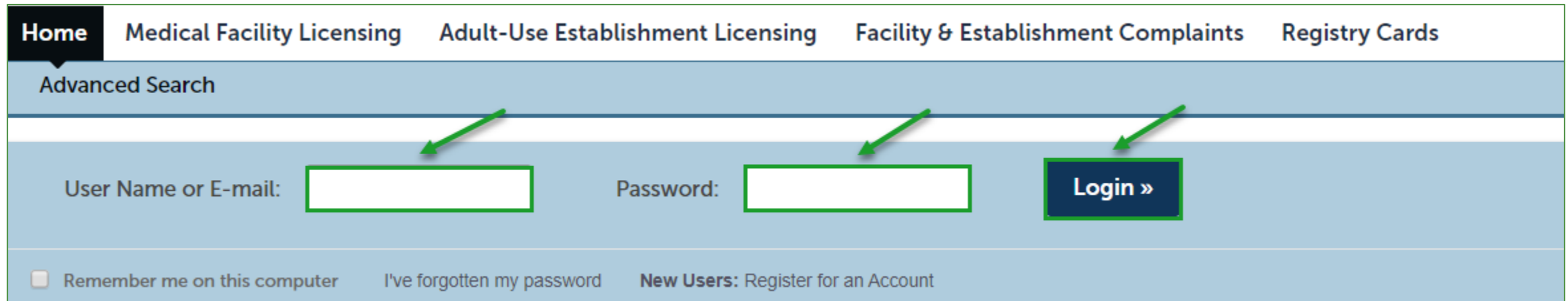
Amendment Application Instructions

Submitting the Amendment Application

Amendment Application Instructions

Amendment Submission - Login to ACA

- Go to ***www.Michigan.gov/CRAonline***.
- Enter ***User Name or E-mail***.
- Enter ***Password***.
- Select ***Login***.



Home Medical Facility Licensing Adult-Use Establishment Licensing Facility & Establishment Complaints Registry Cards

Advanced Search

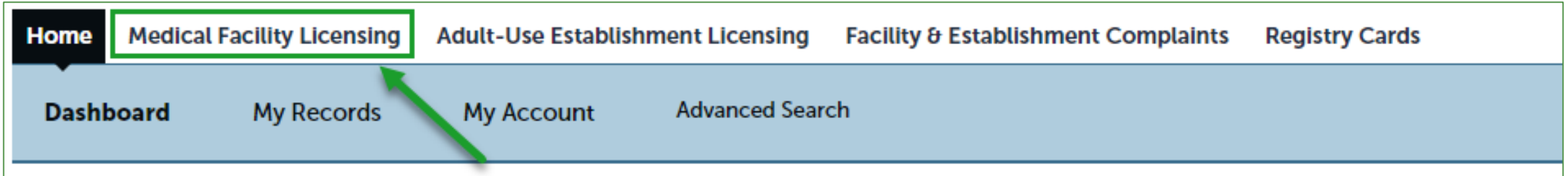
User Name or E-mail: Password: **Login »**

☐ Remember me on this computer I've forgotten my password **New Users:** Register for an Account

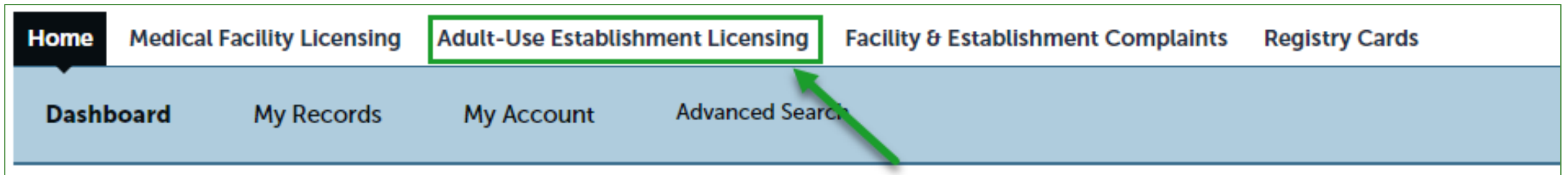
Amendment Application Instructions

Amendment Submission - Select Licensing Section

- If the amendment being submitted is for an applicant/licensee who only has applications/licenses with Medical marijuana licensing, select ***Medical Facility Licensing***.



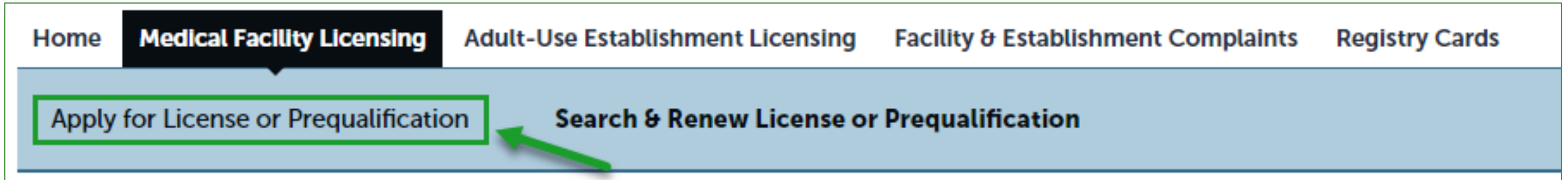
- If the amendment being submitted is for an applicant/licensee who only has applications/licenses with Adult-Use marijuana licensing or with Adult-Use *and* Medical marijuana licensing, select ***Adult-Use Establishment Licensing***.



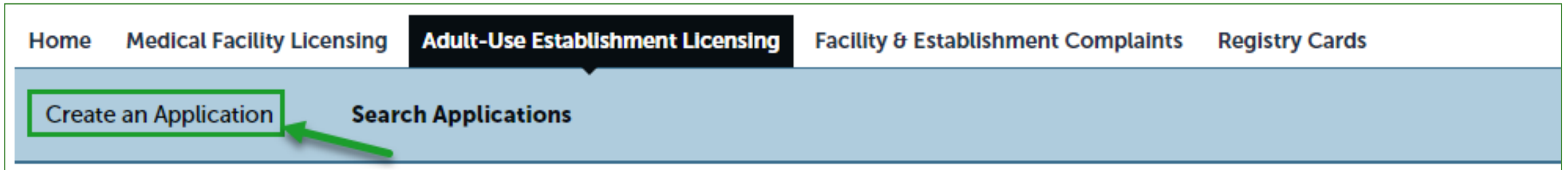
Amendment Application Instructions

Amendment Submission - Select Create an Application

- If under the Medical Facility Licensing tab, select ***Apply for License or Prequalification***.



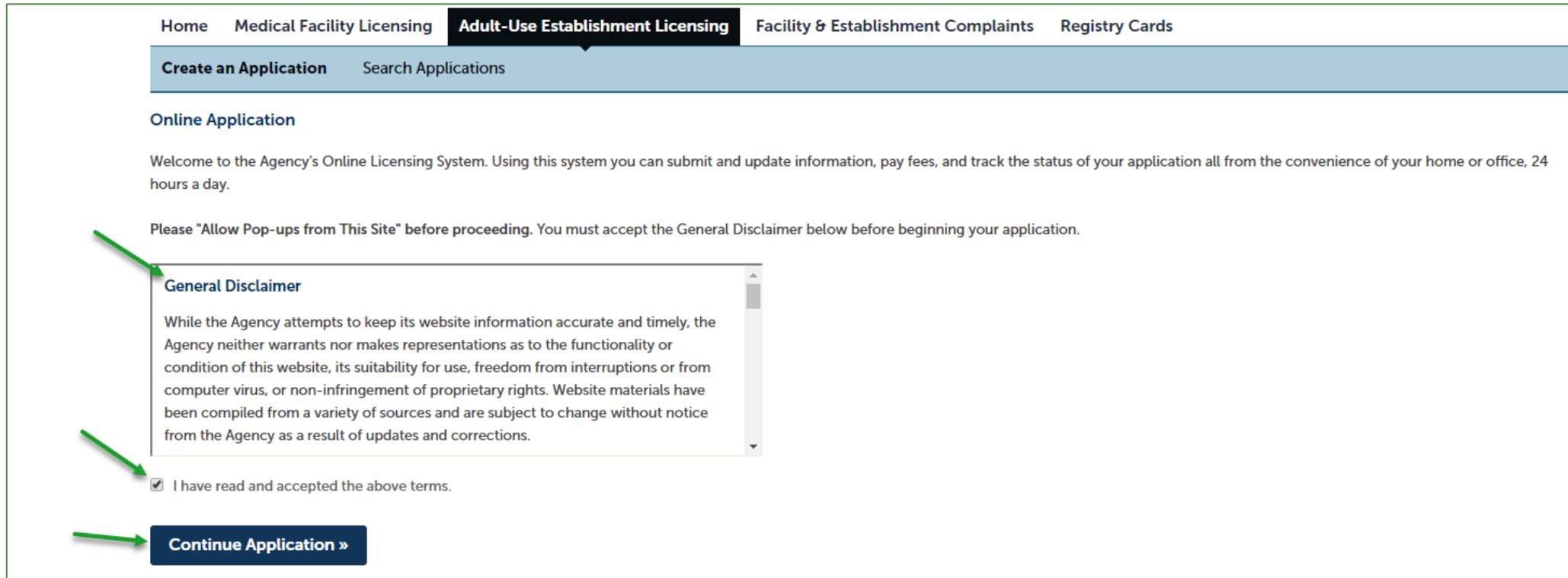
- If under the Adult-Use Establishment tab, select ***Create an Application***.



Amendment Application Instructions

Amendment Submission - General Disclaimer

- Read the ***General Disclaimer***.
- Check the box stating ***I have read and accepted the above terms***.
- Select ***Continue Application***.



The screenshot displays the 'Adult-Use Establishment Licensing' section of the Cannabis Regulatory Agency's website. The navigation bar includes links for Home, Medical Facility Licensing, Adult-Use Establishment Licensing (selected), Facility & Establishment Complaints, and Registry Cards. Below the navigation bar, there are two buttons: 'Create an Application' and 'Search Applications'. The main content area is titled 'Online Application' and contains a welcome message. A green arrow points to the 'General Disclaimer' section, which is a scrollable box containing the following text: 'While the Agency attempts to keep its website information accurate and timely, the Agency neither warrants nor makes representations as to the functionality or condition of this website, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Website materials have been compiled from a variety of sources and are subject to change without notice from the Agency as a result of updates and corrections.' Another green arrow points to the checkbox labeled 'I have read and accepted the above terms.', which is checked. A third green arrow points to the 'Continue Application »' button.

Home Medical Facility Licensing **Adult-Use Establishment Licensing** Facility & Establishment Complaints Registry Cards

Create an Application Search Applications

Online Application

Welcome to the Agency's Online Licensing System. Using this system you can submit and update information, pay fees, and track the status of your application all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

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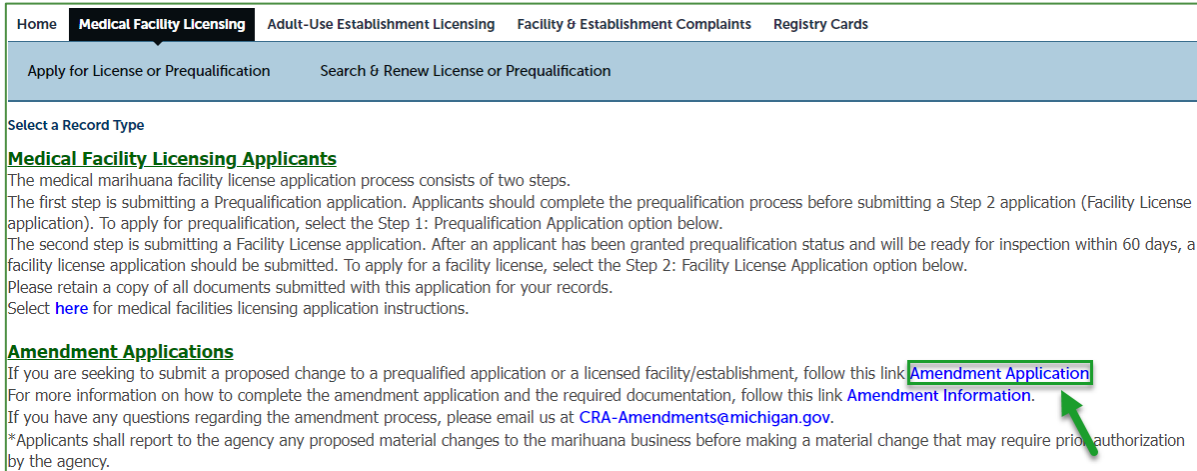
☒ I have read and accepted the above terms.

Continue Application »

Amendment Application Instructions

Amendment Submission - Select Amendment Application

- Select the ***Amendment Application*** link, under the Amendment Applications section.



Home **Medical Facility Licensing** Adult-Use Establishment Licensing Facility & Establishment Complaints Registry Cards

Apply for License or Prequalification Search & Renew License or Prequalification

Select a Record Type

Medical Facility Licensing Applicants

The medical marijuana facility license application process consists of two steps. The first step is submitting a Prequalification application. Applicants should complete the prequalification process before submitting a Step 2 application (Facility License application). To apply for prequalification, select the Step 1: Prequalification Application option below. The second step is submitting a Facility License application. After an applicant has been granted prequalification status and will be ready for inspection within 60 days, a facility license application should be submitted. To apply for a facility license, select the Step 2: Facility License Application option below. Please retain a copy of all documents submitted with this application for your records. Select [here](#) for medical facilities licensing application instructions.

Amendment Applications

If you are seeking to submit a proposed change to a prequalified application or a licensed facility/establishment, follow this link [Amendment Application](#). For more information on how to complete the amendment application and the required documentation, follow this link [Amendment Information](#). If you have any questions regarding the amendment process, please email us at CRA-Amendments@michigan.gov. *Applicants shall report to the agency any proposed material changes to the marijuana business before making a material change that may require prior authorization by the agency.

(Medical Facility Licensing tab)



Home Medical Facility Licensing **Adult-Use Establishment Licensing** Facility & Establishment Complaints Registry Cards

Create an Application Search Applications

Select a Record Type

Social Equity Applicants

If you are seeking to apply for fee reductions under the Social Equity Program, please select the social equity application dropdown below to submit the social equity application. For further instructions on completing the social equity application, click [here](#). If you have any questions about the Social Equity Program, please email us at CRA-SocialEquity@michigan.gov.

Adult-Use Establishment Licensing Applicants

Select [here](#) for adult-use marijuana establishment licensing application instructions. If you have any questions regarding the adult-use application process, please email us at CRA-Adult-Use-Marijuana@michigan.gov.

Amendment Applications

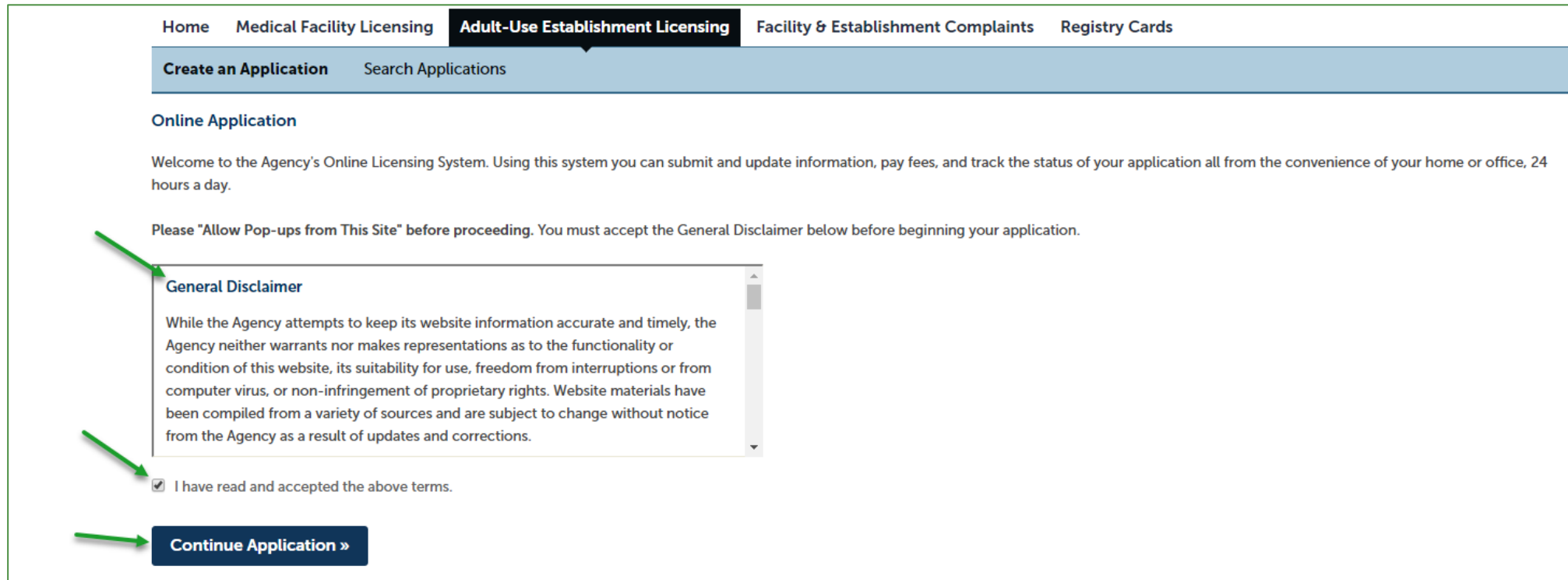
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(Adult-Use Establishment Licensing tab)

Amendment Application Instructions

Amendment Submission - General Disclaimer

- Read the ***General Disclaimer***.
- Check the box stating ***I have read and accepted the above terms***.
- Select ***Continue Application***.



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☒ I have read and accepted the above terms.

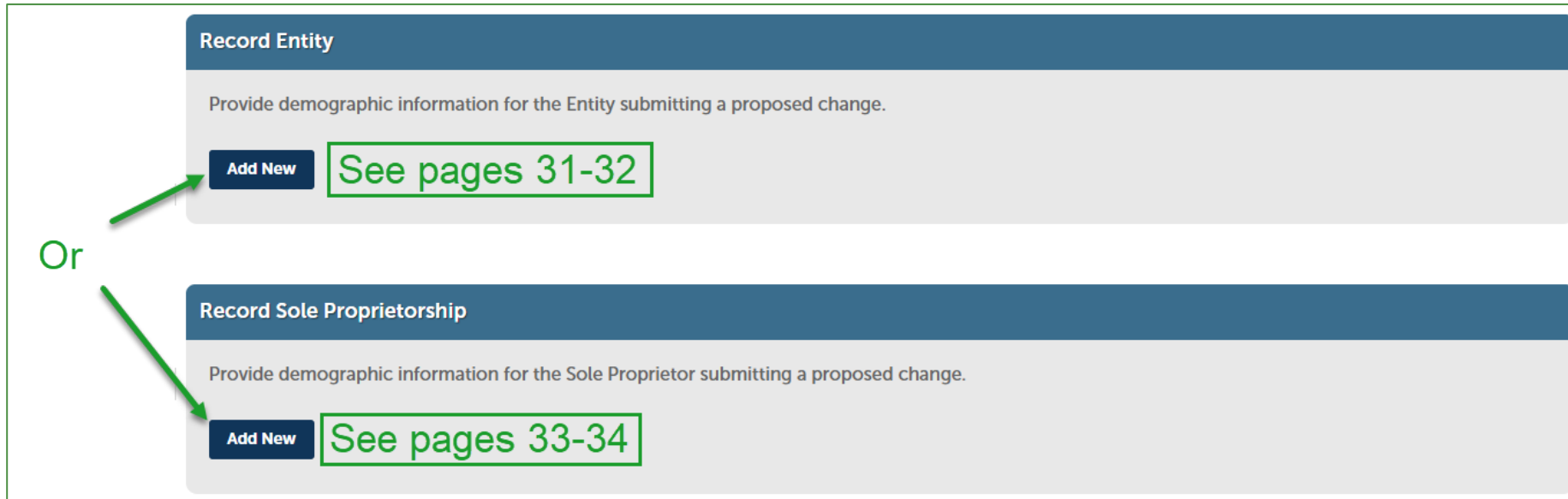
Continue Application »

Amendment Application Instructions

Amendment Submission - Select Amendment Applicant Contact Type

- For an amendment applicant entity submitting an amendment application, provide demographic information for the amendment applicant entity by selecting **Add New**.
 - See pages 31-32 for an amendment applicant entity.
- For an amendment applicant individual (sole proprietor) submitting an amendment application, provide demographic information for the amendment applicant individual (sole proprietor) by selecting **Add New**.
 - See pages 33-34 for an amendment applicant individual (sole proprietor).

Note: you must **Add New** for either Record Entity OR Record Sole Proprietorship.



Record Entity

Provide demographic information for the Entity submitting a proposed change.

Add New See pages 31-32

Or

Record Sole Proprietorship

Provide demographic information for the Sole Proprietor submitting a proposed change.

Add New See pages 33-34

Amendment Application Instructions

Amendment Submission - Add Contact Info: Entity

For an amendment applicant entity:

Amendment applicant individuals (sole proprietors) skip to page 33.

- Enter **Amendment Applicant Entity** name.
- Enter **Assumed Name** if operating publicly with a name other than the amendment applicant entity name. Separate multiple assumed names with commas.
- Enter **Federal Employer Identification Number (FEIN)**.
- Enter **Phone Number**.
- Enter **E-mail Address**.
- Select **Add Contact Address**. Another window will open. Please see next page to continue.

Contact Information

* Entity Name:

1

Assumed Name:

2

* FEIN:

3

* Phone:

4

* E-mail:

5

* Individual/Organization:

Organization

▼ Contact Addresses

6

Add Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 0-0 of 0

Address Type	Address
No records found.	

Continue

Clear

Discard Changes

Amendment Application Instructions

Amendment Submission - Add Contact Address: Entity

For an amendment applicant entity:

- ***Mailing Address** type is required.
- Enter **Street Address**.
- Enter **City**.
- Select to add **State**.
- Enter **ZIP Code**.
- Select **Save and Close**.

Contact Information

Contact Address Information

* Address Type:

Mailing

* Address Line 1:

8

* City:

9

* State:

10
--Select--

* ZIP Code:

11

12

Save and Close

Save and Add Another

Clear

Discard Changes

- **Contact Address Added Successfully** message will appear.
- Select **Continue**.

▼ Contact Addresses

Add Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

✓

Contact address added successfully.

Showing 1-1 of 1

Address Type	Address
Mailing	3142 Main St

13

Continue

Clear

Discard Changes

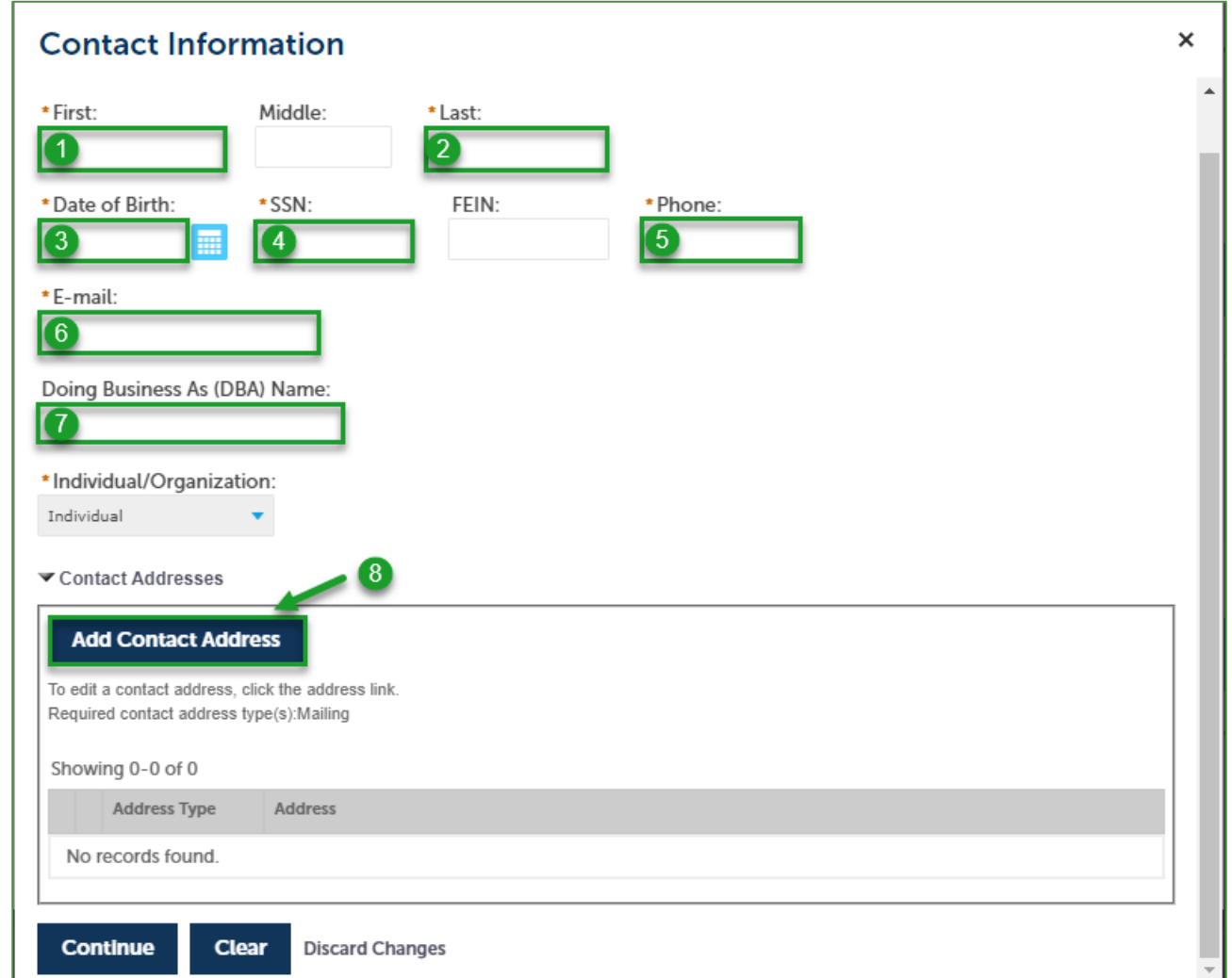
Amendment Application Instructions

Amendment Submission - Add Contact Info: Sole Proprietor

For an amendment applicant individual (sole proprietor):


Amendment applicant entities skip to page 35.

- Enter Sole Proprietor's **First Name**.
- Enter Sole Proprietor's **Last Name**.
- Enter Sole Proprietor's **Date of Birth (DOB)**.
- Enter Sole Proprietor's **Social Security Number (SSN)**.
- Enter Sole Proprietor's **Phone Number**.
- Enter Sole Proprietor's **E-mail Address**.
- Enter Sole Proprietor's **Doing Business As (DBA)**, if applicable.
- Select **Add Contact Address**. Another window will open. **Please see next page to continue.**




Contact Information

* First: 1 Middle: * Last: 2

* Date of Birth: 3  * SSN: 4 FEIN: * Phone: 5

* E-mail: 6

Doing Business As (DBA) Name: 7

* Individual/Organization:
Individual 

▼ Contact Addresses 8

Add Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 0-0 of 0

Address Type	Address
No records found.	

Continue **Clear** Discard Changes

Amendment Application Instructions

Amendment Submission - Add Contact Address: Sole Proprietor

For an amendment applicant individual (sole proprietor):

- ***Mailing Address** type is required.
- Enter **Street Address**.
- Enter **City**.
- Select to add **State**.
- Enter **ZIP Code**.
- Select **Save and Close**.

Contact Information

Contact Address Information

* Address Type: Mailing 9

* Address Line 1: 10

* City: 11

* State: --Select-- 12

* ZIP Code: 13

Save and Close Save and Add Another Clear Discard Changes

- **Contact Address Added Successfully** message will appear.
- Select **Continue**.

▼ Contact Addresses

Add Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

✓ Contact address added successfully.

Showing 1-1 of 1

	Address Type	Address
	Mailing	453 Main St

Continue Clear Discard Changes


Amendment Application Instructions

Amendment Submission - Select Person Completing Application Contact

- Choose **Select from Account**.

Person Completing Application

Provide demographic information for the person completing the online application by selecting "Select from Account" to use an existing contact.

Select from Account 

- Select the box for **Mailing Address**.
- Select **Continue**.

Select Contact from Account

Person Completing Application



Select contact addresses for this contact to attach to the record.

Showing 1-1 of 1

<input type="checkbox"/>	Address Type	Address
<input checked="" type="checkbox"/>	Mailing	

Continue

Discard Changes



- After entering the demographic information for the amendment applicant and the person completing the application, select **Continue Application**.

 **Continue Application**

Amendment Application Instructions

Amendment Submission - Upload Supporting Documents

- All applicable items on the checklist are required to be provided at the time of application submission.
- Failure to submit any of the applicable checklist items may result in the denial of your application.
- Each document in the checklist must be uploaded individually; documents cannot be combined and uploaded as a single PDF.
- To attach documents, Select **Add** on the attachments page.
- Select **Add** on the file upload pop out window. Please see next page to continue.

Attachments

Please attach the following documents based on the type of proposed amendment being submitted:

Documents Required: Change of Ownership - Adding

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure

*Please note new supplemental applicants who have not already submitted a supplemental application with the MRA will be required to do so.

Documents Required: Change of Ownership - Removing

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Authorizing Resolution or Withdrawal Letter

Documents Required: Changing of Ownership - Equity Only

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Authorizing Resolution

Documents Required: Conversion

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Documents Required: Change of Name

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Documents Required: Asset Purchase

- Amendment Application
- Governing Documents - purchaser proposed or current if no changes are being made
- Organizational structure - purchaser
- Purchase Agreement

*Please note a Step 2 license application will be required to be submitted by the purchaser.

*All applicable items on the checklist are required to be provided at the time of application submission.

*Failure to submit any of the items may affect eligibility for the proposed amendment.

The maximum file size allowed is 500 MB.
ade; adp; bat; chm; cmd; com; cpl; exe; hta; htm; html; ins; isp; jar; js; jse; lib; lnk; mde; mht; mhtml; msc; msp; mst; php; pif; scr; sct; shb; sys; vb; vbe; vbs; vxd; wsc; wsf; wsh are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

Add

File Upload

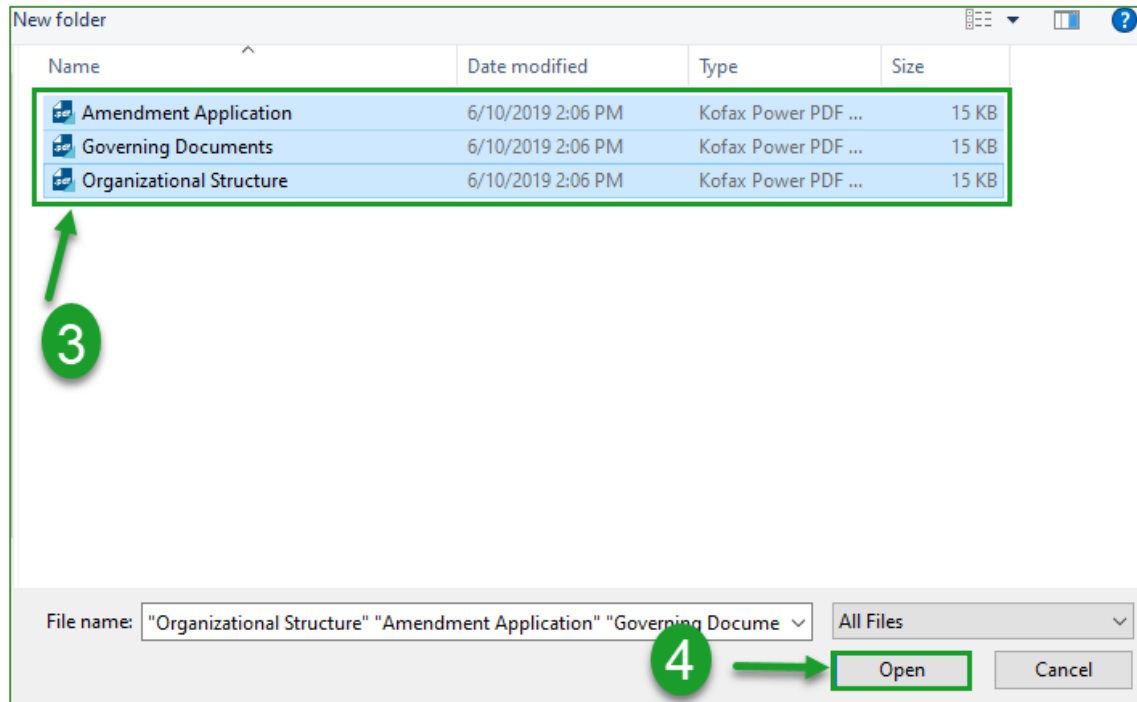
The maximum file size allowed is 500 MB.
ade; adp; bat; chm; cmd; com; cpl; exe; hta; htm; html; ins; isp; jar; js; jse; lib; lnk; mde; mht; mhtml; msc; msp; mst; php; pif; scr; sct; shb; sys; vb; vbe; vbs; vxd; wsc; wsf; wsh are disallowed file types to upload.

Continue
Add
Remove All
Cancel

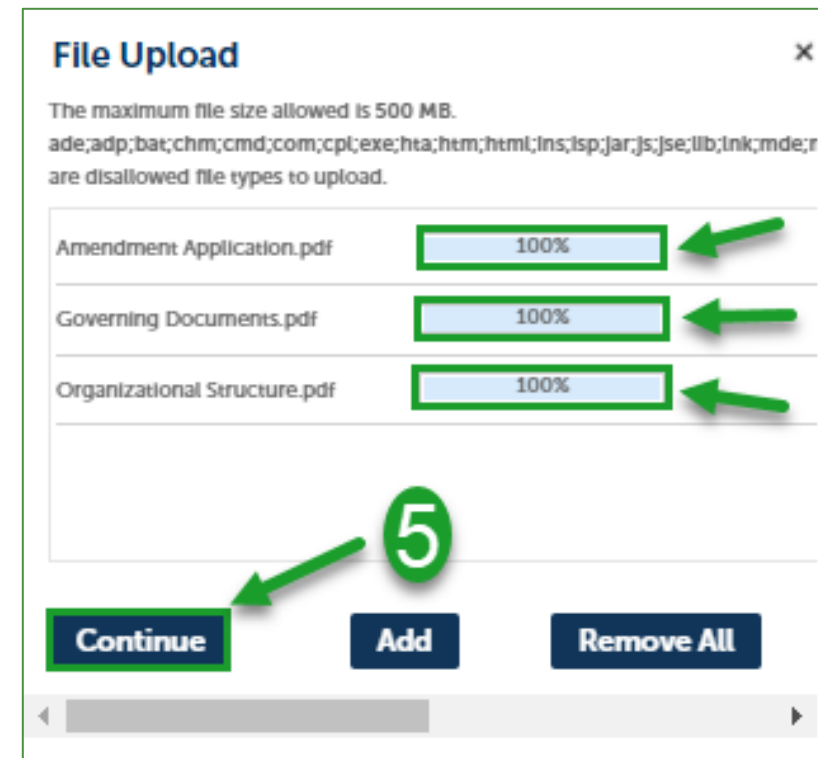
Amendment Application Instructions

Amendment Submission - Upload Supporting Documents, Continued

- **Select** and **Open** the file(s) you wish to upload.
 - Attachments should be uploaded in PDF format.
 - Files should be named according to their document type. For example, the Amendment Application PDF should be named "Amendment Application".



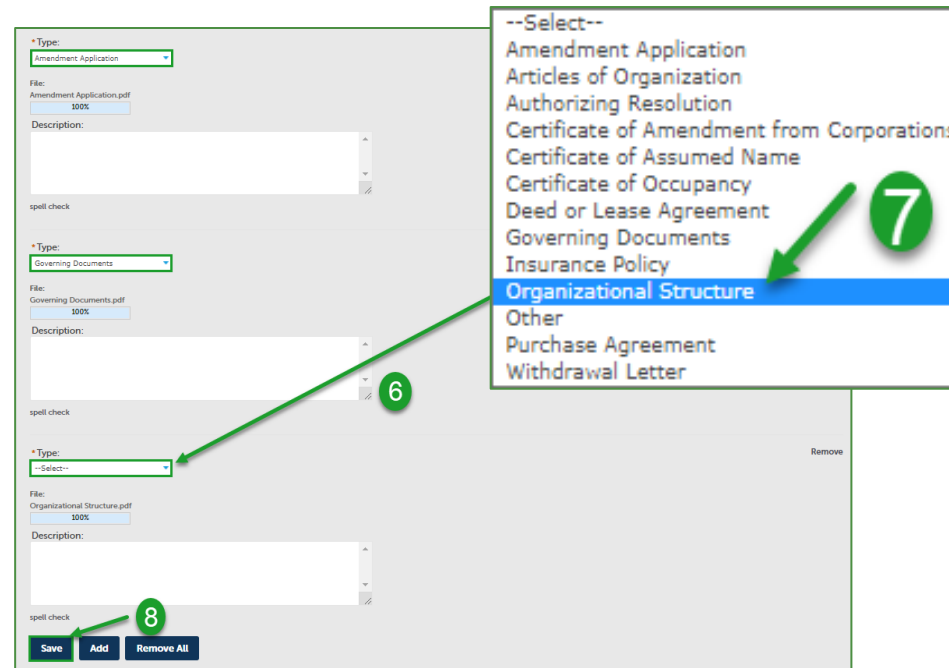
- Confirm the file(s) are 100% uploaded and select **Continue**.



Amendment Application Instructions

Amendment Submission - Upload Supporting Documents, Continued

- Select document **Type**.
 - All documents on the checklist have a corresponding type. You must choose the corresponding document type for each document that is uploaded. For example, when uploading the Organizational Structure, you must select the “Organizational Structure” type.
- Select **Save**.
- ***You must repeat the process depicted for the Amendment Application, Governing Documents, and Organizational Structure for all applicable documents on the checklist.***



The screenshot shows a web interface for uploading supporting documents. It features three rows of input fields, each with a 'Type' dropdown, a 'File' upload area, and a 'Description' text area. A 'spell check' link is visible below each description field. A 'Remove' button is located on the right side of the interface. At the bottom, there are 'Save', 'Add', and 'Remove All' buttons. Three green callouts with numbers 6, 7, and 8 are overlaid on the image:

- Callout 6 points to the 'Type' dropdown menu of the first row.
- Callout 7 points to the 'Organizational Structure' option in the dropdown menu.
- Callout 8 points to the 'Save' button at the bottom.

The dropdown menu shown in callout 7 contains the following options: --Select--, Amendment Application, Articles of Organization, Authorizing Resolution, Certificate of Amendment from Corporations, Certificate of Assumed Name, Certificate of Occupancy, Deed or Lease Agreement, Governing Documents, Insurance Policy, **Organizational Structure**, Other, Purchase Agreement, and Withdrawal Letter.

Amendment Application Instructions

Amendment Submission - Upload Supporting Documents, Continued

- After all applicable documents have been uploaded and **their corresponding document types have been selected and saved**, select ***Continue Application***.

Attachments

Please attach the following documents based on the type of proposed amendment being submitted:

Documents Required: Change of Ownership - Adding

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure

*Please note new supplemental applicants who have not already submitted a supplemental application with the MRA will be required to do so.

Documents Required: Change of Ownership - Removing

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Authorizing Resolution or Withdrawal Letter

Documents Required: Changing of Ownership - Equity Only

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Authorizing Resolution

Documents Required: Conversion

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Documents Required: Change of Name

- Amendment Application
- Governing Documents - proposed or current if no changes are being made
- Organizational structure
- Certificate of Amendment from Corporations
- Articles of Organization
- Authorizing Resolution
- Certificate of Occupancy
- Insurance Policy
- Deed or Lease Agreement

Documents Required: Asset Purchase

- Amendment Application
- Governing Documents - purchaser proposed or current if no changes are being made
- Organizational structure - purchaser
- Purchase Agreement

*Please note a Step 2 license application will be required to be submitted by the purchaser.

*All applicable items on the checklist are required to be provided at the time of application submission.
 *Failure to submit any of the items may affect eligibility for the proposed amendment.

The maximum file size allowed is 500 MB.
www.sdp.lmi.cann.com/cpl/attachments.html
 This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.
 Amendment Application, Governing Documents, Organizational Structure

Name	Type	Size	Last Updated	Action
Amendment Application.pdf	Amendment Application	14.64 KB	06/17/2021	Actions ▾
Governing Documents.pdf	Governing Documents	14.64 KB	06/17/2021	Actions ▾
Organizational Structure.pdf	Organizational Structure	14.64 KB	06/17/2021	Actions ▾

Add

Save and resume later

Continue Application

Amendment Application Instructions

Amendment Submission - Application Certification

- After reviewing the amendment application, **Check** the box to electronically sign and file the application thus certifying that the application is true, complete, correct, and that no material information has been omitted.
- Select **Continue Application** to submit the application.

I certify that I have read and understand the instructions that accompany this application and that the statements made as part of this application are true, complete, and correct and that no material information has been omitted. By checking the box below, I understand and agree that I am electronically signing and filing this application.

☒ By checking this box, I agree to the above certification.

Date: 09/18/2019

Save and resume later

Continue Application

Amendment Application Instructions

Amendment Submission - Record Issuance

- The amendment application has now been submitted. Retain a copy of the record number.

[Home](#) [Medical Facility Licensing](#) **[Adult-Use Establishment Licensing](#)** [Facility & Establishment Complaints](#) [Registry Cards](#)

[Create an Application](#) [Search Applications](#)

Complex Amendment


1 Demographics

2 Attachments


3 Review

4 Record Issuance

Step 4: Record Issuance

 Your application has been successfully submitted.
Please print your record and retain a copy for your records.

Thank you for using our online services.
Your Record Number is CA-000040.



Amendment Application Instructions

Amendment Submission - Submission Email

- The person completing the application and the amendment applicant will receive the below email containing:
 - The amendment application number.
 - The amendment application name.

Dear Entity 1, LLC,

You have successfully submitted an amendment application for a proposed change. The application information is below. Make sure to retain this number for your records.

Application Name: Entity 1, LLC
Application Number: CA-000045

An amendment analyst will contact you if further information is required or when a determination has been made.

If there are any questions regarding this amendment application, please contact the Cannabis Regulatory Agency via telephone at (517) 284-8599 or via email at CRA-Amendments@michigan.gov.

Thank you,

Cannabis Regulatory Agency
Licensing Division
(517) 284-8599
CRA-Amendments@michigan.gov
www.michigan.gov/cra



517-284-8599

CRA-Amendments@michigan.gov
mi.gov/cra