

**STATE OF NEW JERSEY  
CANNABIS REGULATORY COMMISSION**

**OFFICE OF LICENSING**

**FINAL RECOMMENDATION FOR:**

**ANNUAL**

**MEDICAL CULTIVATOR**

LEGISLATION STATEMENT AS IT PERTAINS TO EACH TYPE OF LICENSING

UNDER THE AUTHORITY OF THE JAKE HONIG COMPASSIONATE USE MEDICAL CANNABIS ACT, P.L. 2019, C. 153 (N.J.S.A. 24:6I-1 ET SEQ), THE CANNABIS REGULATORY COMMISSION HEREBY ISSUES THIS PERMIT TO OPERATE AN ALTERNATIVE TREATMENT CENTER FOR THE PURPOSE OF MEDICAL CULTIVATOR TO:

**FACILITY NAME: BREAKWATER TREATMENT & WELLNESS**

**PERMIT FACILITY ADDRESS: 2 CORPORATE DR STE E, , CRANBURY, MIDDLESEX NJ - 08512**

**PERMIT NUMBER: MC000019**

**EXPIRATION DATE: 12/31/2025**



**DIANNA HOUENOU**  
COMMISSION CHAIR



**CHRISTOPHER RIGGS**  
ACTING EXECUTIVE DIRECTOR



**STATE OF NEW JERSEY  
CANNABIS REGULATORY COMMISSION**

**OFFICE OF LICENSING**

**FINAL RECOMMENDATION FOR:  
ANNUAL**

**MEDICAL MANUFACTURER**

LEGISLATION STATEMENT AS IT PERTAINS TO EACH TYPE OF LICENSING

UNDER THE AUTHORITY OF THE JAKE HONIG COMPASSIONATE USE MEDICAL CANNABIS ACT, P.L. 2019, C. 153 (N.J.S.A. 24:6I-1 ET SEQ), THE CANNABIS REGULATORY COMMISSION HEREBY ISSUES THIS PERMIT TO OPERATE AN ALTERNATIVE TREATMENT CENTER FOR THE PURPOSE OF MEDICAL MANUFACTURER TO:

**FACILITY NAME: BREAKWATER TREATMENT & WELLNESS**

**PERMIT FACILITY ADDRESS: 2 CORPORATE DR STE E, , CRANBURY, MIDDLESEX NJ - 08512**

**PERMIT NUMBER: MM000012**

**EXPIRATION DATE: 12/31/2025**



**DIANNA HOUENOU**  
COMMISSION CHAIR



**CHRISTOPHER RIGGS**  
ACTING EXECUTIVE DIRECTOR



**STATE OF NEW JERSEY  
CANNABIS REGULATORY COMMISSION**

**OFFICE OF LICENSING**

**FINAL RECOMMENDATION FOR:**

**ANNUAL**

**MEDICAL RETAILER**

LEGISLATION STATEMENT AS IT PERTAINS TO EACH TYPE OF LICENSING

UNDER THE AUTHORITY OF THE JAKE HONIG COMPASSIONATE USE MEDICAL CANNABIS ACT, P.L. 2019, C. 153 (N.J.S.A. 24:6I-1 ET SEQ), THE CANNABIS REGULATORY COMMISSION HEREBY ISSUES THIS PERMIT TO OPERATE AN ALTERNATIVE TREATMENT CENTER FOR THE PURPOSE OF MEDICAL RETAILER TO:

**FACILITY NAME: BREAKWATER TREATMENT & WELLNESS**

**PERMIT FACILITY ADDRESS: 2 CORPORATE DR STE E, , CRANBURY, MIDDLESEX NJ - 08512**

**PERMIT NUMBER: MRE000049**

**EXPIRATION DATE: 12/31/2025**



**DIANNA HOUENOU**  
COMMISSION CHAIR



**CHRISTOPHER RIGGS**  
ACTING EXECUTIVE DIRECTOR



**STATE OF NEW JERSEY  
CANNABIS REGULATORY COMMISSION**

**OFFICE OF LICENSING**

**FINAL RECOMMENDATION FOR:**

**ANNUAL**

**MEDICAL RETAILER**

LEGISLATION STATEMENT AS IT PERTAINS TO EACH TYPE OF LICENSING

UNDER THE AUTHORITY OF THE JAKE HONIG COMPASSIONATE USE MEDICAL CANNABIS ACT, P.L. 2019, C. 153 (N.J.S.A. 24:6I-1 ET SEQ), THE CANNABIS REGULATORY COMMISSION HEREBY ISSUES THIS PERMIT TO OPERATE AN ALTERNATIVE TREATMENT CENTER FOR THE PURPOSE OF MEDICAL RETAILER TO:

**FACILITY NAME: BREAKWATER TREATMENT & WELLNESS**

**PERMIT FACILITY ADDRESS: 154 W WESTFIELD AVE, , ROSELLE PARK, UNION NJ - 07204**

**PERMIT NUMBER: MRE000050**

**EXPIRATION DATE: 12/31/2025**



**DIANNA HOUENOU**  
COMMISSION CHAIR



**CHRISTOPHER RIGGS**  
ACTING EXECUTIVE DIRECTOR

