

DEPARTMENT OF HEALTH
OFFICE OF MEDICAL MARIJUANA USE

CERTIFIED COPY

RULE WORKSHOP

DATE TAKEN: June 24, 2026
TIME: 1:04 PM - 1:31 PM
LOCATION: Betty Easley Conference Center
4075 Esplanade Way #182
Tallahassee, Florida 32399

1 APPEARANCES:

2 DEVON BAXTER, ESQUIRE BAXTER LAW

3 JESS ENGLE, GOLD FLOWER

4 CHRISTINE SENNE, ESQUIRE

5 HOLLY COATS

6 RON WATSON

7 CHRIS FINKBEINER, RUBIN TURNBULL AND ASSOCIATES

8 DARA KAM, STATE AFFAIRS

9 DEREK BOWEN INTEM NINE ENTERPRISES, LLC

10 SAVANNAH BAILEY TRULIEVE

11 ROBBIE HOLROYD TSE CONSULTING

12 JOHN LOCKWOOD, ESQUIRE LOCKWOOD LAW

13 CHRISTIAN BACKS, EQUIRE LOCKWOOD LAW

14 DOUG BELL CURALEAF

15 CHRIS HOWARD PURELEAF

16 JONATHAN MITCHELL EDEN

17 KAY MITCHELL EDEN

18

19 OFFICE OF MEDICAL MARIJUANA:

20 MERIDITH HAYES, CHAIRWOMAN

21 DOUGLAS DOLAN, CHIEF LEGAL COUNSEL

22 BOBBY SMITH, PANELIST

23 AMBER PETERS

24 TAMARA GARLAND

25 MICHAELA TUCKER

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APPEARANCES:
MEGAN WILLIAMS
JOHN KABBA
ADAM WEBSTER
JAMES LOVE
MELISSA BASSETT
LEVI GALLION
LINDSAY SUCHOCKI

P R O C E E D I N G S

(The Workshop was called to Order at 1:04 PM.)

MS. HAYES: Good afternoon. This is a hearing on Rule 64-4.227, MMTC Advertising and Marketing.

This workshop is being conducted on June 24th, 2026, at Betty Easley Conference Center, 4075 Esplanade Way, Room 182, Tallahassee, Florida, 32399.

I'm conducting the hearing for the Department. My name is Meredith Hayes, and I am the Policy Manager for the Office of Medical Marijuana Use. Our address is Florida Department of Health, 4052 Bald Cypress Way, Bin M-01, Tallahassee, Florida 32399.

I am joined by Bobby Smith, Director of the Office of Medical Marijuana and Douglas Dolan, Chief Legal Counsel.

This workshop is being conducted in accordance with Section 120.54, Florida Statutes. The notice for this workshop was published in Volume 52, Number 111 of the Florida Administrative Register on June 9th, 2026.

The purpose of this hearing is to allow the public an opportunity to participate in the Rulemaking process.

1 Before we begin, we ask that all comments that
2 include suggested rule language be submitted in
3 writing to the OMMU Rules Inbox at
4 OMMURules@FLHealth.gov before the end of the
5 comment period, which will be announced at the end
6 of this workshop.

7 Please be advised that this workshop is being
8 transcribed by a court reporter.

9 This Rulemaking implements standards for
10 advertising and marketing by medical marijuana
11 treatment centers.

12 If you've indicated on the sign-in sheet that
13 you wish to comment on a rule, you will be called
14 in the order in which you signed in to speak on the
15 subject rule indicated. When your name or
16 affiliation is called, please approach the podium
17 at the front of the room. We ask that you state
18 your name and the organization that you represent.

19 In the interest of time, we ask that you do
20 not repeat the position of a previous speaker. You
21 may, however, for the record, state that you agree
22 with one or more of the previous speakers. We ask
23 that you limit your comments to no more than about
24 three minutes.

25 At this time, we would like to open the floor

1 for comment on Rule 64-4.227, MMTC Advertising and
2 Marketing, and we will only be accepting comments
3 on this Rule at this time.

4 Devon Baxter.

5 MS. BAXTER: Devon Baxter from Baxter Law on
6 behalf of several MMTC clients.

7 My clients really want to collaborate with the
8 Department on this Rule. And so, an overarching
9 comment I have is that there was a bit of confusion
10 when this Rule was released, and in the rollout,
11 particularly with how information was disseminated
12 about how the Rule may be applied or interpreted.
13 And there was a lot of panic.

14 So, I think one thing that would be helpful
15 both to the Department and to the MMTCs is if we
16 could work together on the rollout of this
17 permanent version of the Rule. Maybe consider a
18 longer implementation timeline.

19 And maybe a way -- I know Ed's here.
20 Hopefully, he's not shaking his head.

21 I understand there's litigation risk, but a
22 little bit more dialogue between the Department and
23 the MMTCs because what we saw was there was
24 chitchat between the MMTCs, some things coming from
25 inspectors. It became like a game of telephone.

1 And to the extent that we could cut down on that, I
2 think we could narrow some areas of agreement or
3 disagreement on the Rule as it's rolled out.

4 Some high-priority items for my clients in the
5 new version, the biggest one is just how this Rule
6 is potentially going to impact their ability to
7 educate patients and participate in community
8 events.

9 I don't think it was clear under the Emergency
10 Rule, and we heard some different feedback about
11 how it would impact events at all, if that matters,
12 whether the event is ticketed, indoors or outdoors.

13 So some more clarity on that would be
14 important.

15 As the Department knows, a big part of
16 healthcare is public outreach and education of
17 patients and bridging those gaps in access. And my
18 clients want to be sure that they're still able to
19 do that and also to combat misinformation around
20 medical marijuana.

21 Also, we'd like to see the restriction on the
22 depiction of "whole flower" in advertising removed.
23 I think the Rule, the Emergency Rule, only allows
24 it on the website. But today's patients, they're
25 very concerned about the quality of flower, about

1 how it appears, about the processes that are used
2 to grow their flower. So, it's an important tool
3 to be able to show images of flowers to the
4 patients in areas outside of just on our websites.

5 The limitation on directional signs in the
6 Emergency Rule was pretty confusing.

7 One, our clients, a lot of them, already have
8 these signs up, so it's expensive to change. And
9 not every patient knows what an MMTC or cannabis
10 dispensary is. They just know they're looking for
11 the name of the store that they put in their GPS.

12 So that would be helpful if we can modify
13 that.

14 And then finally, the definition of celebrity
15 and influencers were pretty tricky. I don't think
16 there's an objective way to measure some of these
17 things like a following. How many people do you
18 have to have to have a following or if someone is
19 famous or not? I think there could be a difference
20 of opinion on that.

21 So, clarification on that, I think, would
22 really help our clients to guide the decisions that
23 they're making.

24 Thanks.

25 MS. HAYES: Thank you.

1 Christine Senne.

2 MS. SENNE: Hello. Christine Senne on behalf
3 of the Florida Medical Marijuana Trade Association,
4 which has several members who are MMTCs.

5 First, we'd like to echo Ms. Baxter's
6 comments. I think they were very constructive, and
7 our members would like a more constructive dialogue
8 and collaborative dialogue with the Department on
9 the new set of rules.

10 We agree about patient education not being
11 considered advertising and really want to reiterate
12 what's in the Statute, which in 381.9868 (h) refers
13 to advertising and marketing as distinct concepts.

14 The Emergency Rule had definitions that if you
15 had a Venn diagram, the overlap was almost 100
16 percent between those two concepts.

17 I think there's a general idea of marketing
18 being more something you've paid for yourself for
19 outreach or education purposes versus advertising
20 being you've paid a third party to help get your
21 name or brand out there.

22 So, we'd like to see more of a distinction
23 between those two terms.

24 In addition, the Statute makes clear that
25 MMTCs may not engage in advertising that is visible

1 to members of the public from any street, sidewalk,
2 park or other public place.

3 So, the restrictions inside a dispensary,
4 which largely have frosted windows so that you
5 cannot see inside from a public place, seemed
6 excessive, and we would like more flexibility to be
7 able to have displays inside the dispensary.

8 I'd almost argue that's not advertising in
9 many people's minds. It's simply being able to set
10 up something more than a white box, which is what a
11 lot of people were left with under the Emergency
12 Rule.

13 And as far as the informational and
14 directional signage, several, you know, MMTCs have
15 certain colors associated with their logo and their
16 trade name. Even just being allowed to have
17 something match their logo color would be better
18 than a black and white sign that says, MMTC parking
19 only. Because, as Ms. Baxter said earlier, there
20 is a lot of confusion as far as what that means
21 among several patients.

22 And also, I know this is a strange thing to
23 bring up, but it is starting to happen more and
24 more as Florida grows. You're seeing street
25 widening; you're seeing construction happening;

1 you're seeing eminent domain activities.

2 And while that construction is happening,
3 sometimes governments and third parties want to put
4 up a sign saying, you know, this company name is
5 here.

6 Under this existing rule, it appeared that
7 would not be permitted. So, some sort of exception
8 for those sorts of circumstances. We had multiple
9 members actually bring that up.

10 And then finally, on the internet advertising
11 with the warnings that needed to be in 12-point
12 font. The Statute already says in 381.986 sub
13 (8)(e)(11) through (13) where warnings go.
14 Warnings go on the packaging and labeling and on
15 the patient package insert. The legislature has
16 already said that's where the MMTCs need to put
17 them.

18 So, going beyond what's already been
19 prescribed in Statute and requiring additional
20 warnings was something that they were concerned
21 about as well.

22 Thank you.

23 MS. HAYES: Thank you, Chris from Turnbull.

24 MR. FINKBEINER: I'm sorry. We'll just submit
25 comments in writing.

1 MS. HAYES: Okay. Thank you.

2 We had no one else signed up. Did anyone want
3 to offer a comment?

4 Sure.

5 MR. BAX: Hello. My name is Christian Bax.
6 I'm with the Lockwood Law Firm. We represent
7 several Florida MMTCs.

8 I'm not sure if it's the identical point, but
9 it is mirrored a few previous speakers. Kind of
10 two overarching comments to the structure of the
11 Rule, which is very similar, well, it's exactly the
12 same as the Emergency Rule.

13 So, the Implementing Statute lays out a
14 structure for regulating advertising and marketing.
15 And that Statute lays out specific things that the
16 Department of Health has the authority to regulate.
17 It is by its nature an open-ended provision in the
18 sense that there are things that they cannot do or
19 that the Department of Health has authority to hem
20 in or to regulate.

21 However, the Department does not have complete
22 and total authority over all things advertising and
23 marketing, which is made clear by the fact that the
24 legislature deemed it appropriate to specify where
25 the Department does have authority.

1 The Rule, however, very broadly defines both
2 advertising and marketing and then within the
3 structure of the Rule itself says that MMTCs may
4 only advertise and/or market in these specific
5 ways, which I think there's a strong argument, it's
6 not how the Statute is structured or how it grants
7 the Department authority on advertising and
8 marketing.

9 A second very important overarching theme is
10 that a previous speaker mentioned that there was
11 kind of a combining of advertising and marketing.

12 Advertising is a smaller subset of marketing.

13 Marketing is the overall encompassing subject
14 matter.

15 Advertising is a specific subset of marketing.

16 Marketing is very, very broad as to what it
17 covers.

18 Now, conversely, in the Statute, the
19 Implementing Statute, you have the legislature,
20 which didn't provide a lot of authority on
21 advertising, but was very specific on several
22 grounds in advertising. I believe it uses the word
23 marketing once or twice in the whole Statute.

24 So, legislature has demonstrated and
25 understands there's a difference between

1 advertising and marketing, and it has chosen to
2 give the Department specific authority over the
3 smaller subset of advertising.

4 Now, conversely, again, what the Rule does is
5 it essentially treats the two words as synonyms or
6 as like parallel or sister terms where these are
7 two things that are either the same or extremely
8 closely tied.

9 And so, what we see throughout the Rule is
10 that it takes, you know, sometimes I may be
11 stretching a little bit, it takes delegated
12 authority over advertising. It pulls that
13 delegated authority back, broadens it, and then
14 also applies it to marketing, which we believe is
15 beyond the scope of what the Statute allows the
16 Department to do.

17 So, what we would, of course, like to see, and
18 we're open to collaboration as well as to kind of
19 what we think. What our clients think moving
20 forward, is that the Department regulates
21 specifically marketing.

22 How the Statute intends to regulate marketing.
23 Regulate advertising how it intends to
24 regulate advertising.

25 But is cautious in applying restrictions that

1 the Statute gives it authority over one of these
2 terms to both terms or to the other term.

3 So just kind of moving sequentially through
4 the Rule. You know, a very important thing that I
5 think that we're all going to deal with and that
6 you all are obviously extremely aware of is how the
7 State is going to choose to define "recreational."

8 We understand this is, you know, this is a
9 challenge. In a matter of sentences, you guys are
10 seeking to define something that, you know, the US
11 hasn't really successfully done in 26 years.

12 The one comment we have on the definition of
13 "recreational" though is that it's a bit circular
14 in the sense that recreation is split down into two
15 things that can make something recreational. And
16 one of those is recreational use, means use by
17 recreation, which you know, it's circular, which
18 means it basically is meaningless.

19 The second part of that definition then moves
20 into the "enjoyment" provision, which I'm sure you
21 all have heard about. And the tension that we see
22 there is, so the MMTCs are seeking to communicate
23 to clients -- I'm sorry, to patients, kind of the
24 value proposition of what the Florida Constitution
25 has allowed them to consume.

1 And as you can see from pretty much every
2 pharmaceutical ad that we see on television, you
3 know, it's very common by, you know, heavily
4 regulated drugs from the FDA to communicate that
5 this is something that if you are sick and you
6 consume it, it will make your life better because
7 you feel happier. You feel better.

8 And so, threading that needle of communicating
9 that value proposition, like, visually. And it's
10 very difficult to kind of imagine a scenario where
11 an MMTC can visually communicate that a patient's
12 life has improved because they have consumed this
13 product, without making any substantive medical
14 claims, and not have them looking over the shoulder
15 and be concerned that the Office is going to say,
16 you are depicting enjoyment, therefore you are
17 communicating recreational use.

18 Again, we understand the challenge. This is
19 something that pretty much universally all of our
20 clients have communicated to us is that they
21 understand the intent of the OMMU. They're just
22 really not sure substantively how they're going to,
23 like, actually in practice, in the real world, make
24 advertising and marketing that doesn't communicate
25 and step on one of those two toes.

1 I think also, similarly, that the word social
2 is a bit vague in that it's not defined and, you
3 know, that could be more than one person.

4 So again, in a visual depiction of, you know,
5 of a patient, of a human being, you know, it's
6 hard. Basically, the way that this Rule works out,
7 if it's neither social nor enjoyable, then it's
8 like a person sitting looking at the camera in a
9 sterile room, right.

10 So, we would like some kind, without being
11 inappropriate or obviously appealing to children or
12 appealing to recreational use, some outlet for
13 MMTCs to be able to express that patients can
14 actually, like, enjoy their lives again once they,
15 you know, get their card and begin consuming the
16 product.

17 A few more technical things. I think we have
18 a little concern that whether or not an
19 informational sign posted at a physical dispensary
20 is either advertising or marketing and that it
21 might not even promote the business. And the
22 Implementing Statute reaches advertising and
23 marketing. It doesn't touch on communication of --
24 information that's neither advertising nor
25 marketing. So, we are not sure that falls under

1 that basket of authority granted to the Department
2 by the legislature.

3 The Implementing Statute also touching on
4 section 5. So, Stat 381.986 regulates where an
5 advertisement may be visible. It does not regulate
6 where the advertising activity occurs.

7 So, advertising and marketing inside of a
8 dispensing facility, it falls outside of that
9 framework.

10 The Statute also does not address brochures,
11 and, you know, we question whether the Office has
12 authority over non-internet marketing of this kind
13 that's not inherently visible to the public from
14 any of the areas that are outlined by the
15 legislature.

16 On social media, this is also a tricky one.
17 We understand the intent. However, there is
18 intention in the Statute in that, and I think the
19 Department acknowledges this in its own Rule, that
20 social media is not advertising. Or is not online
21 advertising in the sense that online advertising by
22 the statutory requirement has to be pre-approved by
23 the Department. And the fact that while there is a
24 registration, individual social media posts are not
25 pre-approved, therefore they cannot be internet

1 advertising, otherwise they would fall under that
2 umbrella.

3 So, we think that, you know, there is going to
4 be some tension there about like exactly how much,
5 or whether OMMU currently under the statutory
6 structure has authority over social media. Or how,
7 if it doesn't account for internet advertising,
8 exactly what that is. Or, you know, how you all
9 are going to choose to regulate that.

10 So, obviously, this is a, you know, it's a
11 workshop. The Rule itself has a draft. We'd be
12 very interested to see, kind of, how you guys
13 continue to structure that, and how exactly the
14 OMMU sees that. Hopefully, we can get some more
15 clarity if you actually do view that as internet
16 advertising, if you view that as a form of
17 marketing. And if you do view that as a form of
18 marketing, like where in the Statute that the
19 legislature's given the OMMU the opportunity to
20 restrict it, in what ways you guys have the
21 authority to restrict it.

22 Before I forget, you know, Ms. Baxter
23 mentioned the one of the prohibitions is raw
24 flower.

25 Some of our clients raised attention that, you

1 know, the Constitution grants these patients the
2 right to consume this product, specifically raw
3 flower. And the fact that that can't be depicted
4 in a physical dispensary in a relatively sterile
5 manner, especially kind of communicating, you know,
6 visually, which is how a lot of patients consider
7 the quality of flower, it seems overly restrictive.

8 Another prohibition, you know, obviously is
9 the celebrity and influencer prohibition. You
10 know, we have a client who is a celebrity who is --
11 whose name is very closely tied to the name of the
12 company itself. And this is quite problematic in
13 the sense that, like, this is probably the most
14 specific and, I think, detrimental impact of that,
15 which is, like, that you have people who may have
16 had success in their life to their name as part of
17 the company. This would prohibit that.

18 And we don't believe there's anything
19 inherently recreational or appealing to children
20 about using the name of a founder or, you know, the
21 head of the mast head of a company.

22 We also think that influencer, the way the
23 Department has chosen to both define celebrity and
24 influencer is also kind of vague in the sense that
25 it's difficult to tell at exactly what stage in

1 one's life one leaves being kind of a private
2 citizen and becomes some type of celebrity
3 influencer, where now they're no longer able to,
4 kind of, collaborate with an MMTC to discuss that.
5 MMTC's offerings are a value proposition.

6 It also kind of sucks in, I think there's some
7 unintended consequences, which is like, you know,
8 some of the best advocates in the state for this
9 program are physicians. And some of these
10 physicians have strong followings.

11 So, like for example, you know, Dr. Oz would
12 be a celebrity. So, Dr. Oz is also one of the most
13 widely known physicians in the country. And he
14 would be both a celebrity and an influencer. So,
15 you would basically be prohibiting any MMTC from
16 collaborating with Dr. Oz and communicating about
17 that company.

18 So, for (6)(d), I'm sorry, we're going to skip
19 over that.

20 So, (6)(e), the provision imports the brochure
21 notices required by (5)(c) into the email contacts.
22 And because we think that the Office lacks
23 authority to impose the original brochure
24 restrictions in the first instance, likewise,
25 doesn't have the authority in the second instance.

1 For mobile application functionality for
2 (6)(f), the Implementing Statute does not address
3 mobile applications.

4 If a mobile application is a website or an
5 extension of a website, then reservation and
6 purchases are already permitted under rule 64ER-
7 227. The additional restriction is both
8 unnecessary and exceeds the authority granted by
9 the Statute.

10 If a mobile application is not a website, then
11 it is neither a website nor an advertisement and
12 therefore the Office does not have authority to
13 regulate it.

14 So, we are curious how the Department is going
15 to move forward in a way where that is, you know,
16 substantively following the Statute and is also not
17 vague.

18 Finally, for Rule -- I mean for section 7.
19 The Implementing Statute also does not address
20 third-party advertising. Nothing in the Statute
21 bars the medical marijuana treatment center from
22 using third-party advertisements, provided those
23 advertisements satisfy the Statute's form and
24 content restrictions.

25 By regulating third-party agreements, the Rule

1 likely reaches beyond what the authority granted by
2 the legislature is for this particular Rule.

3 We are very eager to see what you all continue
4 to come up with and move forward following this
5 workshop, and we understand that you guys are under
6 the gun. This is a very challenging subject matter
7 and wish you the best of luck.

8 MS. HAYES: Thank you.

9 Were there any further comments?

10 (No Response.)

11 If there are no further comments, I would like
12 to thank you all for your participation in this
13 workshop. We will accept written comments and
14 material until 5:00 p.m., June 29th, 2026. Please
15 submit your written comments that include any
16 suggested rule language to OMMURULES@FLhealth.gov.

17 There being no further comments, I would like
18 to inform you that this workshop is closed.

19 Thank you.

20 (Workshop concluded at 1:31 PM.)

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CERTIFICATE OF COURT REPORTER

THE STATE OF FLORIDA
COUNTY OF MIAMI-DADE:

I, MARTHA SUTHERLAND-VIDAL, a Court Reporter
in and for the State of Florida at Large, do hereby
certify that I was authorized to and did report the
proceedings in the above-styled cause before the
Rule Workshop, at the time and place set forth; that the
foregoing pages, numbered from 1 through 24, inclusive,
constitute a true and complete record of my notes.

I further certify that I am not a relative,
employee, attorney, or counsel of any of the parties,
nor am I a relative or employee of any of the parties'
attorney or counsel with the action, nor am I
financially interested in the action.

DATED on this 26th day of June 2026.



MARTHA SUTHERLAND-VIDAL,
Notary Public-State of Florida