

FORM 2

Disclosure of Owners and Other Interest Holders

Name of Applicant/Licensee: WTF Canna LLC

Part I: Owners and Other Interest Holders		
A. LIST ALL PERSONS AND/OR ENTITIES WITH ANY OWNERSHIP INTEREST IN THE APPLICANT/LICENSEE (including corporation stockholders; LLC members; and partners if a partnership; this includes parent companies if the applicant/licensee is a subsidiary of another entity).		
To the extent that any Interest Holder is an entity (corporation, partnership, LLC, etc.), list all Interest Holders in that entity until all such Interest Holders are identified and disclosed down to the individual person level.		
First Name Stephen	Last Name Mega	Title Owner/Member
City Seekonk	State Massachusetts	Zip 02771
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Michael	Last Name Mega	Title Owner/Member
City Rehoboth	State Massachusetts	Zip 02769
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Steven	Last Name Strattman	Title Owner/Member
City East Greenwich	State Rhode Island	Zip 02818
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Benjamin	Last Name Strattman	Title Owner/Member
City Newton	State Massachusetts	Zip 02459
Business Associated with (Applicant, parent business or sub-entity) WTF CANNA LLC		
First Name Michael	Last Name Rahme	Title Owner/Member
City Seekonk	State Massachusetts	Zip 02771

Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Michelle	Last Name Rahme	Title Owner/Member
City Seekonk	State Massachusetts	Zip 02771
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Brian	Last Name Cipolla	Title Owner/Member
City Cranston	State Rhode Island	Zip 02921
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Fritz	Last Name Knipschildt	Title Owner/Member
City Norwalk	State Connecticut	Zip 06854
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name John	Last Name McCaughey	Title Owner/Member
City Narragansett	State Rhode Island	Zip 02882
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Michael	Last Name Klein	Title Owner/Member
City Darien	State Connecticut	Zip 06820
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Thomas	Last Name Simoncelli	Title Owner/Member
City Coventry	State Rhode Island	Zip 02816
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
First Name Robert	Last Name Rodericks	Title Owner/Member
City East Providence	State Rhode Island	Zip 02914

Business Associated with (Applicant, parent business or sub-entity)

APPLICANT-WTF CANNA LLC

First Name George	Last Name Starr	Title Owner/Member
City Riverside	State Rhode Island	Zip 02915

Business Associated with (Applicant, parent business or sub-entity)

APPLICANT-WTF CANNA LLC

First Name Yvonne	Last Name Sousa	Title Member
City Warwick	State Rhode Island	Zip 02889

Business Associated with (Applicant, parent business or sub-entity)

JDYS GROWTH LLC

First Name James	Last Name Duffer	Title Member
City Warwick	State Rhode Island	Zip 02889

Business Associated with (Applicant, parent business or sub-entity)

JDYS GROWTH LLC

First Name Vladimir	Last Name Torrice	Title Member
City Cumberland	State Rhode Island	Zip 02864

Business Associated with (Applicant, parent business or sub-entity)

JZT LLC

First Name Pamela	Last Name Torrice	Title Member
City Cumberland	State Rhode Island	Zip 02864

Business Associated with (Applicant, parent business or sub-entity)

JZT LLC

First Name Matthew	Last Name Mega	Title Owner/Member
City Rehoboth	State Massachusetts	Zip 02769

Business Associated with (Applicant, parent business or sub-entity)

Applicant - WTF CANNA LLC

First Name Michael	Last Name DeAngelis	Title Owner
City Barrington	State Rhode Island	Zip 02806

Business Associated with (Applicant, parent business or sub-entity) WTF CANNA		
First Name Michael	Last Name DeAngelis	Title Owner
City Barrington	State Rhode Island	Zip 02806
Business Associated with (Applicant, parent business or sub-entity) WTF CANNA		
First Name Matthew	Last Name Resnick	Title President
City Warwick	State Rhode Island	Zip 02886
Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC		
Business Name JDYS Growth LLC	City Providence	State Rhode Island
Zip 02903	Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC	
Business Name JZT LLC	City Cumberland	State Rhode Island
Zip 02864	Business Associated with (Applicant, parent business or sub-entity) APPLICANT-WTF CANNA LLC	

B. LIST ALL OFFICERS, DIRECTORS, MANAGERS, MEMBERS OR AGENTS OF THE APPLICANT/LICENSEE AND ANY OTHER ENTITIES DESCRIBED IN SECTION A.

To the extent that any such Interest Holder is an entity (corporation, partnership, LLC, etc.), list all Interest Holders in that entity until all such Interest Holders are identified and disclosed down to the individual person level.

First Name Matthew	Last Name Resnick	Title
City Warwick, RI	State Rhode Island	Zip 02886
Business Associated with (Applicant, parent business or sub-entity)		
First Name Benjamin	Last Name Strattman	Title
City Newton	State Massachusetts	Zip 02459
Business Associated with (Applicant, parent business or sub-entity)		

C. LIST ALL PERSONS OR ENTITIES WHO HAVE MANAGING OR OPERATIONAL CONTROL WITH RESPECT TO THE APPLICANT/LICENSEE, ANY OTHER ENTITIES DESCRIBED IN SECTIONS A OR B, ITS OPERATIONS, THE LICENSE, AND/OR LICENSED FACILITIES (WHETHER THEY HAVE AN OWNERSHIP INTEREST OR NOT).

To the extent that any such Interest Holder is an entity (corporation, partnership, LLC, etc.), list all Interest Holders in that entity until all such Interest Holders are identified and disclosed down to the individual person level.

D. LIST ALL INVESTORS OR OTHER PERSONS OR ENTITIES WHO HAVE ANY FINANCIAL INTEREST WITH RESPECT TO THE APPLICANT/LICENSEE, ANY OTHER ENTITIES DESCRIBED IN SECTIONS A, B OR C, ITS OPERATIONS, THE LICENSE, AND/OR LICENSED FACILITIES (WHETHER THEY HAVE AN OWNERSHIP INTEREST OR NOT).

To the extent that any such Interest Holder is an entity (corporation, partnership, LLC, etc.), list all Interest Holders in that entity until all such Interest Holders are identified and disclosed down to the individual person level.

E. LIST ALL PERSONS OR ENTITIES THAT HOLD INTEREST(S) ARISING UNDER SHARED MANAGEMENT COMPANIES, MANAGEMENT AGREEMENTS, OR OTHER AGREEMENTS THAT AFFORD THIRD-PARTY MANAGEMENT OR OPERATIONAL CONTROL WITH RESPECT TO THE APPLICANT/LICENSEE, ITS OPERATIONS, THE LICENSE AND/OR THE LICENSED FACILITIES.

To the extent that any such Interest Holder is an entity (corporation, partnership, LLC, etc.), list all Interest Holders in that entity until all such Interest Holders are identified and disclosed down to the individual person level.

Part II: Who, besides the owners and other Interest Holders listed in this Form 2 (including persons, firms, partnerships, corporations, limited liability companies, trusts), will loan, give or otherwise provide money, property interests, equipment, inventory, furniture, licensing or other proprietary rights to or for use in this business, or hold a security interest therein; or who will receive money, profits, proprietary rights or other interests from this business. Attach a separate sheet if necessary. If any such person is an entity, list all persons with any ownership in or control of that entity.

Name

CERTIFICATION AS TO FORM 2

The undersigned duly authorized officer of the applicant/licensee, in his/her capacity as such officer and for and on behalf of the applicant/licensee, after due inquiry, hereby certifies to the Office of Cannabis Regulation of the Department of Business Regulation (the "Department" or "DBR") that it/he/she has disclosed to the Department in this Form 2:

(A) With respect to the applicant/licensee, all persons and entities that:

- (i) Are owners, members, officers, directors, managers or agents of the applicant/licensee, and/or
- (ii) Have/will have managing or operational control with respect to the applicant/licensee, its operations, the license and/or licensed facilities whether they have an ownership interest or not, and/or
- (iii) Are investors or have any other financial interest therein, and/or
- (iv) Hold interest(s) arising under shared management companies, management agreements, or other agreements that afford third-party management or operational control with respect to the applicant/licensee, its operations, the proposed license and/or the licensed facilities (any person or entity in the foregoing (i), (ii) and (iii) being herein individually referred to as an "interest holder" and all such persons and entities in the foregoing (i), (ii), (iii) and (iv) being collectively referred to as the "interest holders"), and

(B) To the extent that any interest holder described in (A) above is an entity, all interest holders in that entity until all such interest holders are identified and disclosed down to the individual person level.

The undersigned, after due inquiry, further certifies to the Department that, except for the license that is the subject of this Form 2 and except as permitted under R.I. Gen. Laws § 21-28.6-12(b)(10), no "interest holder" disclosed herein is an "interest holder" with respect to any other license issued by, or license application made to, the Department as to a "marijuana establishment licensee" as defined in R.I. Gen. Laws § 21-28.6-3(17).

The undersigned hereby acknowledges and agrees that the applicant/licensee has a continuing obligation to disclose any changes and shall provide written notice to the Department within thirty (30) days of any change of the persons/entities/interest holders described and the certifications made in this Form 2 and that each such notice shall include an updated Form 2.

Under penalty of perjury, I hereby declare and verify that all statements on and information submitted with this Form 2 are complete, true, correct and accurate.

Matthew Resnick

9/16/2025

Authorized Signatory

Date

Matthew Resnick

Printed Name

Print Name of Applicant/Licensee: WTF Canna LLC

Print Officer Title: