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

Business Associated with (Applicant, parent business or sub-entity)		
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	Last Name	Title
Robert	Rodericks	Owner/Member
City	**State**	**Zip**
East Providence	Rhode Island	02914

Business Associated with (Applicant, parent business or sub-entity)
APPLICANT-WTF CANNA LLC

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

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

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

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

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

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

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

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

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

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

First Name	Last Name	Title
Michael	DeAngelis	Owner
City	**State**	**Zip**
Barrington	Rhode Island	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 Tyler	**Last Name** Almeida	**Title** Member
City Seekonk	**State** Massachusetts	**Zip** 02771
Business Associated with (Applicant, parent business or sub-entity) WTF Canna		
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	10/7/2026
Authorized Signatory	**Date**

Matthew Resnick

Printed Name

Print Name of Applicant/Licensee: WTF Canna LLC

Print Officer Title: