

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000348216

Entity Name: WILD ROOTZ MARKETPLACE LLC**Current Principal Place of Business:**66 WEST FLAGLER ST SUITE 900
MIAMI, FL 33130**Current Mailing Address:**66 WEST FLAGLER ST SUITE 900
MIAMI, FL 33130 US**FEI Number:** 85-4033792**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENNETT, SONYA D
66 W FLAGLER STREET
SUITE 900 #3188
MIAMI, FL 33130 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|---------------------------------------|
| Title | MGR |
| Name | BENNETT, SONYA D |
| Address | 66 WEST FLAGLER ST SUITE 900 #3188 |
| City-State-Zip: | MIAMI FL 33130 |

| | |
|-----------------|------------------------------|
| Title | AR |
| Name | FARRINGTON-BENNETT, SHANEZ S |
| Address | 66 WEST FLAGLER ST SUITE 900 |
| City-State-Zip: | MIAMI FL 33130 |

| | |
|-----------------|------------------------------|
| Title | AMBR |
| Name | TORRENCE, MILTON G JR |
| Address | 66 WEST FLAGLER ST SUITE 900 |
| City-State-Zip: | MIAMI FL 33130 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SONYA D BENNETT

FOUNDER

02/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date