

Exhibit F-8: MARKET MAKER REGISTRATION APPLICATION

Members applying to become Market Makers registered with Green Impact Exchange LLC ("Exchange") are required to complete this Market Maker Registration Application. The Exchange may require additional information from any Applicant prior to determining whether to register such Applicant as a Market Maker.

To apply, please complete this Market Maker Registration Application and submit with all required supplementary materials via email to [TBD email address].

Applicants are required to update any information submitted in the application when and if it becomes inaccurate or incomplete after submission.

GENERAL INFORMATION			
Date	CRD #:		
Name of Applicant			
Address of Principal Office			
City	State	ZIP	
APPLICATION CONTACT			
Name:	Title		
Phone	Email		
OTHER BUSINESS ACTIVITIES			
 ☐ Investment Banking ☐ Public Securities ☐ Proprietary Trading ☐ Market Maker ☐ Dealer/Specialist ☐ Other: ☐ If the Applicant is a Market Maker or Dealer/Specialist, please provide a list of registered national securities exchange(s) or association(s) on which the Applicant has 			
been approved as such:			

SECURITIES			
Estimate the number of se registered Market Maker of		e Applicant intends to become a	
NET CAPITAL			
Excess Net Capital Amour	nt:	As of Date:	
Source of Net Capital:			
Most recent FOCUS R	eport enclosed (req	uired)	
MARKET MAKER AUTHORIZED TRADERS			
To be eligible for registration as a Market Maker Authorized Trader ("MMAT"), as defined in Exchange Rule 1.150(c), a person must successfully complete proficiency examinations and continuing education requirements applicable to Authorized Traders. Market Makers must maintain a current list of MMATs who are permitted to enter orders on behalf of the Market Maker pursuant to Exchange Rule 11.150(c)(4).			
Name:	CRD#	Employment Date	
Series 7 Qualification	_		
Name:	CRD#	Employment Date	
Series 7 Qualification Series 57 Qualification			
Name:	CRD#	Employment Date	
Series 7 Qualification	Series 57 Quali	fication	
Name:	CRD#	Employment Date	
Series 7 Qualification	Series 57 Quali	fication	

The undersigned attests that the information provided in this application on behalf of the Applicant is complete and accurate. Furthermore, the undersigned acknowledges that the Applicant agrees to update the application as necessary, and to abide by all rules of

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the Exchange, and interpretations thereof, as t added, supplemented and/or amended from ti	
Signature of Authorized Officer, Partner, or Managing Member or Sole Proprietor	_
Printed Name	_
Title	_
Date	_

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