	State of Rhode Office of the Secreta		No Fee
	Division Of Business 148 W. River S		
HOPE	Providence RI 0290 (401) 222-30		
Domestic Limited Liability Company Annual Report - Amended (Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)			
This form is only to be used to amend the current annual report on file with this office.			
ANNUAL REPORT YEAR: 2020			
<b>1. ID No.</b> <u>001676273</u>			
2. Exact Name of the Limited Liability Company Scandia Ventures, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>531390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
REAL ESTATE RELATED SERVICES			
5. Principal Office Address			
No. and Street: <u>1550 NOOSENECK HILL ROAD</u> #1277			
City or Town: $\frac{\pi 1277}{COVE}$	NTRY	State: <u>RI</u> Zip: <u>02816</u> Country: <u>US</u>	<u>5A</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>LARS NIKLAS WAHLBERG</u> Contact Title: <u>MANAGER</u> No. and Street: <u>1550 NOOSENECK HILL ROAD</u> #1277			
City or Town: <u>COVE</u>	NTRY	State: <u>RI</u> Zip: <u>02816</u> Country: <u>US</u>	<u>SA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Count 1550 NOOSENECK HILL ROAD # 127 COVENTRY, RI 02816 USA	-
<u> </u>	I		

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

SUSAN LEACH DEBLASIO, ESQUIRE ADLER POLLOCK & SHEEHAN P.C. 1 CITIZENS PLAZA, 8TH FLOOR PROVIDENCE, RI 02903

**Signed this 22 Day of April, 2021 at 2:11:04 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>LARS NIKLAS WAHLBERG</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

April 22, 2021 02:10 PM

Tulli M. Hole

Nellie M. Gorbea Secretary of State

