RI SOS Filing Number: 202105325970 Date: 11/23/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: 2021 **Limited Liability Company**

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name	2. Exact name of the Limited Liability Company				
000541928	SCOOTFARM ENTERPRISES, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island WINE & BEER WHOLESALE DISTRIBUTOR					
424820						
5. State of Formation	1					
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
577 WARREN AVENUE			EAST PROVIDENCE	RI	02914	
7. Mailing Address of Limited Lia		and Name or Tit	le of Contact Person			
Contact Name VINCENT A. ARMENIO			Contact Title MANAGER			
Street Address 64 FRANCIS STREET			City REHOBOTH	State MA	^{Zip} 02769	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name VINCENT A. ARMENIO			Manager Name N/A			
Street Address 64 FRANCIS STREET			Street Address			
City REHOBOTH	State MA	Zip 02769	City	State	Zip	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City ,	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all stater			· · · · · · · · · · · · · · · · · · ·	ny accompanying	g schedules and	
Name of Authorized Person				Date	Date	
VINCENT A. ARMENIO				November 22, 2021		
Signature of Authorized Person	M	Ul				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED C

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