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Annual Report for the year: 2025

Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 121527	2. Exact name of the Limited Liability Company PERKINS FARM LLC			
3. NAICS Code 5 State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Purchase, sale and management of real and/or personal property			
6. Principal Office Address	•	City	State	Zip
127 South Pier Road		Narragansett	RI	02882
7. Mailing Address of Limited L	iability Company and Name or Ti	tle of Contact Person	•	
Contact Name Roberta Marinelli		Contact Title		
Street Address 229 Bay Street		City Santa Cruz	State CA	^{Zip} 95060
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
	eclare and affirm that I have exe ements contained herein are tru		any accompanying	schedules and
Name of Authorized Person			Date	
Roberta Marinelli			15 February 2025	
Signature of Authorized Perso	AMant:	•	-	

MAIL TO:

Division of Business Services

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

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