RI SOS Filing Number: 201925247730 Date: 10/24/2019 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019
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 163406	I	2. Exact name of the Limited Liability Company SAM & COMPANY, LLC.				
3. NAICS Code		Brief description of the character of business conducted in Rhode Island				
531120	OWNING, SI	OWNING, SELLING AND LEASING REAL ESTATE				
5. State of Formation						
RHODE ISLAND	}					
6. Principal Office Address			City	State	Zip	
50 FRENCH STREET			REHOBOTH	MA	02769	
7. Mailing Address of Limi	•	y and Name or Ti		•		
Contact Name LINDA K. FOLEY			Contact Tille MANAGER			
Street Address 50 FRENCH STREET			City REHOBOTH	State MA	^{Zip} 02769	
		of the Limited Lia	ability Company, IF APPLICAE		MEMBERS	
Manager Name LINDA K. FOLEY			Manager Name KENNETH J. FOLEY			
Street Address 50 FRENCH STREET			Street Address 50 FRENCH STREET			
City REHOBOTH	State MA	^{Zip} 02769	City REHOBOTH	State MA	^{Zip} 02769	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Žip	
				Check the box to it	ndicate an attachment	
9. Resident Agent in Rhoo	de Island. This informa	ition is currently of r	ecord with the Department of Sta	ite. Changes require filin	g Form 642.	
Under penalty of perjury statements, and that all			amined this report, including up and correct.	g any accompanyin	g schedules and	
Name of Authorized Person Linda K. Foley Signature of Authorized Person Linda K. Foley Signature of Authorized Person Linda K. Foley				Date 10 - 21 - 19		
Signature of Authorized P	erson Linda	KJo	liggent HERE	•		

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

OCT 2 4 2019

FORM 632 - Revised: 10/2017