



State of Rhode Island

Department of State - Business Services Division

FILED

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BY

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Annual Report for the year: 2020

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 149564		2. Exact name of the Limited Liability Company SAMOWITZ AND KLEIN, R.I., LLC			
3. NAICS Code 531190		4. Brief description of the character of business conducted in Rhode Island To own a triple lease post office			
5. State of Formation Rhode Island					
6. Principal Office Address 55 Armitage Drive		City Bridgeport		State CT	Zip 06605
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Ferne Samowitz			Contact Title Property Manager		
Street Address 55 Armitage Drive		City Bridgeport		State CT	Zip 06605
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	City	State	Zip	
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Ferne Samowitz				Date October 13, 2020	
Signature of Authorized Person <i>Ferne Samowitz</i>					

MAIL TO:

Division of Business Services

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