RI SOS Filing Number: 202101240790 Date: 9/10/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021
Limited Liability Company

FILED

SEP 1 0 2021

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

				010		
1. Entity ID Number	2. Exact name of the Limited Liability Company					
566155	ROBERT SIMON, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
454111	to engage in online, electronic sale of merchandise					
5. State of Formation	1					
RI						
6. Principal Office Address			City	State	Zip	
90 Douglas Pike			Smithfield	RI	02917	
7. Mailing Address of Limited Lia		any and Name o				
Contact Name Robert S. Kibarian			Contact Title authorized	Contact Title authorized person		
Street Address 90 Douglas Pike			City Smithfield	State RI	^{Zip} 02917	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
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 staten	lare and affi nents contai	irm that I have ined herein are	examined this report, includir true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Gene M. Carlino, resident agent				09/07/2	09/07/2021	
Signature of Authorized Person						
\	/ \	-				

MAIL TO:

Division of Business Services

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

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