

## **Department of State - Business Services Division**

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R.I. DEPT. OF STATE

BUS SVCS DIV.

2021 NOV 22 A 9:55

## 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.

Entity ID Number	2. Exact name of the Limited Liability Company					
861890	Row-And LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
611620	Physical fitness training and kickboxing instruction					
5. State of Formation						
RI					i	
6. Principal Office Address			City	State	Zip	
27 Claire St			West Warwick	RI	02893	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Leonard Anderson			Contact Title Member			
Street Address 27 Claire St			City West Warwick	State RI	<sup>Zip</sup> 02893	
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	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 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				Date		
Leonard Anderson				11/1/21	11/1/21	
Signature of Authorized Person						
Klink						

MAIL TO:

**Division of Business Services** 

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

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