

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097187

FILED
Apr 06, 2008
Secretary of State

Entity Name: SAMOWITZ & KLEIN NO.2 FOR KENDALL, LLC

Current Principal Place of Business:

55 ARMITAGE DRIVE
BRIDGEPORT, CT 06605

New Principal Place of Business:

Current Mailing Address:

55 ARMITAGE DR
BRIDGEPORT, CT 06605

New Mailing Address:

FEI Number: 20-3623918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAKE, WALTER R
1881 UNIVERSITY DR SUITE 100
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR. () Delete
Name: SAMOWITZ, JACK MEMBER
Address: 55 ARMITAGE DRIVE
City-St-Zip: BRIDGEPORT, CT 06605

Title: MS (X) Delete
Name: SAMOWITZ, FERNE
Address: 55 ARMITAGE DR/
City-St-Zip: BRIDGEPORT, CT 06605

ADDITIONS/CHANGES:

Title: MS (X) Change () Addition
Name: FERNE SAMOWITZ,
Address: 55 ARMITAGE DRIVE
City-St-Zip: BRIDGEPORT, CT 06605

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FERNE SAMOWITZ

MGM

04/06/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date