

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000003681

**FILED**  
**Apr 03, 2018**  
**Secretary of State**  
**CC0016342492**

**Entity Name:** SAMUELS & ASSOCIATES MANAGEMENT LLC

**Current Principal Place of Business:**

136 BROOKLINE AVENUE  
BOSTON, MA 02215

**Current Mailing Address:**

136 BROOKLINE AVENUE  
BOSTON, MA 02215 US

**FEI Number:** 04-3448016

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 US

*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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           BLOCH, THOMAS  
Address        136 BROOKLINE AVENUE  
City-State-Zip: BOSTON MA 02215

Title           MANAGER  
Name           SAMUELS, STEVEN B.  
Address        136 BROOKLINE AVENUE  
City-State-Zip: BOSTON MA 02215

Title           MANAGER  
Name           SKLAR, JOEL  
Address        136 BROOKLINE AVENUE  
City-State-Zip: BOSTON MA 02215

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVEN B. SAMUELS

**MANAGER**

**04/03/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date