



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
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 1033219		2. Exact name of the Limited Liability Company Employer Flexible Management, LLC			
3. NAICS Code 561330		4. Brief description of the character of business conducted in Rhode Island Professional Employer Organization - Employee Leasing Company			
5. State of Formation Texas					
6. Principal Office Address 7102 N. Sam Houston Pkwy W., Suite 200		City Houston	State TX	Zip 77064	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Jennifer LaBarge			Contact Title Compliance Coordinator		
Street Address 7102 N. Sam Houston Pkwy W., Suite 200		City Houston	State TX	Zip 77064	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address e 200		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip 4	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 Chris Dollins				Date 9/7/2017	
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

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