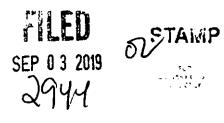


Annual Report for the year: 2019 **Limited Liability Company** 

→ 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	2. Exact name of the Limited Liability Company					
000809936	Freeman Companies, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
541330	Engineering Services					
5. State of Formation	1					
Connecticut						
6. Principal Office Address			City	State	Zip	
36 John Street			Hartford	СТ	06106	
7. Mailing Address of Limited Lia	bility Compa	ny and Name or				
Contact Name Rohan Freeman			Contact Title President/CEO			
Street Address 36 John Street			City Hartford	State CT	<sup>Zip</sup> 06106	
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	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. 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				Date	Date	
Rohan Freeman				8/16/201	8/16/2019	
Signature of Authorized Person SIGN DOCUMENT HERE						
K& A>-						

MAIL TO:

**Division of Business Services** 

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

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