	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S		
HOPE	Providence RI 0290 (401) 222-30	04-2615	
Limited Liability Com	ipany		
Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	2020		
1. ID No. <u>001663206</u>			
2. Exact Name of the Limited Liability Company <u>LOCKTON COMPANIES, LLC</u>			
3. State of Formation			
State: <u>MO</u>			
	ARTICLE III		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>524120</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
INSURANCE BROKE	<u> </u>		
5. Principal Office Addre	ess		
	OLIVE BOULEVARD, #300		
City or Town:ST. LOUISState: MOZip: 63141Country: USA			
6. Mailing Address of Li	mited Liability Company and Name	e or Title of Contact Person:	
Contact Name: Contact No. and Street: 444 WE	Title: ST 47TH STREET, SUITE 900		
City or Town: KANSA		State: <u>MO</u> Zip: <u>64112</u> 0	Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	f Each Manager of the Limited Liak RS	bility Company, if Applicable	<u>}.</u>
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country
MANAGER	LOCKTON MANAGEMENT, LLC	444 WEST 47TH STREE KANSAS CITY, MO 6411	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATE CREATIONS NETWORK INC. 10 DORRANCE STREET, SUITE 700 PROVIDENCE, RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 16 Day of October, 2020 at 2:45:45 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>BRAD STASIULIS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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