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## State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number	2. Exact name of the Limited Liability Company					
001707778	DH Companies LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
561730	LANDSCAPING					
5. State of Formation	1 0 000					
RI						
6. Principal Office Address		City	State	Zıp		
459 Smith St		Providence	h#	02908		
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		Contact Title				
DANIEL HARRIS		OWNER  City State Zip  Providence RT 02908				
Street Address		City	State	Zip		
459 Smith St		Providence	PIF .	02908		
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
9. 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			
DANIEL HA	mris		9.25.25			
Signature of Authorized Person						
1 h						

FILED

SEP 25 2025

BY C9CXY

MAIL TO:

**Division of Business Services** 

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

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