



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
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: 2016

1. ID No. 000747866

2. Exact Name of the Limited Liability Company GETCO Execution Services, LLC

3. State of Formation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

52

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ENTITY WAS AN SEC AND FINRA REGISTERED ATS (ALTERNATIVE TRADING SYSTEM). THE ENTITY WAS DISSOLVED IN DELAWARE ON 10/16/2014. AN APPLICATION TO WITHDRAW WAS FILED IN RI ON 6/3/2014 AND IS PENDING.

5. Principal Office Address

No. and Street: 350 N. ORLEANS STREET, STE 220

City or Town: CHICAGO

State: IL Zip: 60654 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: C/O KCG HOLDINGS, INC.

300 VESEY STREET

City or Town: NEW YORK

State: NY Zip: 10282 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

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

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

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

Signed this 13 Day of December, 2016 at 11:51:06 AM 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 KATHRYN M. SMITH
Signature of Authorized Person

Form No. 632
Revised 09/07

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