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

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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	2. Exact name of the Limited Liability Company
523329	Holden Wilcox LLC
3. NAICS Code: 541612	4. Brief description of the character of business conducted in Rhode Island: EXECUTIVE SEARCH
5. State of Formation: CT	

6. Principal Office Address	City	State	Zip
4 Talia Court	Narragansett	RI	02882

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

Contact Name	Contact Title			
Harris Chorney	Principal Member			
Street Address	**City**	**State**	**Zip**	
4 Talia Court	Narragansett	RI	02882	

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name	Street Address	City	State	Zip
Harris Chorney	Same as above			

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
Harris Chorney	10/31/18

Signature of Authorized Person: Harris Chorney — SIGN DOCUMENT HERE

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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FORM 632 - Revised: 10/2017