1				
		e of Rhode Islar the Secretary o		Fee: \$50.00
		n Of Business Ser 48 W. River Street		
		dence RI 02904-20		
1636		(401) 222-3040	015	
Limited Liability Company				
Annual Report Filing Period: February 1 - May 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 - ENTER THE <u>CURRENT</u> FILING YEAR 2023 : <u>2023</u>				
1. ID No. <u>001707355</u>				
2. Exact Name of the Limited Liability Company <u>HCTN Local, LLC</u>				
3. State of Formation				
State: <u>OH</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>561320</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
HEALTHCARE S	TAFFING			
5. Principal Office	Address			
No. and Street:	4000 SMITH ROAD			
City of Taura	<u>SUITE 500</u> CINCINNATI	Stata: OII	7in: 45200	Country: USA
City or Town:	<u>CINCINNATI</u>	State: <u>OH</u>	Zip: <u>45209</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Co				
No. and Street:	4000 SMITH ROAD			
City or Town:	<u>SUITE 500</u> <u>CINCINNATI</u>	State: OH	Zip: <u>45209</u>	Country: <u>USA</u>

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 27 Day of April, 2023 at 5:28:51 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 JONATHAN D. KUKULSKI

Signature of Authorized Person

Form No. 632 Revised 09/07

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