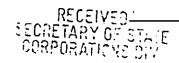
RI SOS Filing Number: 202458952760 Date: 8/20/2024 10:36:00 AM



State of Rhode Island

Department of State - Business Services Division



2024 JUL 26 AM 11: 36

Annual Report for the year: 2021 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.

				202
1. Entity ID Number	2. Exact name of the Limited Liability Company			AUG
1676451	HWC PROVIDEN	HWC PROVIDENCE LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
453990	CELL PHONE STOR	E.		
5. State of Formation RI				AH IQ: 34
6. Principal Office Address		City	State	Zip
46 SOUTHFIELD AVE STE 100		STAMFORD	СТ	06902
7. Mailing Address of Limite	ed Liability Company and Name or I	Title of Contact Person		
CHRISTOPHER SEVERO		Contact Title MEMBER		
Street Address 46 SOUTHFIELD AVE STE 100		City STAMFORD	State CT	^{Zip} 06902
8. The Resident Agent infor	mation currently of record with the	RI Department of State is accura	te. Changes require	e filing Form 642.
	y, I declare and affirm that I have tatements contained herein are t		ig any accompany	ring schedules and
Name of Authorized Person			Date	
CHRISTOPHER SE	VERO		04/18/24	
Signature of Authorized Per	rson	· · · · · · · · · · · · · · · · · · ·		

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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

FORM 632 - Revised: 12/2023