RI SOS Filing Number: 202459045470 Date: 8/23/2024 10:31:00 AM

State of Rhode Islar  Department of S	<sup>nd</sup> tate - Business Services	Division ORPOPATI	YED OF SUITE	· .
Annual Report for the year:	2023	3024 AUG 23	AM 16231	
→ Filing period: February 1 → Filing Fee: \$50.00	- May 1		Dos,	
→ Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.				
1. Entity 1D Number 1674721	2. Exact name of the Limited Liability Company  HWC PORTSMOUTH			
3. NAICS Code 453990	4. Brief description of the character of business conducted in Rhede Island  CELL PHONE STORE			
5. State of Formation RI		ANTIVE EDITS		·
6. Principal Office Address		City	State	Zip
46 SOUTHFIELD AVE STE 100		STAMFORD	СТ	06902
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Contact Name CHRISTOPHER SEVERO		Contact Title MEMBER		
Street Address 46 SOUTHFIELD AVE STE 100		STAMFORD	State CT	<sup>Zip</sup> 06902
8. The Resident Agent information	on currently of record with the RI D	epartment of State is accurate. Cl	hanges require fil	ing 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	

MAIL TO:

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

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

CHRISTOPHER SEVERO

Signature of Authorized Person

**FILED** 

04/18/24

AUG 2 3 2024

FORM 632 - Revised