	State of Rhode Office of the Secreta		Fee: \$50.00		
	Division Of Business 148 W. River St Providence RI 0290	reet 4-2615			
HOPE	(401) 222-304	40			
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: 2020					
1. ID No. <u>001689154</u>					
2. Exact Name of the Limited Liability Company <u>Refrigeration Engineering &amp; Contracting Co., LLC</u>					
3. State of Formation					
State: <u>DE</u>					
ARTICLE III					
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.					
<u>811310</u>					
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island					
INSTALL AND MAINTAIN INDUSTRIAL REFRIGERATION SYSTEMS					
5. Principal Office Address					
No. and Street: <u>22</u>	SIXTH ROAD				
	<u>E 1</u> OBURN State: MA	Zip: 01801	Country: USA		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:					
Contact Name: Contact Title: No. and Street: <u>22 SIXTH ROAD</u>					
City or Town: <u>WC</u>	<u>E 1</u> BURN State: <u>MA</u>	Zip: <u>01801</u>	Country: <u>USA</u>		
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS					
Title	Individual Name	Δα	Idress		
	First, Middle, Last, Suffix		n, State, Zip Code, Country		

GINO WHOOLEY

MANAGER

22 SIXTH ROAD, STE 1

		WOBURN, MA 01801 USA		
MANAGER	MICHAEL SIROIS	22 SIXTH ROAD, STE 1 WOBURN, MA 01801 USA		
MANAGER	TIMOTHY LEWIS	53 GREENWICH AVENUE GREENWICH, CT 06830 USA		
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
<u>CORPORATION SERVICE COMPANY</u> 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888				
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
<b>Signed this 5 Day of October, 2020 at 10:54:47 AM by the authorized person.</b> 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 <u>GINO WHOOLEY</u> Signature of Authorized Person				
Form No. 632 Revised 09/07				
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