



**State of Rhode Island**  
**Department of State - Business Services Division**

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**Annual Report for the year:** 2017  
**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.

1. Entity ID Number <b>000123529</b>		2. Exact name of the Limited Liability Company <b>FENIX HOSPITALITY GROUP, LLC</b>	
3. NAICS Code <b>721110</b>		4. Brief description of the character of business conducted in Rhode Island <b>ACQUISITION, RENOVATION OF HOTEL AND OTHER PROPERTIES</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>3743 POST ROAD, 2ND FLOOR</b>		City <b>WARWICK</b>	State <b>RI</b>
		Zip <b>02886</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>JACK BERTHERMAN</b>		Contact Title <b>AGENT</b>	
Street Address <b>3743 POST ROAD, 2ND FLOOR</b>		City <b>WARWICK</b>	State <b>RI</b>
		Zip <b>02886</b>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing 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 <i>Jack Bertheman</i>		Date <b>5/25/23</b>	
Signature of Authorized Person <i>Jack Bertheman</i>			

**FILED**

**MAY 30 2023**  
 BY *BLP/LS*  
**A.A. 2:47 pm.**

**MAIL TO:**

**Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: [www.sos.ri.gov](http://www.sos.ri.gov)