



State of Rhode Island  
Department of State - Business Services Division

MAY 30 2024

113 *or*

Annual Report for the year: 2024  
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<br><b>001756784</b>   |  | 2. Exact name of the Limited Liability Company<br><b>Phoenix Refrigeration LLC</b>  |                          |                     |
| 3. NAICS Code<br><b>238220</b>  |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>repairs and maintenance on HVAC and refrigeration equipment</b> |                          |                     |
| 5. State of Formation<br><b>R.I.</b>  |  |   |                          |                     |
| 6. Principal Office Address<br><b>11 Gladding St.</b>   |  | City<br><b>Bristol</b>  | State<br><b>RI</b>       | Zip<br><b>02809</b> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |                          |                     |
| Contact Name<br><b>Victoria Cummings</b>  |  | Contact Title<br><b>owner</b>   |                          |                     |
| Street Address<br><b>11 Gladding St.</b>  |  | City<br><b>Bristol</b>  | State<br><b>RI</b>       | Zip<br><b>02809</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<br><b>Victoria Cummings</b>   |  |   | Date<br><b>5-26-2024</b> |                     |
| Signature of Authorized Person<br><i>Victoria Cummings</i>  |  |   |                          |                     |

**MAIL TO:**

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