

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000171089

**Entity Name:** PACKAGED COOLING SYSTEMS LLC

**Current Principal Place of Business:**

530 NE 131ST LANE  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

P. O. BOX 890  
VERMILION, OH 44089 US

**FEI Number:** 82-2467604

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            HILLE, DAVID E  
Address        P. O. BOX 890  
City-State-Zip: VERMILION OH 44089

Title            MGR  
Name            HILLE, DAVID E  
Address        P. O. BOX 890  
City-State-Zip: VERMILION OH 44089

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID E HILLE

AMBR

02/12/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date