



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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CORPORATIONS DIV

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1. Entity ID Number <b>000841057</b>		2. Exact name of the Limited Liability Company <b>Sensible Heating + Air Conditioning LLC</b>			
3. State of Formation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>HVAC Installations + Service</b>			
5. Principal Office Address <b>90 Highview Ave</b>		City <b>Hope Valley</b>		State <b>RI</b>	Zip <b>02832</b>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Elizabeth Rekowski</b>		Contact Title <b>Office MGR</b>			
Street Address <b>90 Highview Ave</b>		City <b>Hope Valley</b>		State <b>RI</b>	Zip <b>02832</b>
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <b>Mark Rekowski</b>				Date <b>6/29/16</b>	
Signature of Authorized Person <b>MRK</b>					

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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By **278305**