

Department of State - Business Services Division

RILDEPT. OF STATE BUS SYCS DIV

STA

Annual Report for the year: 2021 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.

2821 DEC - 1	AM 8: 38
	0. 00

1. Entity ID Number 001335252	2. Exact name of the Limited Liability Company SENSIBLE DEVELOPMENT LLC					
3. NAICS Code 621340	Brief description of the character of business conducted in Rhode Island OCCUPATIONAL THERAPY					
5. State of Formation RI						
6. Principal Office Address 10 RIVER MEADOW DR			City HOPE VALLEY	State	Zip 02832	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name AMY MARCILLE			Contact Title MANAGER			
Street Address 10 RIVER MEADOW DR		City HOPE VALLEY	State RI	^{Zip} 02832		
8. List ALL managers (names a	nd addresses	s) of the Limited I	Liability Company, IF APPLICABLI	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address		Street Address	Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
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 Date / /						
MICHAEL K. MARRAN 11/29/2021						
Signature of Authorized Person Musikus Markeus Markeus						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov FILED

DEC 0 1 2021

FORM\$632 - Revised: 08/2020