State of Rhode Island and Providence Plantations Department of State - Business Services Division	
2046	
Annual Report for the year: 2016	
Limited Liability Company	
→ Filing period: September 1 - November 1	i
→ Filing Fee: \$50.00	
→ Penalty: Additional \$25.00 fee if form is not filed by December 1	

1. Entity ID Number	2. Exact name of the Limited Liability Company					
000529616	Coelho Construction, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
23 - Construction	Construction and remodeling services.					
5. State of Formation						
MA						
6. Principal Office Address			City	State	Zip	
4 Morris Hope Lane			Berkley	MA	02779	
7. Mailing Address of Limited Lia	bility Company	and Name or Title			<u></u>	
Contact Name Helder M. Coelho			Contact Title Manager			
Street Address 4 Morris Hope Lane			City Berkley	State MA	Zip 02779	
8. List ALL managers (names an	d addresses) o	f the Limited Liabi	lity Company, IF APPLICA	BLE - DO NOT LIST ME	MBERS	
Manager Name Helder M. Coelho		Manager Name				
Street Address 4 Morris Hope Lane			Street Address			
City Berkley	State MA	^{Zip} 02779	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to ind	cate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I declar statements, and that all stateme	are and affirm ents contained	that I have exam I herein are true	ined this report, includin and correct.	g any accompanying s	chedules and	
Name of Authorized Person				Date	· · · · · · · · · · · · · · · · · · ·	
Helder M. Coelho, Manager			12/5 2	016		
Signature of Authorized Person	10 CE E	SIGN DOC	CUMENT HERE			

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2016