State o	f Rhode Island	Fee: \$50.00
	Secretary of State	
	f Business Services V. River Street	
Providen	ce RI 02904-2615	
1636 (40	1) 222-3040	
Limited Liability Company		
Annual Report Filing Period: February 1 - May 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or		
refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025		
1. ID No. <u>000920606</u>		
2. Exact Name of the Limited Liability Company MARIA DECARVALHO, LLC		
3. State of Formation		
State: <u>RI</u>		
NAICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>611430</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
BUSINESS CONSULTING SERVICE		
5. Principal Office Address		
No. and Street: 18 VASSAR AVENUE		
City or Town: <u>PROVIDENCE</u>	State: <u>RI</u> Zip: <u>02906</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: Contact Title:		
No. and Street: <u>18 BELMONT STREET</u>	States DI 7: 02060	Couptry USA
City or Town: <u>PAWTUCKET</u>	State: <u>RI</u> Zip: <u>02860</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11		
MARIA DECARVALHO 18 VASSAR AVENUE PROVIDENCE , RI 02906		
, <u></u>		

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 10 Day of January, 2025 at 5:39:43 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARIA DECARVALHO

Signature of Authorized Person

Form No. 632 Revised 09/07

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