	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
Providence RI 02904-2615 (401) 222-3040			
HOPE	(401) 222-30	+0	
Limited Liability Com	pany		
Annual Report Filing Period: September 1	- November 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: 2020			
1. ID No. 000796287			
2. Exact Name of the Limited Liability Company <u>MAHADAV, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
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>445310</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
4. Brief Description of the	e Character of the Business which	is Actually Conducto	ed in Knode Island
LIQUOR STORE			
5. Principal Office Addre	SS		
No. and Street: 4020 QUAKER LANE			
	RTH KINGSTOWN State	: <u>RI</u> Zip: <u>02852</u>	Country: USA
·	nited Liability Company and Name		
Contact Name: ATUL PATEL Contact Title:			
No. and Street: 4020 QUAKER LANE			
City or Town: NOR	<u>TH KINGSTOWN</u> State:	<u>RI</u> Zip: <u>02852</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Adc	Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN R	RHODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ALFRED A. VELTRI, ESQ. 331 BROADWAY PROVIDENCE , RI 02909

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

Signed this 9 Day of October, 2020 at 9:09:10 AM 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 ATUL PATEL

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved