RI SOS Filing Number: 202100978720 Date: 9/3/2021 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company						
001670850	MUKTESHWAR, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
721110	Own, sell and manage real estate, hotels and motels						
5. State of Formation	1						
Rhode Island							
6. Principal Office Address			City	State	Zip		
7650 Post Road			North Kingstown	RI	02852		
7. Mailing Address of Limited Lia	ability Compan	y and Name or Tit		•			
Contact Name Pintu Patel			Contact Title Manager				
Street Address 125 Newbury Street			City Peabody	State MA	^{Zip} 01960		
8. List ALL managers (names a	nd addresses)	of the Limited Lia	bility Company, IF APPLICAB	LE - DO NOT LIST N	MEMBERS		
Manager Name Pintu Patel			Manager Name				
Street Address 125 Newbury Street			Street Address				
City Peabody	State MA	Z _{IP} 01960	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	·		<u> </u>	Check the box to in	ndicate an attachment		
9. Resident Agent in Rhode Islan	nd. This informa	tion is currently of re	ecord with the Department of State	e. Changes require filin	g Form 642.		
Under penalty of perjury, I ded statements, and that all staten	lare and affirments contain	n that I have exa ed herein are tru	mined this report, including e and correct.	any accompanying	schedules and		
Name of Authorized Person				Date	1		
Pintu Patel				8/30	2021		
Signature of Authorized Person	MHEL	SIGN D	OCUMENT 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