

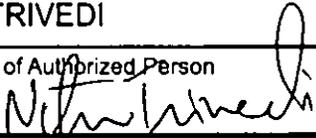


**State of Rhode Island
Department of State - Business Services Division**

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 FOR SECRETARY OF STATE
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Annual Report for the year: 2024
 Limited Liability Company

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001717340	2. Exact name of the Limited Liability Company ZEKYAN, LLC.		
3. NAICS Code 423990	4. Brief description of the character of business conducted in Rhode Island GENERAL MERCHANDISE ONLINE WHOLESALER		
5. State of Formation RI			
6. Principal Office Address 113 WINTHROP STREET APT. 2		City WOONSOCKET	State RI
Zip 02895			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name NOOR UL BASAR		Contact Title OWNER	
Street Address 113 WINTHROP STREET APT. 2		City WOONSOCKET	State RI
Zip 02895			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 NITIN TRIVEDI			Date 04/30/2024
Signature of Authorized Person 			

FILED

MAY 16 2024
 BY 215 AA

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov