State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2025
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	2. Exact name of the Limited Liability Company
001728613	CNLVII TOJOHRI LLC
3. NAICS Code: 513390	4. Brief description of the character of business conducted in Rhode Island: Conducting Real Estate Business
5. State of Formation: Rhode Island	

6. Principal Office Address	City	State	Zip
195 North Street, Suite 100	Teterboro	NJ	07608

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title
Aakash Rana	Manager

Street Address	City	State	Zip
195 North Street, Suite 100	Teterboro	NJ	07608

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	Date
Aakash Rana	4/11/2025

Signature of Authorized Person: Aakash R

FILED 12:47 P
JUL 08 2025
BY TG944

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

FORM 632 - Revised: 12/2023