



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: **2019**

Limited Liability Company

2019 OCT -2 AM 11: 53

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000799592		2. Exact name of the Limited Liability Company BLUE MOUNTAIN HOSPITALITY LLC			
3. NAICS Code 721110		4. Brief description of the character of business conducted in Rhode Island HOTEL IN ALABAMA			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 521 RXR PLAZA		City UNIONDALE	State NY	Zip 11556	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name NAVEEN SHAH		Contact Title PRESIDENT AND CEO			
Street Address 521 RXR PLAZA		City UNIONDALE	State NY	Zip 11556	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name NAVIKA CAPITAL GROUP PHASE II LLC		Manager Name NAVEEN SHAH			
Street Address 521 RXR PLAZA		Street Address 521 RXR PLAZA			
City UNIONDALE	State NY	Zip 11556	City UNIONDALE	State NY	Zip 11556
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment: <input type="checkbox"/>					
9 Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642					
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 NAVEEN SHAH				Date 09/27/2019	
Signature of Authorized Person					

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

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