



LIMITED LIABILITY COMPANY ANNUAL REPORT

1/6/2022

NAME OF LIMITED LIABILITY COMPANY: Hendersonville Hospitality LLC

SECRETARY OF STATE ID NUMBER: 2139380

STATE OF FORMATION: NC

REPORT FOR THE CALENDAR YEAR: 2025

Filing Office Use Only
E - Filed Annual Report
2139380
CA202507608841
3/18/2025 12:02

SECTION A: REGISTERED AGENT'S INFORMATION

☐ Changes

1. NAME OF REGISTERED AGENT: Jasmine Budhwani

2. SIGNATURE OF THE NEW REGISTERED AGENT: _____

SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

3. REGISTERED AGENT OFFICE STREET ADDRESS & COUNTY 4. REGISTERED AGENT OFFICE MAILING ADDRESS

201 Sugarloaf Road

201 Sugarloaf Road

Hendersonville, NC 28792 Henderson County

Hendersonville, NC 28792

SECTION B: PRINCIPAL OFFICE INFORMATION

1. DESCRIPTION OF NATURE OF BUSINESS: Hospitality

2. PRINCIPAL OFFICE PHONE NUMBER: (404) 786-0191

3. PRINCIPAL OFFICE EMAIL: Privacy Redaction

4. PRINCIPAL OFFICE STREET ADDRESS

5. PRINCIPAL OFFICE MAILING ADDRESS

201 Sugarloaf Road

201 Sugarloaf Road

Hendersonville, NC 28792

Hendersonville, NC 28792

6. Select one of the following if applicable. (Optional see instructions)

☐

The company is a veteran-owned small business

☐

The company is a service-disabled veteran-owned small business

SECTION C: COMPANY OFFICIALS (Enter additional company officials in Section E.)

NAME: Jasmine Budhwani

NAME: _____

NAME: _____

TITLE: Member

TITLE: _____

TITLE: _____

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

4133 Admiral Way

Atlanta, GA 30341

SECTION D: CERTIFICATION OF ANNUAL REPORT. Section D must be completed in its entirety by a person/business entity.

Jasmine Budhwani

3/18/2025

SIGNATURE

DATE

Form must be signed by a Company Official listed under Section C of This form.

Jasmine Budhwani

Member

Print or Type Name of Company Official

Print or Type Title of Company Official

This Annual Report has been filed electronically.

MAIL TO: Secretary of State, Business Registration Division, Post Office Box 29525, Raleigh, NC 27626-0525