

MURARI MOHAN RICE MILLS PVT. LTD.

OFFICE

Abhirampur, Bandh Road
(Near Durga Mandir)
Dist - Malda-732101

Phone No.

94340-32274

99326-85289

e-mail : mmricemills@gmail.com

FACTORY

Vill - Sapahara, PO.- Kandaran
PS.- Chanchal
Dist. - Malda-732139

Ref.....

Date.....

Form No. MGT-11

PROXY FORM

[Pursuant to Section 105(6) of the Companies Act, 2013 and Rule 19(3) of the Companies (Management and Administration) Rules, 2014]

CIN: U15312WB2009PTC137326

Name of the Company: Murari Mohan Rice Mills Private Limited

Registered Office: Golapatty Bandh Road, Malda, West Bengal, India, 732101

Name of Secured Creditor(s)	
Registered Address	
E-mail Id	

I/We being the Secured Creditor(s) of the above-named Company as on 31.03.2026 do hereby appoint the following:

1. Name: _____
Address: _____
E-mail Id: _____
Signature: _____, or failing him/her

2. Name: _____
Address: _____
E-mail Id: _____
Signature: _____

MURARI MOHAN RICE MILLS PVT. LTD.

OFFICE

Abhirampur, Bandh Road
(Near Durga Mandir)
Dist - Malda-732101

Phone No.

94340-32274

99326-85289

e-mail : mmricemills@gmail.com

FACTORY

Vill - Sapahara, PO.- Kandaran
PS.- Chanchal
Dist. - Malda-732139

Ref.....

Date.....

Form No. MGT-11

PROXY FORM

[Pursuant to Section 105(6) of the Companies Act, 2013 and Rule 19(3) of the Companies (Management and Administration) Rules, 2014]

CIN: U15312WB2009PTC137326

Name of the Company: Murari Mohan Rice Mills Private Limited

Registered Office: Golapatty Bandh Road, Malda, West Bengal, India, 732101

Name of Secured Creditor(s)	
Registered Address	
E-mail Id	

I/We being the Secured Creditor(s) of the above-named Company as on 31.03.2026 do hereby appoint the following:

1. Name: _____
Address: _____
E-mail Id: _____
Signature: _____, or failing him/her
2. Name: _____
Address: _____
E-mail Id: _____
Signature: _____

MURARI MOHAN RICE MILLS PVT. LTD.

OFFICE

Abhirampur, Bandh Road
(Near Durga Mandir)
Dist - Malda-732101

Phone No.

94340-32274
99326-85289

e-mail : mmricemills@gmail.com

FACTORY

Vill - Sapahara, PO.- Kandan
PS.- Chanchal
Dist. - Malda-732139

Ref.....

Date.....

Signed on this _____ day of _____, 2026.

Affix
Revenue
Stamp of
Re. 1/-

Signature of Secured Creditor: _____

Signature of **PROXY** Holder: _____

Note(s):

1. This form of **PROXY** in order to be effective should be duly completed and deposited at the Registered Office of the Company situated at Golapatty Bandh Road, Malda, West Bengal, India, 732101 **not less than 48 hours before** the commencement of the Meeting.
2. Alterations, if any, made in the Form of **PROXY** should be initialed.
3. In case of multiple **PROXIES**, the **PROXY** later in time shall be accepted.
4. Body Corporate would be required to deposit certified copies of Board/Custodial Resolutions/Power of Attorney in original, as the case may be, authorizing the individuals named therein, to attend and vote at the meeting on its behalf.
5. A **PROXY** shall prove his identity at the time of attending the Meeting.
6. Please affix revenue stamp not less than Re. 1/- before putting signature.
7. Undated **PROXY** form will NOT be considered valid.
8. Please complete all details including details of member(s) in above box before submission.
9. It is optional to indicate your preference. If you leave the "For" or "Against" column blank, your **PROXY** will be entitled to vote in the manner as he/she may deem appropriate.