



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

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SECRETARY OF STATE
CORPORATIONS
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Limited Liability Company Annual Report for the year: 2014

Filing period: September 1 - November 1

Filing Fee: \$50.00 *FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Limited Liability Company			
000165164		Forgotten Judaica LLC			
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island			
Michigan		Maker of handcrafted artisan Jewish ritual objects			
5. Principal Office Address		City	State	Zip	
51 Paine Avenue		Beverly	MA	01965	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Lisa Van Allsburg		President			
Street Address		City	State	Zip	
51 Paine Avenue		Beverly	MA	01965	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island This information is currently of record in 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				Date	
Lisa Van Allsburg <i>Lisa Van Allsburg</i>				04/29/2016	
Signature of Authorized Person					
<i>Lisa Van Allsburg</i>					

SIGN DOCUMENT HERE

FILED

MAY 26 2016

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