Office of the Secretary of State         Division Of Business Services         148 W. River Street         Providence RI 02904-2615         (401) 222-3040 <b>Limited Liability Company</b> Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-					
148 W. River Street Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2019         1. ID No.       001663039         2. Exact Name of the Limited Liability Company Forge Properties LLC         3. State of Formation         State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         \$31390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         PROPERTY MANAGEMENT AND PROPERTY HOLDING         5. Principal Office Address         No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:       PO BOX 100474 City or Town:       Cantact Title: No. and Street:	s s			ions Fee: \$50.00	
Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1 In recordance with RI CL. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (RI CL. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2019         1. ID No.       001663039         2. Exact Name of the Limited Liability Company Force Properties LLC         3. State of Formation         State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         \$31390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         PROPERTY MANAGEMENT AND PROPERTY HOLDING         5. Principal Office Address         No. and Street: <u>PO BOX 100474</u> City or Town:         Contact Title:       No. and Street: <u>PO BOX 100474</u> City or Town:         Contact Title:       No. and Street: <u>PO BOX 100474</u> City or Town:         Contact Title:       No. and Street: <u>PO BOX 100474</u> City or Town:         Contact Title:       No. and Street: <u>PO BOX 100474</u> City or Town:         Contact Title:       No. and Street: <u>PO BO</u>		Division Of Busine	ss Services		
(401) 222-3040         Limited Liability Company Maining or Participation of the Character of the Summary Failing or Participation of the Character of the Business Which is Actually Conducted in Rhode Island         PROPERTY MANAGEMENT AND PROPERTY HOLDING         Site: Pl         Annual Street: PO BOX 100474 City or Town: CRANSTON State: Ri Zip: 02910         Country: USA         Address of Each Manager of the Limited Liability Company and Name or Title of Contact Person:         Country: USA         1. ID No. 001663039         2. Exact Name of the Limited Liability Company Forge Properties LLC         3. State of Formation         State: RI         State: RI         2         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         PROPERTY MANAGEMENT AND PROPERTY HOLDING         5. Principal Office Address         No. and Street: PO BOX 100474         Contact Title:         No. and					
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Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(db), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-666(bcb)) is subject to a penalty fee of \$25.00         ANNUAL REPORT YEAR: 2019         1. ID No.       001663039         2. Exact Name of the Limited Liability Company Forge Properties LLC         3. State of Formation         State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531390         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island         PROPERTY MANAGEMENT AND PROPERTY HOLDING         5. Principal Office Address         No. and Street:       PO BOX 100474         City or Town:       CRANSTON         State: RI       Zip: 02910       Country: USA         6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:       Contact Name: Contact Title:         No. and Street:       PO BOX 100474       City or Town:       CRANSTON         State: RI       Zip: 02910       Country: USA         7. Name and Address of Each Manager o	HOPE	(401) 222-3	040		
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DO NOT LIST MEMBERS     Individual Name       Title     Individual Name	City or Town: <u>Ch</u>	<u>ANSTON</u> State: <u>I</u>	<u>xi</u> Zip: <u>02910</u>	Country: US	
			bility Company, if A	oplicable.	
First, Middle, Last, Suffix         Address, City or Town, State, Zip Code, Country	Title	Individual Name	Ac	ldress	
		First, Middle, Last, Suffix	Address, City or Towr	n, State, Zip Code, Country	
	8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>JOSEPH LAFORGE</u> <u>52 OAKLAND AVENUE</u> <u>CRANSTON</u>, <u>RI</u> <u>02910</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 4 Day of October, 2019 at 2:47:58 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By JOSEPH LAFORGE

Signature of Authorized Person

Form No. 632 Revised 09/07

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