	State of F Office of the S	Rhode Island Secretary of S		Fee: \$50.00	
		Business Servic	es		
		River Street RI 02904-261:	5		
HOPE		222-3040	,		
Limited Liability Comp Annual Report Filing Period: September 1 -					
In accordance with R.I.G.L. 7 to file its annual report within 16-66(b&c)) is subject to a p	thirty (30) days after the tir				
ANNUAL REPORT YEAR:	2020				
1. ID No. <u>001698609</u>					
2. Exact Name of the Limited Liability Company Forge Farm, L3C					
3. State of Formation					
State: <u>RI</u>					
	ARTIC	LE III			
Enter the six digit NAICS Co the list of codes <u>here.</u> More			s conducted by th	he entity. Download	
<u>712120</u>					
4. Brief Description of the	Character of the Busines	s Which is Act	ually Conducted	in Rhode Island	
PRESERVATION OF TH	E BIRTHPLACE OF RE	VOLUTIONA	RY WAR MAJ	OR GENERAL	
NATHANAEL GREENE	A				
HISTORIC 17TH CENTU CONSERVATION OF F		<u>DN RHODE IS</u>	LAND FAMILY	<u>Y FARM;</u>	
SPACE, AND WILDLIF	E SANCTUARY LAND;	AND CULTI	ATION OF KN	<u>NOWLEDGE,</u>	
EXPRESSION, AND EX THE HUMANITIES ANI					
5. Principal Office Addres	5				
No. and Street:536 PCCity or Town:WARY	OTOWOMUT ROAD VICK	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>USA</u>	
6. Mailing Address of Lim	ted Liability Company a	nd Name or Titl	e of Contact Per	rson:	
Contact Name: KATHERINE A. GREENE Contact Title:					
No. and Street: <u>536 P</u> City or Town: <u>WAR</u>	<u>OTOWOMUT RD</u> <u>NICK</u>	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>US</u>	
7. Name and Address of E DO NOT LIST MEMBER		ted Liability Co	ompany, if Appli	cable.	

Title	
-------	--

Individual Name First, Middle, Last, Suffix Address

Address, City or Town, State, Zip Code, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

KATHERINE GREENE 536 POTOWOMUT ROAD WARWICK, RI 02818

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

Signed this 30 Day of October, 2020 at 7:38:48 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 KATHERINE A GREENE

Signature of Authorized Person

Form No. 632 Revised 09/07

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