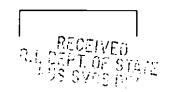
RI SOS Filing Number: 202330180690 Date: 3/8/2023 8:40:00 AM

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Articles of Amendment DOMESTIC Limited Liability Company

→ Filing Fee: \$50,00

Pursuant to the provisions of RIGL 2 amends its Articles of Organization a	7-16-12 the undersigned limited liability company hereby as follows:			
1. Entity ID Number:	The name of the limited liability company is:			
1753870	Spar Point Farm, LLC			
If the entity's name is changing, state the new name;				
	Check the box to indicate no change			
 If the principal office address of the entity is changing, complete the following section: 				
	Check the box to indicate no change			
5. If the period of duration is changi	ing, complete the following section: CHECK ONE BOX ONLY			
Perpetual (on-going)				
Date certain for dissolution	Check the box to indicate no change			
	ng, complete the following section: CHECK ONE BOX ONLY			
Partnership or				
A corporation or				
Disregarded as an entity separ	rate from its member(s) Check the box to indicate no change 🗹			
7. If the management structure is ch	nanging, complete the following section:			
The Limited Liability Company is to	be managed by: CHECK ONE BOX ONLY			
Its member(s) (If you have checked this box, skip to Section 7. DO NOT fill out the chart below.)				
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles of Amendment, state the name and address of each manager on the next page.)				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 8:40

MAR 0 \$ 2023 BY ML PJP W

FILED

	T				
MANAGER	ADDRESS				
			<u> </u>		
Check the box to indicate no change					
8. If adding or amending additiona	I provisions, complete the	following section:	-		
Section 8 of the Articles of O	rganization shall be a	mended to reflect the late	r effective date of April 1,		
2023.					
		Check th	e box to indicate no change		
9. As required by RIGL <u>7-16-67</u> , th	e entity has paid all fees a		e box to indicate no change		
 As required by RIGL 7-16-67, th Date when these Articles of Am 		nd taxes.	e box to indicate no change		
10. Date when these Articles of Am		nd taxes.	e box to indicate no change		
10. Date when these Articles of Am Date received (Upon filing)	nendment will be effective:	nd taxes. CHECK ONE BOX ONLY	e box to indicate no change		
10. Date when these Articles of Am	nendment will be effective:	nd taxes. CHECK ONE BOX ONLY	e box to indicate no change		
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a	nendment will be effective: st be no more than 90 days	CHECK ONE BOX ONLY from the date of filing)			
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus	nendment will be effective: st be no more than 90 days	ond taxes. CHECK ONE BOX ONLY from the date of filing) Inined these Articles of Amenda d herein are true and correct.			
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a accompanying attachments, and the Name of Authorized Person	nendment will be effective: st be no more than 90 days	check one box only from the date of filing) nined these Articles of Amenda d herein are true and correct. Street Address	nent, including any		
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a accompanying attachments, and th	nendment will be effective: st be no more than 90 days	ond taxes. CHECK ONE BOX ONLY from the date of filing) Inined these Articles of Amenda d herein are true and correct.	nent, including any		
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a accompanying attachments, and the Name of Authorized Person	nendment will be effective: st be no more than 90 days	check one box only from the date of filing) nined these Articles of Amenda d herein are true and correct. Street Address	nent, including any		
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a accompanying attachments, and the Name of Authorized Person Joseph Teja, Jr.	nendment will be effective: st be no more than 90 days and affirm that I have exan nat all statements contained	check one box only from the date of filing) inined these Articles of Amendia d herein are true and correct. Street Address 784 Centre Street Apt#	nent, including any		
10. Date when these Articles of Am Date received (Upon filing) Later effective date (Date mus Under penalty of perjury, I declare a accompanying attachments, and th Name of Authorized Person Joseph Teja, Jr. City/Town	nendment will be effective: st be no more than 90 days	check one box only from the date of filing) inined these Articles of Amenda d herein are true and correct. Street Address 784 Centre Street Apt#	nent, including any		

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

March 08, 2023 08:40 AM

Gregg M. Amore Secretary of State

Treg M. Coure

