



**State of Rhode Island
Office of the Secretary of State**

Fee: \$10.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Articles of Amendment**

(Section 7-6-40 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the corporation is Passive House Rhode Island

If the entity's name is changing, state the new name: Passive House Rhode Island

ARTICLE II

If the corporate duration is changing, so state: X Perpetual

If the corporate purpose is changing, so state:

PASSIVE HOUSE RHODE ISLAND IS ORGANIZED AND OPERATED EXCLUSIVELY FOR
SCIENTIFIC,
EDUCATIONAL AND CHARITABLE PURPOSES IN ACCORD WITH SEC. 501(C)(3) OF
THE
INTERNAL
REVENUE CODE OF 1986 (OR A CORRESPONDING PROVISION OF ANY FUTURE
UNITED
STATES INTERNAL
REVENUE LAW, REFERRED TO BELOW AS THE "CODE"). MORE SPECIFICALLY,
ORGANIZATION IS
ORGANIZED TO OFFER SERVICES AND PROGRAMS FOR PROFESSIONALS WHO
DESIGN,
DEVELOP AND
CONSTRUCT BUILDINGS AND RESIDENCES THAT ARE CONSISTENT WITH THE
CLIMATE-
SPECIFIC
STANDARDS FOR PASSIVE BUILDING CONSTRUCTION AS ESTABLISHED.

UPON DISSOLUTION OF THE ORGANIZATION, THE PASSIVE HOUSE RHODE
ISLAND BOARD OF DIRECTORS SHALL, AFTER
PAYING OR MAKING PROVISION FOR THE PAYMENT OF ALL OF THE LIABILITIES
OF THE ORGANIZATION, DISTRIBUTE ALL
OF THE ASSETS OF THE ORGANIZATION TO SUCH ORGANIZATION OR
ORGANIZATIONS ORGANIZED AND OPERATED
EXCLUSIVELY FOR SCIENTIFIC, EDUCATIONAL AND CHARITABLE PURPOSES, AS

SHALL AT THE TIME QUALIFY AS AN
EXEMPT ORGANIZATION OR ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE
CODE, AS THE PASSIVE HOUSE RHODE
ISLAND BOARD OF DIRECTORS SHALL DETERMINE. ANY SUCH ASSETS NOT SO
DISPOSED OF SHALL BE DISPOSED OF BY THE
APPROPRIATE COURT OF LAW OF THE COUNTY IN WHICH THE PRINCIPAL OFFICE
OF THE ORGANIZATION IS THEN LOCATED,
EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH ORGANIZATION OR
ORGANIZATIONS, AS SAID COURT SHALL DETERMINE,
WHICH ARE ORGANIZED AND OPERATED EXCLUSIVELY FOR EXEMPT PURPOSES.

If there is a change in the number of directors, modify this section:

The number of directors constituting the Board of Directors of the Corporation is

and the names and addresses of the persons who are to serve as the directors are:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
INCORPORATOR	TRISTAN GRANT	501 RIVER AVE PROVIDENCE, RI 02908 USA
DIRECTOR	ELIZABETH CAMPBELL	151 COLONIAL ROAD PROVIDENCE, RI 02906 USA
DIRECTOR	JILLIAN COFFIN	165 LAFAYETTE ST PAWTUCKET, RI 02860 USA
DIRECTOR	TRISTAN GRANT	501 RIVER AVE PROVIDENCE, RI 02908 USA

If there are any other provisions to be amended, so state:

ARTICLE III

The Amendment was adopted in the following manner:

(check one box only)

___ The amendment was adopted at a meeting of members held on , at which meeting a quorum was present, and the amendment received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.

☒ The amendment was adopted by a consent in writing on 6/16/2025 , signed by all members entitled to vote with respect thereto.

___ The amendment was adopted at a meeting of the Board of Directors held on , and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.

ARTICLE IV

Date when amendment is to become effective 6/17/2025
(not prior to, nor more than 30 days after, the filing of these Articles of Amendment)

Signed this 17 Day of June, 2025 at 8:20:48 AM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By ELIZABETH CAMPBELL

☒ President or ☐ Vice President (check one)

AND

By TRISTAN GRANT

☒ Secretary or ☐ Assistant Secretary (check one)

Form No. 201
Revised 09/07

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State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

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:

June 17, 2025 08:20 AM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore
Secretary of State

