Filing Fee: \$50.00

## State of Rhode Island and Providence Plantations CERTIFICATE OF LIMITED PARTNERSHIP

Be it Enough to All by these Presents, That we, the undersigned, desiring to form a limited partnership under and by virtue of the powers conferred by Chapter 7-13 of the General Laws of Rhode Island, do execute the following Certificate of Limited Partnership:

First. The name of the partnership shall be Amalgamated Financial Group	
XX, L.P.	
	conducted by the partnership shall be real
estate.	
THIRD. The address of the specified of	fice of the partnership is 1414 Atwood
Avenue, Johnston, Rhode Island 02919 (NO. STREET, CITY OR TOWN IN RHODE ISLAND)	
	of process at such address is Alfred
Carpionato	······································
	and the second
FOURTH. The names and residences of	fall members of the partnership, both general and
limited, are as respectively designated. (Use Sche	dule A if space below is not sufficient.)
General Partners	Residence (NO. STREET, CITY OR TOWN, STATE)
Amalgamated Development II, Inc	1414 Atwood Ave., Johnston, RI 02919
Limited Partners	Residence (NO. STREET, CITY OR TOWN, STATE)
Alfred Carpionato	1414 Atwood Ave., Johnston, RI 02919

FIFTH. The following items listed immediately below shall be the contribution of each partner. (Use Schedule A if space below is not sufficient.) Name of Partner Cash Property other than Cash Value Amalgamated Development II, Inc. \$50.00 Alfred Carpionato \$100.00 and the items listed immediately below shall be the future contributions, agreed to be made by each partner. (Use Schedule A if space below is not sufficient.) Name of Partner Cash Property other than Cash Value None Sixth. The times at which or the events on the happening of which said future contributions shall be made shall be Not Applicable SEVENTH. Provisions (if any) for the power of a limited partner to grant the right to become a limited partner to an assignee of any part of his partnership interest, and the terms and conditions of the power. upon the consent of the General Partner 

(Use Schedule A if space below is not sufficient.) Not Applicable. Rec'd & Filed In Cestimony Ahereof, We have hereunto set our hands and stated our residences this...... day of October A.D. 19 90 Residence (NO STREET, CITY OR TOWN, STATE) Name Amalgamated Development II, Inc. 1414 Atwood Ave., Johnston, RI 02919 President 1414 Atwood Ave., Johnston, RI 02919

THIRTEENTH. Other matters as the partners have determined to include herein