



State of Rhode Island
Department of State - Business Services Division

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Certificate of Amendment
 DOMESTIC Limited Partnership

→ Filing Fee: \$50.00

The undersigned, desiring to amend the Certificate of Limited Partnership under and by virtue of the power conferred by RIGL 7-13-9, hereby executes the following Certificate of Amendment to the Certificate of Limited Partnership:

1. Entity ID Number: 49800	2. The name of the partnership is: THE FOUNDRY ASSOCIATES LP.
3. If the entity's name is changing, state the new name: <div style="text-align: right;">Check the box to indicate no change <input checked="" type="checkbox"/></div>	
4. The date of filing of the Certificate of Limited Partnership is: 9-30-2022	
5. If the specified office address is changing complete the following section: 235 PROMENADE ST SUITE 100 PROVIDENCE RI 02908 <div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>	
6. If the mailing address is changing complete the following section: 235 PROMENADE ST SUITE 100 PROVIDENCE, RI 02908 <div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>	
7. If there is a change in the general partners complete the following section: *List ALL general partners as of this amendment	
NAME	ADDRESS
Check the box to indicate an attachment <input checked="" type="checkbox"/>	Check the box to indicate no change <input type="checkbox"/>

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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8. If adding or amending additional provisions, complete the following section:

Check the box to indicate an attachment Check the box to indicate no change

9. As required by RIGL 7-13-69, the partnership has paid all fees and taxes.

10. This Certificate of Amendment is signed by at least one general partner and, if applicable, by each other general partner designated herein as a new general partner.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Amendment to the Certificate of Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Limited Partnership	
The Foundry Associates LP	
Signature of General Partner	Date
Thomas Guerin	10/4/2022
Signature of General Partner	Date
Signature of General Partner	Date
Signature of General Partner	Date
Signature of General Partner	Date

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



State of Rhode Island
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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:

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A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

