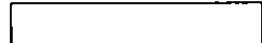




State of Rhode Island
Department of State - Business Services Division

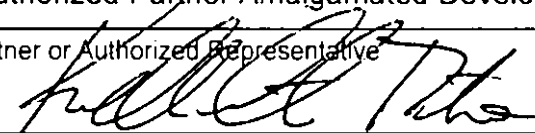


Annual Report for the year: 2024
Partnership (LP, LLP, LLLP)

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP
REC'D 4/30/24 4:00 PM
24 APR 30 PM 2:24:18



1. Entity ID Number 000050239	2. Exact Name of the Partnership Amalgamated Financial Group IX, L.P.		
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island Ownership and development of real estate		
5. State of Formation RI			
6. Principal Office Address 1414 Atwood Avenue	City Johnston	State RI	Zip 02919
7. The name and business address of each general partner or one or more partner(s) <i>LP and LLLP only: an amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign).</i>			
PARTNER	BUSINESS ADDRESS		
Amalgamated Development III	1414 Atwood Avenue, Johnston RI 02919		
8. Under penalty of perjury, I declare and affirm that I have examined this report, and that all statements contained herein are true and correct.			
Name of General Partner or Authorized Representative Kelly Coates CEO/Authorized Partner Amalgamated Development III		Date 04/19/2024	
Signature of General Partner or Authorized Representative 			

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