



## Instructions for Filing

### Certificate of Amendment to Application for Registration of a Foreign Limited Partnership

[Section 7-13-52](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL [38-2-1](#), et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

**This legal document should be typed. All illegible documents will be REJECTED.**

#### How to complete the form:

1. List the partnership's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the partnership. The entity name can be verified through our [Corporate Database](#).
3. List the date the RI Department of State issued the Certificate of Registration. This date can be verified through our [Corporate Database](#).
4. If the entity's name has changed, state the new name. You may check [name availability](#) on our website. If the name is not available in Rhode Island complete 3a. If there is no change to the entity name, check the box to indicate no change.
- 4a. If you are proposing a different name for transacting business in Rhode Island, complete the section.
5. If the entity's purpose is changing, so state. If there is no change to the purpose, check the box to indicate no change.
6. If the entity's address required to be maintained in the state or country of its organization has changed, so state. If there is no change to the required address, check the box to indicate no change.
7. If the entity's street address where the records of the limited partners are kept has changed, so state. If there is no change to the mailing office address, check the box to indicate no change.
8. If the entity's mailing address has changed, so state. If there is no change to the mailing address, check the box to indicate no change.
9. If the general partners are changing, so state. If there is no change to the partners, check the box to indicate no change.
10. If the entity's additional provisions are changing, so state. If there are not any provisional changes, check the box to indicate no change.
11. The entity has paid all fees and taxes.
12. Except as herein modified, the original Application for Registration continues in full force and effect and is hereby confirmed, ratified and incorporated by reference into this Application for Amended Application for Registration of a Foreign Limited Partnership.
13. **ONE** General Partner **MUST** sign and date the form.

#### How to pay the filing fee:

The filing fee is \$50, payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

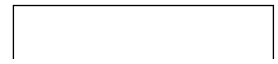
#### How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will **NOT** result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "View PDF" to view and print the record

#### How to maintain your status:

Every entity registered with the RI Department of State - Business Services Division may have filing requirements with the [Rhode Island Division of Taxation](#), even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our [website](#) for further information.



# Certificate of Amendment to Application for Registration

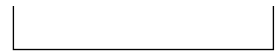
FOREIGN Limited Partnership

→ Filing Fee: \$50.00

STAMP

FOR SECRETARY OF STATE USE ONLY

Pursuant to the provisions of RIGL [7-13-52](#), the undersigned foreign limited partnership hereby submits the following Certificate of Amendment:



1. Entity ID Number:	2. The name of the partnership is:
3. A Certificate of Registration was issued to the limited partnership by the RI Department of State, authorizing it to conduct affairs in Rhode Island on:	
4. If the entity's name has changed, state the new name:  <div style="text-align: right;">Check the box to indicate no change</div>	
4a. The entity's name, if different, under which it proposed to register and transact business in Rhode Island is:	
5. If the entity's purpose is changing complete the following section: <i>*The new purpose should include ALL activity to be transacted in the State of Rhode Island.</i>          <div style="text-align: right;">Check the box to indicate an attachment <span style="margin-left: 200px;">Check the box to indicate no change</span></div>	
6. If the required address of the office to be maintained in the state or country of its organization has changed, complete the following section:          <div style="text-align: right;">Check the box to indicate no change</div>	
7. If the address of the office at which is kept a list of the names and addresses of the limited partners and their capital contributions has changed, complete the following section:          <div style="text-align: right;">Check the box to indicate no change</div>	

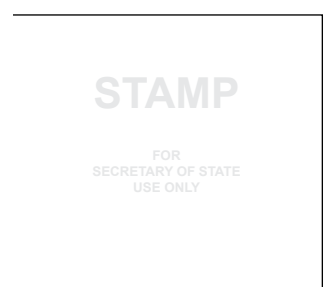
**MAIL TO:**

**Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

**Phone:** (401) 222-3040

**Website:** www.sos.ri.gov



STAMP

FOR SECRETARY OF STATE USE ONLY

8. If the mailing address has changed complete the following section:

Check the box to indicate no change

9. 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 Check the box to indicate no change

10. If additional provisions have been added or amended, complete the following section:

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

11. As required by RIGL [7-13-69](#), the partnership has paid all fees and taxes.

12. Except as herein modified, the original Application for Registration continues in full force and effect and is hereby confirmed, ratified and incorporated by reference into this Certificate of Amendment to the Application for Registration.

*Under penalty of perjury, I declare and affirm that I have examined this Certificate of Amendment to Application for Registration of a Foreign Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.*

Print or Type Exact Name of Limited Partnership

Print or Type Name of General Partner	Date
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Signature of General Partner



## Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. All fields are REQUIRED.

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: