N23000003498

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Be the Rainbow Inc.	
N23000003489 DOCUMENT NUMBER:	•
The enclosed Articles of Amendment and fee are submitted fo	r filing.
Please return all correspondence concerning this matter to the	following:
MerryBeth Burgess	
(Name o	of Contact Person)
Be the Rainbow Inc.	
(Fir	m/ Company)
19 Parkway Street	
	(Address)
Cocoa Fl, 32922	
(City/ St	ate and Zip Code)
betherainbowfl@gmail.com	
E-mail address: (to be used for futu	re annual report notification)
For further information concerning this matter, please call:	
MerryBeth Burgess	404 683-0560 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Department of State:
	ied Copy Certificate of Status tional copy is Certified Copy

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Be the Rainbow Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N23000003489 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A N/A C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) N/A N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent: N/A (Florida street address) New Registered Office Address: N/A (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change × Add	<u>T</u>	Peter Hwang	5366 Goldenwood Drive Orlando FL 32817
Remove 2) × Change Add	<u>v</u>	Amy Elkavich	19 Parkway Street Cocoa FI 32922
Remove 3) × Change Add Remove	<u>v</u>	Siobhan Carr	289 South Lauren Court Merritt Island FL 32952
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee)		cles, enter change(s) here: (Be specific)	
N/A			

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N/A		
N/A		
		<u> </u>
· · · · · · · · · · · · · · · · · · ·		
The date of each amendment(s) add date this document was signed.	loption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendme	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory fili partment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of voil.	otes cast for the amendment(s)

Dated	5-26-2023
ignatur	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MerryBeth Burgess
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.