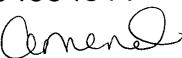
P11000044931

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S/11e/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Rainbow Raising Inc.				
DOCUMENT NUMBER: P11000044931				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Elizabeth Lytle Name of Contact Person				
Rainbow Raising Inc.				
Firm/ Company 2021 1st Avenue N.				
St. Petersburg, FL 33713				
City/ State and Zip Code				
valemassi@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Elizabeth Lytle at (727) 417-9594				
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:				
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

Articles of Amendment Articles of Incorporation



Rainbow Raising Inc.

2012 MAY 11 PM 4:01

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000044931

1 11000077331	TALLAI
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation: N/A	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
· • • • • • • • • • • • • • • • • • • •	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2021 1st Avenue N.
· · · · · · · · · · · · · · · · · · ·	St. Petersburg, FL
	33713
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent N/A	
	treet address)
New Registered Office Address: N/A	, Florida N/A
(City	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	
A/A	
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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X _ Change Add	DIR	VALERIA, FRAGOLA	VIA DANTE ALIGHIERI 7 CERANOVA, 27010
Remove			ITALIA
2) X Change	PRES	VALERIA, FRAGOLA	VIA DANTE ALIGHIERI 7 CERANOVA, 27010
Add Remove			ITALIA
3) _x Change Add Remove	VP	VALERIA, FRAGOLA	VIA DANTE ALIGHIERI 7 CERANOVA, 27010 ITALIA
Remove		• .	
4) X Change Add Remove	SEC	VALERIA, FRAGOLA	VIA DANTE ALIGHIERI 7 CERANOVA, 27010 ITALIA
5)X _ Change Add Remove	TREA	VALERIA, FRAGOLA	VIA DANTE ALIGHIERI 7 CERANOVA, 27010 ITALIA
6) Change Add Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
•	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u>/A</u>	
·	

The date of each amendment(s)) adoption: 05/08/2012
Effective date <u>if applicable</u> :	N/A
<u> wpp</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes or	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(101111g g, unp)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated_05/08	8/2012
Signature	Valeria Tragola
	a director, president or other officer – if directors or officers have not been
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court
appo	ointed fiduciary by that fiduciary)
	VALERIA FRAGOLA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)