P150000 12 506

(Re	equestor's Name)	.
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
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Global Tax Services, Inc.

TO: Amendment Sect Division of Corp		COVER LETTER	Molee for \$ 3 "Flor.do	out check 55 to Department o
NAME OF CORPO	RATION: RAINBOW RECO	VERY & WELLNESS INC	5+ate#	and
DOCUMENT NUMI	BER: P15000012506		& mail	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	•	
Please return all corre	spondence concerning this mat	tter to the following:		
	RACHEL GREENBERG			
		Name of Contact Person		
	828 NE 17TH AND WAY	Firm/ Company Vn		
GRE	ENBERGIRACHEL@AOL.C			
Rachel	n concerning this matter, pleas Creenbe of Contact Person	at (954) 55 Area Code & Daytin coayable to the Florida Department of St US43.75 Filing Fee & US52.50 Certified Copy Certification (Additional copy is Certification)	Telephone Number onte: Filing Fee onte of Status of Copy onal Copy	
Ma Am	Iling Address	Street Address Amendment Section	,	

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RAINBOW RECOVERY & WELLNESS INC

(Name of Cornoration as curren	tly filed with the Florida Dept, of State)
P15000012506	
(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 amendme
A. If amending name, enter the new name of the corporation:	
	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	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1830 SE 4TH AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	FT LAUDERDALE, FL 33316
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1830 SE 4TH AVE
	FT LAUDERDALE, FL 33316
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address.	
Name of New Registered Agent	
(Florida s	irect address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
St	Baritan da Laur (Calamaia
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.

X Change	<u>PT</u>	John De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
_X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		<u>Name</u>	Address
I) X Change	P	_	GREENBERG, RACHEL	828 NE 17TH WAY
Add				FT LAUDERDALE, FL 33304
Remove				
2) Change				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	cles, enter change(s) here: (Be specific)
NA	
10/12	
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	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	pange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
If an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an adment it not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an adment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an it not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an it not contained in the amendment itself:

The date of each amendment(s) adop	dion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, timent of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendient for approval.	fment(s)
☐ The amendment(s) was/were appro- must be separately provided for ea	ved by the shareholders through voting groups. The following sch voting group entitled to vote separately on the amendment(statement s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareho	lder
JULY 9, 2019		
DatedSignature	whel They	
selected, I	ctor, president or other officer - if directors or officers have no by an incorporator - if in the hands of a receiver, trustee, or oth fiduciary by that fiduciary)	
R.	ACHEL GREENBERG	
_	(Typed or printed name of person signing)	
PF	ESIDENT	
-	(Title of person signing)	