P96000003204

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Athens Cor	nsulting, Inc.
DOCUMENT NUMBER: P96000003204	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Holly M. Nikolich, Es	sq .
	Name of Contact Person
Mika & Nikolich, P.A	
	Firm/ Company
1330 Main Street, 2nd	• •
_	Address
Sarasota, FL 34236	
	City/ State and Zip Code
holly@mnfirm.com	
 -	to be used for future annual report notification)
For further information concerning this matter Holly M. Nikolich, Esq.	r, please call: at () 345-7941
Name of Contact Person	at (
Enclosed is a check for the following amount	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St	U
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 266† Executive Center Circle

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation

2018 DEC 26 AM 11:21

SEGRETAL OF STATE TALL AHASSEE, FL

ATHENS CONSULTING, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P96000003204 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: RAINBOW INVESTMENT FLORIDA CORP. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) _, Florida__ New Registered Office Address: ___ (City) 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	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>V</u> <u>Mike Jones</u>				
X Add	SV Sally Smith				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change					
Add					
Remove				 	
2) Change		_			
Add					
Remove					
3)Change					
Add					
Remove					
4) Change					
Add			-		
Кетюче					
5) Change		_			
Add					
Remove					
6) Change	***	_			
Add					
Remove					

	(Be specific)		
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an amendment provides for an exch	nge, reclassification, or cancell	ation of issued shares,	
provisions for implementing the amer	nge, reclassification, or cancell Iment if not contained in the a	ation of issued shares, nendment itself:	
an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	nge, reclassification, or cancell Iment if not contained in the a	ation of issued shares, nendment itself:	
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an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	nge, reclassification, or cancell	ation of issued shares, nendment itself:	

The date of each amendment(s) add date this document was signed.	ption:, if other than
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this ble document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
☐ The amendment(s) was/were appromust be separately provided for e	wed by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	ed by the incorporators without shareholder action and shareholder
Dated	12. 2018 L:-V
Signature_	Li-VL
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
Į.	ONG LI THOMALLA
_	(Typed or printed name of person signing)
S	OLE SHAREHOLDER AND PRESIDENT
_	(Title of person signing)

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