RI SOS Filing Number: 202576664190 Date: 6/26/2025 1:52:00 PM

State of Rhode Island Department of Sta	d ate - Business Services Division	
Articles of Amendmei DOMESTIC Business Corporation		
→ Filing Fee: \$50.00 (\$210 fo	or an increase in authorized shares)	
Pursuant to the provisions of RIC Articles of Amendment to its Arti	GL 7-1.2-905, the undersigned corporation adopts the cles of Incorporation:	ne following
1. Entity ID Number:	2. The name of the corporation is:	
61266	Me Too Preschool, Inc	
by the board of directors of the adopted the following amendment	coration (or, where no shares have been issued corporation) in the manner prescribed by RIGL 7-1, tent(s) to the Articles of Incorporation on:	2
4. If the entity's name is changi state the new name:		Charle the house in disease
5. If the total authorized shares	are changing complete the following section: *List i	Check the box to indicate no change
Total Authorized Share (Number of Shares) N/A	Class of Stock	Par Value Per Share
Total Authorized Shares (Number of Shares) N/A If you desire, you may include a including voting rights, and the		Par Value Per Share
Total Authorized Shares (Number of Shares) N/A If you desire, you may include a	a statement of all or any of the designations and the qualifications, limitations, or restrictions of them wh	Par Value Per Share
If you desire, you may include a including voting rights, and the RIGL 7-1.2. State any provisions here (optin N/A	a statement of all or any of the designations and the qualifications, limitations, or restrictions of them whonal): Characteristic Character	Par Value Per Share power, preferences, and rights, ich are permitted by the provisions of eck the box to indicate an attachment
If you desire, you may include a including voting rights, and the RIGL 7-1.2. State any provisions here (option N/A	a statement of all or any of the designations and the qualifications, limitations, or restrictions of them whonal):	Par Value Per Share power, preferences, and rights, ich are permitted by the provisions of eck the box to indicate an attachment

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2616 Phone: (401) 222-3040

Website: www.sos.ri.gov

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FORM 101- Revised: 12/2023

7. If the entity's purpose is changing complete the following section: *The new purpose should transacted in the State of Rhode Island. NVA	nalude ALL activity to be	
Check the box to indicate an attachment Check the	box to indicate no change	
8. If adding or amending additional provisions, complete the following section: N/A	See to midicate to change	
Check the box to indicate an attachment Check the	box to indicate no change	
9. As required by RIGL 7-1.2-105, the entity has paid all fees and taxes.		
10. Date when these Articles of Amendment will be effective: CHECK ONE BOX ONLY		
✓ Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing)		
 Under penalty of perjury, I declare and affirm that I have exemined these Articles of Ameri accompanying attachments, and that all statements contained herein are true and correct. 	dment, including any	
Type or Print Name of Authorized Officer of the Corporation	Date	
Barbera A Testa, President	6-18/25	
Signature of Authorized Officer of the Corporation Barbar A. Tests		

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

June 26, 2025 01:52 PM

Gregg M. Amore

Tregs M. Coure



