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COVER LETTER

TO: Amendment Section Division of Corporations

SREEMETH,USA INC NAME OF CORPORATION:			
N16000000116 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for fili	ing.		
Please return all correspondence concerning this matter to the follo	owing:		
GOVINDARAJU RUDRAPATNA			
(Name of Co	ontact Pers	on)	
RELIANCE CONSULTING, LLC			
(Firm/ C	Company)		
13940 N.DALE MABRY			
(Ade	dress)		
TAMPA,FL-33618			
(City/ State a	and Zip Co	de)	
RAJU@RELIANCECPA.COM			
E-mail address: (to be used for future an	nnual repor	t notification	
For further information concerning this matter, please call:			
GOVINDARAJU RUDRAPATNA	8 at	13	931-7258
(Name of Contact Person)	(/	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the l	Florida De	partment of	State:
Sas Filing Fee Sas Status Certificate of Status (Additional enclosed)	Copy al copy is	Certifi Certifi	O Filing Fee leate of Status led Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis Clifto 2661	t Address ndment Section of Corpo on Building Executive C hassee, FL 3	enter Circle

Articles of Amendment to Articles of Incorporation of

SREEMETH, USA INC (Name of Corporation as currently filed with the Florida Dept. of State) N16000000116 (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: SREEMATH, USA INC 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. 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) New Registered Office Address: Florida (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 D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			·
Remove			

attach additional sheets, if necessary).	(Be specific)	
		
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The	e date of each amer	dment(s) adoption:	, if other than the
date	this document was	signed.	
Eff	ective date <u>if appli</u>	able:	
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will te on the Department of State's records.	not be listed as the
Ad	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	There are no memi adopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	01/07/2016	
	Signature	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)	
		GOVINDARAJU RUDRAPATNA	
		(Typed or printed name of person signing)	
		DIRECTOR	
		(Title of person signing)	