(Red	questor's Name)	· · · · · ·
(Add	iress)	<u> </u>
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700261647267

06/25/14--01009--013 \*\*43.75

JUL 1 4 2014 T. CARTER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Security Mai	nagement Innovation	s, Inc.
DOCUMENT NUMBER: P05	000091743	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Alex Bocarand	а	
	Name of Contact Person	
Security Mana	gement Innovation	ons, Inc.
•	Firm/ Company	
7955 NW 12th Street, Suite 429		
Address		
Miami, Florida 33126		
City/ State and Zip Code		
abocaranda@smisecurity.net		
E-mail address: (to be used for future annual report notification)		
		•
For further information concerning this matter, pleas	se call:	
Alex Bocaranda	3059	86-1962
Name of Contact Person		Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Departmen	nt of State:
S35 Filing Fee  S48.78 Filing Fee Genificate of Status	Certified Copy (Additional copy is enclosed) (	552.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
Mailing Address	Street Addr	<u>ess</u>
Amendment Section	Amendment	Section

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

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

**Articles of Amendment Articles of Incorporation** 



14 JUN 25 ATTH: 35

## Security Management Innovations, Inc.

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

P05000091743	<u> </u>
	/D:

amendment(s) to

(Documen	t Number of Corporation (if I	mown)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation ac	lopts the following amendme
A. If amending name, enter the new na	me of the corporation:		m
name must be distinguishable and cont. "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional associated."	ation "Corp," "Inc," or "C	o". A professional corpora	
B. Enter new principal office address, i (Principal office address MUST BE A ST		Same as filed - n	o change
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	<u>cable:</u> <u>DFFICE BOX</u> )	Same as filed- no	change
D. If amending the registered agent and new registered agent and/or the new	d/or registered office addre v registered office address:	ss in Florida, enter the nan	ne of the
Name of New Registered Agent	Same as filed - no	change	
	(Florida stree	t address)	
New Registered Office Address:		, Florida	
New Registered Agent's Signature, if ch	(City)  nanging Registered Agent:		(Zip Code)
I hereby accept the appointment as registe	ered agent. I am familiar wi	th and accept the ohligation	s of the position.
Sig	nature of New Registered Ag	ent, 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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	. <u>Addres</u> s
1) Change	VP	ITKIN, SCOTT E	7955 NW 12 St
Add			#429
Remove			Miami, FI 33126
2) Change			
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	٠.		
Add			
Remove			
6) Change		_	
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	•
Person being removed is no longer associated with Security Management	Innovations
nc., as an employee, Director, Shareholder or otherwise.	
·	
	•
If an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself:	<u>28.</u>
(if not applicable, indicate N/A)	
	<del></del>
,	

date this document was signed.	option:	, ii other than th
Effective date if applicable:	06/20/2014	
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adoraction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	oted by the incorporators without shareholder action and shareholder	
Dated	6/20/14	
	rector, 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 of futuciary by that fiduciary)	
-	ALEX BOZARANDA	
	(Typed or printed name of person signing)	
-	(Title of person signing)	_
	(Title of person signing)	