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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SMART TECH	NOLOGY USA INC
DOCUMENT NUMBER: P10000006776	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
MARIA VICTORIA RAN	MIREZ
	Name of Contact Person
SMART TECHNOLOGY	USA
	Firm/ Company
9969 SW 142 AVE	
	Address
MIAMI, FL 33186	
- · · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code
VICTORIAR30@SMARTTEC	HUSA COM
_	e used for future annual report notification)
For further information concerning this matter, p	lease call.
MARIA RAMIREZ	at ( <sup>786</sup> ) 5978221
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
\$35 Filing Fee Sertificate of Status	
Mailing 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

SI	1 A	RT	TFC'	HN	$\Omega$	OGY	A 211	INC
211	11.	71/1	1111	11.	$\sim$ L	-100	USA	1111

(Name o	f Corporation as curre	ntly filed with the Florida Dept. of State)	·
P10000006776			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
	ation "Corp," "Inc," or	tion," "company," or "incorporated" or the "Co". A professional corporation name mu "P.A."	abbreviation
P. Enter new principal office address:	if annlianhla.	N/A	
B. Enter new principal office address, (Principal office address MUST BE A ST			
C. Enter new mailing address, if appli	cable:	N/A	
(Mailing address MAY BE A POST (	OFFICE BOX)	IVA	
			2 937
D. If any discount of the second of the seco	16		3
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	MARIA VICTORIA RA	AMIREZ	φ
	9969 SW 142 AVE		<b></b>
	(Florida	street address)	
New Registered Office Address:	MIAMI	FLOR Florida	IDA
The residence of the same.		, <u></u>	ip Code)
		To the second se	3/8/0
New Registered Agent's Signature, if c	hanging Dagi <b>l</b> towal Aga	<b>-</b>	
I hereby accept the appointment as regist	ered agent. // am familia	m: ir with and accept the obligations of the position	n.
	//		
	k/		
	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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JOSE MANUEL IBARRA	9969 SW 142 AVE
Add X Remove			MIAMI, FL 33186
2) Change Add		<u> </u>	
Remove			
Add			
4) Change		<del></del>	
Add Remove			
5) Change Add			
Remove			
6) Change			
Add Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)
N/A
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

The date of each amendmen date this document was signed		, if other than the
,	06/01/2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendmenter sufficient for approval.	ent(s)
	ere approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	tement
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder	
06/01 Dated Signature (I s	By a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other exprointed fiduciary by that fiduciary)	
	MARIA VICTORIA RAMIREZ	4-0-1
	(Typed or printed name of person signing)	
	(Title of person signing)	<del></del>