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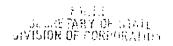
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N: Unique Locksmiths	, Inc.	
	P1300062030		
The enclosed Articles of Am	endment and fee are sub	omitted for filing.	
Please return all corresponde	nce concerning this mat	ter to the following:	
Yossi	Attias		
		Name of Contact Person	1
Uniqu	e Locksmiths		
		Firm/ Company	
110 N	E 57th St		
	· · · · · · · · · · · · · · · · · · ·	Address	
Oakla	nd Park, FL 33334		
		City/ State and Zip Code	2
Moteks 1@1	notmail.com		
_		ed for future annual report	notification)
For further information conc	erning this matter, pleas	e call:	
Yossi Attias		at (305-4475
Name of Cor	tact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division of P.O. Box	ent Section of Corporations	Ameno Divisio Cliftor	Address dment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2016 OCT -4 AM 8: 10

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
Unique Locksmiths,Inc.	713000062030		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
	110 NE 57th St		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Oakland Park, FL 33334		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	110 NE 57th ST		
	Oakland Park, FL 33334		
D. If amending the registered agent and/or registered office ad 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 Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position.		
Signature of Nev	v 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)	Title	Name	Address
1) Change	V	Tirzah Warshvsky	110 NE 57th St
X Add			Oakland Park, FL 33334
Remove			
2) Change			
Add			
Remove			
3) Change			- <u></u> -
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

aon additional sheets	additional Articles, of s, if necessary). (Be	specific)			
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rovisions for implen	vides for an exchange nenting the amendmo indicate N/A)	e, reclassification, ent if not containe	or cancellation of d in the amendme	issued shares, nt itself:	
(if not applicable,					
(if not applicable,					
(if not applicable,					
(if not applicable,					
(if not applicable,					
(if not applicable,					
(if not applicable,					

09/27/2016		
The date of each amendment(s) adoption:	, if ot	her than the
09/27/2016	Sound TARY	OF STATE
Effective date if applicable:	AVISION OF CO	
(no more than 90 days after amendment file date)	2016 OCT -4	AM 8: 10
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be	listed as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following star must be separately provided for each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by" (voting group)		
(voting group)		
The amendment(s) was/were adopted by the board of directors without shareholder action and sharely action was not required.		
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	er	
09/27/2016 Dated		
Signature	.	
(By a director, president or other officer – if directors or officers have not be selected, by an interporator – if in the hands of a receiver, trustee, or other	oeen court	
appointed figurately by that fiduciary)	COURT	
Yossi Attias		
(Typed or printed name of person signing)		
President		
(Title of person signing)		