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COVER LETTER

TO: Amendment Section

| Division of Corporations |
|---|
| NAME OF CORPORATION: Unique Image Inc DOCUMENT NUMBER: P190000 1053 |
| |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Kathryn M Lorenzini Name of Contact Person Unique mage Ffrm/ Company |
| 773 lolst Ave N |
| NAples 74 34108 City/ State and Zip Code |
| E-mail address: (to be used for future finual report notification) |
| For further information concerning this matter, please call: |
| Kathryn Lorenz In at (954), 295-814/ Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303 |

Articles of Amendment

10

Articles of Incorporation

of

| Unique (mage Inc | led with the Florida Dept. of State) |
|---|--|
| | led with the Florida Dept. of State) |
| P19000001053 | |
| (Document Number of Co | orporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation: | rida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A p "chartered," "professional association," or the abbreviation "P.A." | pany," or "incorporated" or the abbreviation "Corp.," |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | F11_ED |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: | in Florida, enter the name of the |
| Name of New Registered Agent | |
| (Florida street | ıddress) |
| New Registered Office Address: | , Florida |
| (Ci. | |
| 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. |
| X Kathy Josep Signature of New Right | tered Agent if changing |
| Check if applicable | marka albami A minishib |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc 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.

| X Change | PT John | Doe | |
|----------------------------|------------------------|------------------|-----------------------|
| X Remove | <u>V</u> <u>Mike</u> | lones | |
| X Add | <u>SV</u> <u>Sally</u> | Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | Sec Tuas | Ding M Lorenzini | 147 Course Ave SE |
| \mathcal{L}_{Add} | | | Palm Bay, 7L 32909 |
| Remove | | | <i>35</i> (0 / |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | · |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach <i>additional shee</i> | g additional Articles. ts, if necessary).— (B | le specific) | | | |
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| f an amendment prov provisions for impler | Ades for an exchang | e, reclassification, | <u>or cancellation o</u> ed in the amendo | I issued shares, | |
| (if not applicable, | indicate N/A) | ient ii not contain | ed in the amendi | iene teseir. | |
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| date this document was signe | d. |
|---|---|
| Effective date <u>if applicable</u> : | |
| | tno more than 90 days after amendment file date) |
| | this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/w action was not required. | ere adopted by the incorporators, or board of directors without shareholder action and shareholder |
| | ere adopted by the shareholders. The number of votes east for the amendment(s) vere sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s): |
| "The number of vot | es cast for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| Dated | Coch 26, 2021 Kochyn Jorenzin |
| (| By a director, president or other officer – is directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed tiduciary by that tiduciary) |
| | (Typed or printed name of person signing) |
| | (Typed or brinted name of person signing) |
| | (Title of person signing) |