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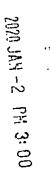
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COVER LETTER -

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TECHNICON CONS	SULTING GROUP INC				
DOCUMENT NUMBER: P06000149916					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter	er to the following:				
FREDERICK H. TINGBERG					
	Name of Contact Person				
TECHNICON CONSULTING	GROUP INC				
	Firm/ Company				
2005 SW AMARILLO LANE					
	Address				
PALM CITY, FL 34990					
· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code				
fdbaire@gmail.com					
	d for future annual report notification)				
	•				
For further information concerning this matter, please	call:				
FREDERICK H. TINGBERG	at (954) 931-4430				
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:					
\$35 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

TECHNICON CONSULTING GROUP, INC.

(Name of Corporation as currently filed with the Florida Dept, of State) P06000149916 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: N/A A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) Florida (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

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice I Executive Officer; CFO = President, Treasurer, Dire Changes should be noted	nd/or Director b if necessary) ector title by the for President; T= Trea Chief Financial C ector would be PT in the following m wes the corporatio	eing added: irst letter of the office title: asurer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more than D. ianner. Currently John Doe is listed as the line, Sally Smith is named the V and S. These is SV as an Add	director being removed and title, name, and rustee; $C = Chairman \ or \ Clerk; \ CEO = Chief a one title, list the first letter of each office held PST and Mike Jones is listed as the Y. There is thould be noted as John Doe, PT as a Change.$	
X Remove	<u>V</u> <u>Mike Jones</u>			
_X Add	SV Sally Smith			
Type of Action (Check One)	Title	Name	<u>Address</u>	
() Change	PD	YAHAIRA TINGBERG	2005 SW AMARILLO LANE	
X Add	7		PALM CITY, FL 34990	
Remoye		ر در در در می از در در این این در	-	
2) X Change	VTSD	FREDERICK H. TINGBERG	2005 SW AMARILLO LANE	
Add			PALM CITY, FL 34990	
Remoye	Principa]	YAHAIRA PERALTA		
3) Change			2005 SW AMARILLO LANE	
Add			PALM CITY, FL 34990	
X Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			· · · · · · · · · · · · · · · · · · ·	
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
		Page 2 of 4		
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets if necessary). (Be specific)				

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N/v	
i	
	
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)	
	
0/7	
	-
Dogs 3 of 4	
Page 3 of 4	
DECEMBER 1, 2019	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The date of each amendment(s) adoption: DECEMBER 1, 2019 Inter this document was signed.	, if other than the
DECEMBER 1 2019	
Ellective date if applicable:	
(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su		. The number of votes cast for the amendment(s)
		rs through voting groups. The following statement ed to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) wa	as/were sufficient for approval
by		,,
	(voting group)	
The amendment(s) was/were ade action was not required.	opted by the board of dire	ectors without shareholder action and shareholder
The amendment(s) was/were ade action was not required.	opted by the incorporator	s without shareholder action and shareholder
Dated_X	12-1-19	}
Signature X	SAM	
selecte		r officer – if directors or officers have not been fin the hands of a receiver, trustee, or other court ciary)
	FREDERICK H. TING	BERG
	(Typed or pri	inted name of person signing)
	VICE PRESIDENT, TR	REASURER, SECRETARY
	(Title of person signing)	