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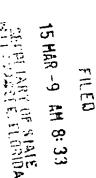
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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MAR 1 1 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: AVON G ER: 7990000		
The enclosed Articles o	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
	Michael	Hodgins.	n
_	1267 Su	Firm/ Company	ive
-	Port St	Address Lucie F	34953
		sed for future annual report	notification)
Michgel Name of	Contact Person	at (717) 635 -0603 de & Daytime Telephone Number
Enclosed is a check for t	the following amount made		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. B	ng Address diment Section on of Corporations fox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to

Articles o	f Incorporation		CF	
N , C	of			
Hrom Group Inc				77
(Name of Corporation as currently filed with t	he Florida Dept. of S	<u>tate</u>)	100	-9 A
V990000219 28			<u> </u>	丑
(Document Number of Corporation	on (if known)			جر 00
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Profit Co</i>	rporation adopts the fo	ollowing amendine	
A. If amending name, enter the new name of the corporation	<u>ı:</u>			
Ardon Group CAD	Services	Tr.	The new	,
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered." "professional association." or the abbreviati B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	or "Co". A professio	or incorporated or onal corporation name	the abbreviation must contain the	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add Name of New Registered Agent		iter the name of the		
				
(Florid	la street address)	 _		
New Registered Office Address:		. Florida		
	City)	(Zip Co	ode)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famil	iar with and accept the	e obligations of the pos	sition.	
Signature of New Register	eu Ageni, ij 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	V	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	**************************************		
Add			
Remove			

amending or addir tach <i>additional she</i>	ets, if necessary).	(Be specific,				
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an amendment pro	ovides for an exc	hange, reclassi	fication, or ca	ncellation of	issued shares	
<u>ovisions for imple</u>	ementing the amo	endment if not	contained in t	he amend <u>m</u> ei	nt itself:	-
(if not applicable	e, indicate N/A)					
<u> </u>						
						·
					··· <u>·</u>	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 3-3-15	
Signature (By Storrector, picStudent of Ordic Charle — It directors or officers have not been selected, by an incorporator — if iny of hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Michael Hodgins	
Michael Hodgins (Typed or printed name of person signing) President:	
(Title of person signing)	<u></u>