09:58:13 a.m. 04-13-2012

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Florida Department of State
Division of Corporations
Electronic Eiling Gever Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:

REGISTERED AGENT CHANGE EXCEL A&E DESIGN GROUP, INC.

Certificate of Status	0
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4/13/2012

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COVER LETTER

TO:	Amendment Section Division of Corporat	ions	
SUBJE	CT:	Excel A&E Design G	
5050		Name of Corpor	ation
DOCU	MENT NUMBER:_	F07000	004756
The end	losed Statement of C	hange of Registered Office/Age	ent and fee are submitted for filing.
Please r	eturn all corresponde	nce concerning this matter to th	e following:
٠	Josie	Sorensen	
	 -	Name of Contact	Person
		InCorp Service	
		Firm/Compa	ny
		2360 Corporate Circle	9 · Suite 400
		Address	
		Henderson, NV 89 City/State and Zip	074-7722 1 Code
		·	4
		L. Soodsmalexc	
	E-mail a	ddress: (to be used for future	annual report notification)
For furtl	her information conce	erning this matter, please call:	
Josle	Sorensen	at	(800) 246-2677
	Name of Cont	act Person	Area Code & Daytime Telephone Number
Enclose	d is a \$35.00 check m	ade payable to the Department	of State.
	Ame	ing Address: indment Section	Street Address: Amendment Section
		sion of Corporations	Division of Corporations
		Box 6327	Clifton Building
	f Wills	hassee, FL 32314	2661 Executive Center Circle

CR2E045 (8/05)

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Excel A&E Design Group, Inc.
2. The principal office address: 100 Camlot Drive, Fond Du Lac, WI 54935 US
3. The malling address (if different):
4. Date of incorporation/qualification: 09/24/2007 Document number: F07000004756
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): InCorp Services, Inc.
InCorp Services, Inc.
17888 67th Court North
P.O. Box NOT acceptable
Loxahatchee, FL 33470
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Steven J. Soodana, Treasurer Signature of an officer or director Steven J. Soodana, Treasurer
Significe of an officer of director I hereby, accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my futies, and it am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
April 10, 2012 Dete
If signing on penulf-of an entity:
Josle A Sorensen on behalf of InCorp Services, Inc.
Typed or Printed Name * * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (8/05)