PO4000 152441

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	; #)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: EXXEL PETROLI	EUM INC				
DOCUMENT NUME	BER:		 			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	ORLANDO CORDOVES JR					
		Name of Contact Person				
•		Firm/ Company	 			
	9700 NW 25TH STREET					
	Address					
	DORAL, FL 33172					
	City/ State and Zip Code					
ORLA	ANDO.CORDOVES@YAHO	OO.COM				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
ORLANDO CORDOVES JR		at (305	591-9556.			
Name of Contact Person			le & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:			
S35 Filing Fee	□\$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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EXXEL PETROLEUM, INC.	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P04000152441	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the cor	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	RESS)
	
C. Enter new mailing address, if applicable:	2019
(Mailing address MAY BE A POST OFFICE BOX	
	. 3
 If amending the registered agent and/or registered new registered agent and/or the new registered or 	
Name of New Registered Agent	ffice address:
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:
	am familiar with and accept the obligations of the position.
Signa	ture of New 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		JOSE VALLE	1553 SAN IGNACIO AVE
Add X Remove		_		CORAL GABLES, FL 33146
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_ -		
Add				
Remove				

	g or adding additional Artic tional sheets, if necessary).	(Be specific)	 ;		
					·
				<u></u>	
		.			
	-			• •	
					
f an amen	dment provides for an exch	ange, reclassificati	on, or cancellatio	n of issued shares,	
provisions (if not	for implementing the amer applicable, indicate N/A)	adment if not conta	ained in the amen	dment itself:	
(3					
					.
					·····

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		····
	(no more than 90 days after amendment file do	ite)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirem artment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the a scient for approval.	mendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and sha	archolder
Dated	1-18, 11 11/1/h-	
(By a pir	ector, president or other officer – if directors or officers ha	ve not been
	by an incorporator – if in the hands of a receiver, trustee, of	or other court
appointe	d fiduciary by that fiduciary)	
_	Orlando Cordones.	
	(Typed or printed name of person signing)	
	President.	
-	(Title of person signing)	