

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000111582

Entity Name: EXCELLO II, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

302 NASH AVE
NOKOMIS, FL 34275

New Principal Place of Business:

302 NASH AVE
NOKOMIS, FL 34275 US

Current Mailing Address:

302 NASH AVE
NOKOMIS, FL 34275

New Mailing Address:

302 NASH AVE
NOKOMIS, FL 34275 US

FEI Number: 20-2464400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLAIZZI, CHARLES
302 NASH AVE
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHARLES COLAIZZI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLAIZZI, CHARLES
Address: 302 NASH AVE
City-St-Zip: NOKOMIS, FL 34275

Title: V () Delete
Name: COLAIZZI, CARLENNE
Address: 302 NASH AVE
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES COLAIZZI

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date