(Re	questor's Name)				
(Ad	dress)				
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+Mend. 8-10-14

COVER LETTER

T0: Amendment Section

Division of Corpo	prations		
NAME OF CORPOR	ATION: EXCEL	VENTURIES	CORP
DOCUMENT NUME	ER: P1:	20000010	59
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
		SH DESAZ Name of Contact Person	
	EXCEL	VENTURES Firm/ Company	CORP
	3150 3614	STARET Address	
		Address	
	ORLAND	City/ State and Zip Code	2839
	<u> </u>	City/ State and Zip Code	
	E-mail address: (to be use	avers de pot o ed for future annual report no	online-(om otification)
For further informatio	n concerning this matter, please	e call:	
DA	RSH DESA-I	at (407	223-J200 & Daytime Telephone Number
Name	of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depart	ment of State:
□ \$35 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)
·	ling Address	Street A	
Am	endment Section	Amendm	ent Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

	VENTURES		
_	currently filed with the Florid		
Р	1200000	5 1 059	
(Document	Number of Corporation (if known	own)	•
rsuant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes, this <i>Flori</i>	rida Profit Corporation adop	ts the following amendment
If amending name, enter the new nam	ne of the corporation:		
	NI	A	The new
me must be distinguishable and conta Yorp.," "Inc.," or C0.," or the designat ord "chartered," "professional Association	tion "Corp," "Inc," or "Co"	. A professional corporatio	ed" or the abbreviation in name must contain the
Enter new principal office address, if		NIA	
rincipal office address <u>MUST BE A STi</u>	<u>REET ADDRESS</u>)		
	_		
Estar now mailing address if analise			
Enter new mailing address, if applica (Mailing address MAY BE A POST O		NIA	
	_		
	_		
If amending the registered agent and, new registered agent and/or the new	or registered office address registered office address:	in Florida, enter the name o	of the
now requestors again and or the new	DARSH	# DESAI	
Mama of New Pagistared Agent	4/11/911	# JUJ94	
Name of New Registered Agent			
Name of New Registered Agent	3150 36 TH ST	LEET	
- -	3150 36 TH ST (Florida street a	AEET address)	2.7.6
Name of New Registered Agent - New Registered Office Address	3150 36 TH ST	AEET address)	3 2 8 3 9 (Zip Code)

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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
1) X Change	<u> </u>		DARSHANA DESAI	3150 367H STREET
Add				ORIANDO, FL 32839
Remove				
2) Change	ρ.	<u> </u>	DARSH DESAI	3150 3674 STREET
× Add				ONLANDO, FL 32839
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			•	
Remove				
6) Change	<u> </u>			
Add			-	
Remove				

	nding or addin additional shee	ets, if necessar	y). (Be:	specific)	,	NIA			
<u>.</u>						- (10)	_	<u></u>	
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<u>If an ar</u>	mendment pro sions for imple	ovides for an i	<u>exchange.</u>	reclassific	<u>ation, or c</u>	<u>ancellatior</u>	of issued	<u>shares.</u>	
provis	sions for imple If not applicable	ementing the a le. indicate N/A	<u>amename</u> 4)	<u>nt it not co</u>	<u>ntained in</u>	the amend	iment itser	<u>[</u>	
(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,	•		1 /				
					- P/P				
					<u>'</u>		<u> </u>	<u>. </u>	
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							<u> </u>		

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: 7129/14 (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 7 28 14	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
DARSHANA DESAI	
(Typed or printed name of person signing)	
DINECTOR	
(Title of person signing)	<u> </u>