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SECRETARY OF SANIAL ALLESSES FOR SANIAL SANIA

JAN 2.2 2016

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: EXCEL TEAM REALTY, INC. DOCUMENT NUMBER: P 930 000 589 72
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Firm/ Company P. O. Box 8089 Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tmad Qubain at (772) 370 6000 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of	1			
EXCEL / EAM /	(EALTY, INC.			
(Name of Corporation as currently	filed with the Florida Dept. of State)			
P 930 00	0 589 72			
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation;				
SAFATT THE.	The nav			
SAFATI, INC. name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coverage word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the			
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. <u>If amending the registered agent and/or registered office addresses registered agent and/or the new registered office address:</u>				
Name of New Registered Agent				
(Florida stre	et address)			
New Registered Office Address:	, Florida			
	City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position			
Signature of New Re	egistered 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 <math>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	<u>v</u>	Mike Jones		NIA	
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	_Title	<u>Name</u>			<u>Addres</u> s
1) Change				<u> </u>	
Add					
Remove					
2) Change					
Add					
Remove				•	
3) Change					
Add					
Remove					
4) Change					
Add			· · · · · · · · · · · · · · · · · · ·		
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<u>f an amendm</u> en	t provides for an ex mplementing the an	change, reclassi	fication, or cane	ellation of issue	d shares.	
	mplementing the an	nendment if not	contained in the	amendment its	elf:	
provisions for i						
provisions for in (if not appli	caole, maicale WA)					
provisions for i (if not appli	cable, malcule WA)					
provisions for i (if not appli	cuoie, maicule (V/A)					
provisions for i (if not appli	cuoie, maicule (V/A)					
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provisions for i (if not appli	cuoie, maicule (V/A)					
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provisions for i	cuoie, maicule (V/A)					
provisions for i	cuoie, maicule (WA)					

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	e)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	eholder
Dated 1/4/2016	
SignatureAs Dir	endor & President.
(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 appointed fiduciary by that fiduciary)	other court
IMAR QURA	, (a)
(Typed or printed name of person signing)	
Director, President and	Secretary.
(Title of person signing)	