# L15000 101532

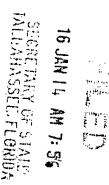
(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	·

Office Use Only



500280802525

01/14/16--01009--025 \*\*30.00



UAN 15 2016 J SHIVERS

## **COVER LETTER**

THE REAL	L ESTATE CENTER FL, LLC		
SUBJECT:		ited Liability Company	
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease return all correspo	ondence concerning this matter	to the following:	
	LUZ M. IRIZARRY		
		Name of Person	<del></del>
	THE REAL ESTATE CEN	NTER FL, LLC	
		Firm/Company	
	274 WILSHIRE BLVD., S	SUITE 224	
		Address	
	CASSELBERRY, FLORII	DA, 32707	
	,	City/State and Zip Code	
	DREPFL2015@GMAIL.CO	DM to be used for future annual report noting	fication)
or further information c	concerning this matter, please c	all:	
RAY CENDANA JR.		321 972-1979	
Name c	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE REAL ESTATE CENTER FL, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JUNE 8, 2015 and assigned Florida document number L15000101532 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: DIVERSIFIED REAL ESTATE PROFESSIONALS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter-the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### New Registered Agent's Signature, if changing Registered Agent:

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	Name	Address	Type of Action
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
<del></del>			☐ Add
			☐ Remove
			Change

. '			
	 		<del></del>
	 		<del></del>
		_	
	30		
		6	
	 <u> </u>	<u>₩</u>	
	ASSE SSE	_	Service Services
	<del></del>	_K	<del>11</del>
	 <u> </u>		
	L OR	7: 5	1
	 54	<b>6</b>	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00