N2000000 3296

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2020

OCTAVIO M RUEDA 8403 PINES BLVD #1077 PEMBROKE PINES, FL 33024

SUBJECT: DOMINICAN ASSOCIATION OF REAL ESTATE PROFESSIONALS.

CORP

Ref. Number: N20000003296

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 420A00007756

www.sunbiz.org

Amendment Signel.

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	sociation of Real Estate P	rofessionals.	Согр	
DOCUMENT NUMBER: N20000003296	-			
The enclosed Articles of Amendment and fee at	re submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
Octavio M Rueda				
	(Name of Contact	Person)		
Dominican Association of Real Estate Profession	onals. Corp			
	(Firm/ Compa	ny)		
8403 Pines Blvd # 1077				
	(Address)			
Pembroke Pines, FL 33024				
	(City/ State and Zip	Code)		
omrueda@ikbens.com				
E-mail address: (to b	e used for future annual re	eport notifica	tion)	
For further information concerning this matter, [please call:			
Octavio Rueda	:1	954 it	594.0110	
(Name of Contact P			e) (Daytime Telephone Number	r)
Enclosed is a check for the following amount m	ade payable to the Florida	Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St		is Cel (Ac	2.50 Filing Fee rtificate of Status rtified Copy Iditional Copy is closed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Addres inendment S livision of Co The Centre o	ection	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Dominican Association of Real Estate Professionals, Corp. (Name of Corporation as currently filed with the Florida Dept. of State) N20000003296 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Dominican Association of Real Estate Professionals, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: . Florida _ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 X Remove X Add	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	VP	Julissa Perez	8403 Pines Blvd # 1077 Pembroke Pines, FL 33024
2) Change Add	<u>D</u>	Aneika Crespo	8403 Pines Blvd # 1077 Pembroke Pines. FL 33024
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
6) Change Add			
E. If amending or addin (attach additional shee	g additional Arti ts. if necessary).	cles, enter change(s) here: (Be specific)	

Dated	3/24/20
Signature	(Mussan
1	By the chairman or vice chairman of the board, president or other officer-if directors nave not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Octavio M. Rueda
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) President