

N194000006324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500068714175

CONFIDENTIAL - NOT FOR RELEASE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 APR 19 PM 2:15

Ps 4/19/06
NCC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2006

WOMEN'S COUNCIL OF REALTORS DADE SOUTH CHAPTER, INC.
ATTN: NORKA M DIAZ
134 E 49 ST
HIALEAH, FL 33013

SUBJECT: WOMEN'S COUNCIL OF REALTORS DADE SOUTH CHAPTER,
INC.
Ref. Number: N94000006324

We have received your document for WOMEN'S COUNCIL OF REALTORS DADE SOUTH CHAPTER, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form submitted is for foreign corporations only. Please complete the enclosed form and submit for filing.

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) 245-6957.

Pamela Smith
Document Specialist

Letter Number: 606A00023062

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Women's Council of Realtors Dade South Chapter, Inc.

DOCUMENT NUMBER: N94000006324

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORKA M. DIAZ

(Name of Contact Person)

Women's Council of Realtors Miami Dade Chapter

(Firm/ Company)

134 E 49 STREET

(Address)

MIAMI, FLORIDA 33013

(City/ State and Zip Code)

For further information concerning this matter, please call:

NORKA M DIAZ

(Name of Contact Person)

at (305) 822-7474

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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)

(ALREADY
PAID)

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

The date of adoption of the amendment(s) was: 1/1/2006

Effective date if applicable: JANUARY 1, 2006
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature 

(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.)

NORKA M. DIAZ

(Typed or printed name of person signing)

PRESIDENT.

(Title of person signing)

FILING FEE: \$35