P08000071285

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: The Dear of Real ESTATE " INC DOCUMENT NUMBER: ___ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DIAN RIBBO Firm/ Company 1920 GRANADA CT

Address

CLEARWATER FZ 33764

City/ State and Zip Code For further information concerning this matter, please call: at (727) 420-5549

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Street Address

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles of Incorporation of

The Dear of Real ESTATE, Inc 511 -	~
(Name of Corporation as currently filed with the Florida Dept. of State).	
DOSOO(3)71285	
(Document Number of Corporation (if known)	8: 27
	S TAME
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followist Articles of Incorporation:	wing amendment(s) to
A. If amending name, enter the new name of the corporation:	
Dear D. Ribble P.A.	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co. "chartered," "professional association," or the abbreviation "P.A."	utain the word
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 W/A - Same	
(Florida street 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 with and accept the obligations of the position	on.
a/10	
Signature of New Registered Agent, if changing	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X_Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
δ) Change			
Add			
Remove			

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<u>rovisio</u>	endment pro ons for imple ot applicable	<u>ementing th</u>	<u>e amendme</u>	reclassific nt if not co	ation, or ca ntained in t	ncellation o he amendn	f issued sha nent itself:	ares,	
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	ch amendment(s) adoptionent was signed.	n:	, if other
Effective date	if applicable:		
•		(no more than 90 days aft	ier amendment file date)
	ate inserted in this block d ective date on the Departm		utory filing requirements, this date will not be liste
Adoption of A	mendment(s)	(CHECK ONE)	
	nent(s) was/were adopted b not required.	by the incorporators, or board of o	directors without shareholder action and shareholder
	nent(s) was/were adopted b cholders was/were sufficier		of votes cast for the amendment(s)
☐ The amenda	nent(s) was/were approved arately provided for each	by the shareholders through voting group entitled to vote sepa	ing groups. The following statement arately on the amendment(s):
"I he		e amendment(s) was/were suffici	
"The			
		e amendment(s) was/were suffici	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Dated /-/0 Signature (By a director	(voting group) 1-2024 Moreover, president or other officer – if di	11/8/2024 DML- irectors or officers have not been
	Dated /-/0 Signature (By a director selected, by a	(voting group) 1-2024 Moreover, president or other officer – if di	11/8/2024 DM

-Anissa Butler or to whom it may concern,

I am sorry for the delay in returning this. We had a family emergency and this was buried under other pressing paperwork.

However, it needs to get this resolved and the name change by year end.

I have completed the form with the missing information or box that needed to be checked per your return letter. I did no see a place where I should put or add the nature of my business but it is Real Estate Sales.

There are no changes to this company other than the name so that I can comply with DPPR.

I have also enclosed and addition check for \$35.00 due to the delay.

I can be reached at 727-420-5549 with any questions.

Thank you for you help.

Dean Ribble

RE/MAX Realtec Group

4175 Woodland Pkwy, Palm Harbor, FL 34685

Clients at 727-334-2496

Agents at 727-420-5549

DeanRibble@TheDeanofRealEstateTeam.com

Or, visit my website at www.TheDeanofRealEstate.com





February 8, 2024

DEAN D RIBBLE 1920 GRANADA COURT CLEARWATER FL 33764

SUBJECT: 'THE DEAN OF REAL ESTATE' INC.

Ref. Number: P08000071285

We have received your document for 'THE DEAN OF REAL ESTATE' INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

What is the nature of your business?

Real 6570;6 570 fes

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.

Decement 1113/24

Anissa Butler Regulatory Specialist II

Letter Number: 724A00002860



November 26, 2024

DEAN RIBBLE 1920 GRANADA COURT CLEARWATER, FL 33764

SUBJECT: 'THE DEAN OF REAL ESTATE' INC.

Ref. Number: P08000071285

We have received your document for 'THE DEAN OF REAL ESTATE' INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

WHAT IS THE NATURE OF YOUR BUSINESS?

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.

Letter Number: 824A00025868

Anissa Butler Regulatory Specialist II

www.sunbiz.org



December 5, 2024

DEAN RIBBLE 1920 GRANADA COURT CLEARWATER, FL 33764

SUBJECT: 'THE DEAN OF REAL ESTATE' INC.

Ref. Number: P08000071285

We have received your document for 'THE DEAN OF REAL ESTATE' INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

Enclosed is an application for refund. Please sign and return and allow at least 60 to 90 days for the refund to be processed.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

Enclosed is an application for refund. The name and address provided on the application is who the refund will be made payable to. When the recipient of the refund is a business entity the Federal Employer Identification Number (FEIN) is required. If an individual is the recipient their social security number (SS No) is required.

The refund cannot be processed without this information.

The requestor will need to date and sign the application.

Please return the application and allow 30 to 60 days for the refund to be processed.

Please set forth the date(s) of assessment on the notice of federal tax lien.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 324A00026253