State of Florida Department of Business and Professional Regulation Florida Real Estate Commission Change of Status for Sales Associates and Broker Sales Associates Form # DBPR RE 11

Check the box for the relevant transaction in Section I and complete the applicable additional section(s) only. Leave the sections that are not relevant to your desired transaction blank. If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395. For additional information see Instructions at the end of this form.

Section I – Transaction Types

TRANSACTION TYPES

□ Add Employee [3020]
□ Terminate Employee [4020]
□ Marchine Employee [4020]
□ Become Inactive [4020]
□ Change Employer [9007]

Section II – Associate Information

ASSOCIATE INFORMATION						
License Number:						
Last/Surname		First	Middle	Suffix		
Primary Phone Number	Mobile?	Primary E-Mail Address				
-	Y N	-				

Section III - Broker or Company Information

COMPANY INFORMATION						
Last/Surname (Qualifying broker)	First	Middle	Suffix			
Biro	Daniel	А.				
License number of real estate company:						
	CQ1035933					
Name of real estate company: RealtyPRO Network, LLC - 721 Palm Dr. Satellite Beach, FL 32937						
Primary Phone Number (561) 223-1993	Primary E-Mail Address	admin@realtypronetw	/ork.com			
Signature of qualifying broker that is adding or terminating employee:						

*Section IV – Affirmation By Written Declaration

AFFIRMATION BY WRITTEN DECLARATION

I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.

Signature:

Date:

Print Name:

* SEND A \$99 CHECK (INCLUDE LIC. # ON MEMO LINE) TO 'REALTYPRO NETWORK' WITH THIS COMPLETED SIGNED FORM & A COPY OF YOUR CURRENT REAL ESTATE LICENSE