

**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION**

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e-mail: realest@red.nv.gov * <http://red.nv.gov/>

ASSET MANAGEMENT CHANGE FORM
Asset Managers or Asset Management Companies.

INSTRUCTIONS:

- The Division must receive the original registration or permit and pocket card.
- Complete only the areas that are specific to this transaction and a fee of \$20.00 per section per registration or permit are required.
- Payments are accepted in the form of check, cashier's check, money order (made payable to NRED) or exact cash.
- Incomplete paperwork will not be processed and will be returned to you for completion.

Permit or Registration Number: _____ Date: _____

Name (please print): _____
[First Middle Last (name on license)]

*Home address: _____

Mailing address: _____
[Street, City, State, & Postal code]

*Email address: : _____ *Phone: _____
[Area code & number]

*Required - For division use only. Not sold publically

\$20 BUSINESS ADDRESS CHANGE: Complete this section even if the business location is the same as your home address.

Business name: _____

Current business address: _____
[Street, City, State, & Postal code]

New Business address: _____

Mailing address: _____
[Street, City, State, & Postal code]

Phone _____ Fax: _____ Email: _____

\$20 BUSINESS NAME CHANGE:

List **current** business name: _____

List **new** business name: _____

\$20 PERSONAL NAME CHANGE: List the name on your current certificate at the top and list your new name here. Proof is required in the form of a Divorce decree, Marriage Certificate, or a Judgment issued by the court.

New name: _____

(List your full name as you wish it to appear on your certificate, license, permit, or registration.)

Division: _____ **Date:** _____ **Receipt:** _____ **Initials:** _____

APPLICANT SIGNATURE:

NO **YES** Have you had any disciplinary sanctions imposed by any regulatory agency or commission within the past 5 years?

If **Yes**, applicants are required to attach a written explanation and the final disposition document.

Original Signature: _____ **Date:** _____

REPORT OF EXISTENCE OF NEVADA BUSINESS LICENSE

Pursuant to NRS 645C

All applicants MUST complete this section. Please select ONE option.

I have a Nevada business license number assigned by the Nevada Secretary of State upon compliance with the provisions of NRS Chapter 76.

My Nevada business license number is: _____

I have applied for a Nevada business license with the Nevada Secretary of State upon compliance with the provision of NRS Chapter 76 and my application is pending.

I do NOT have a Nevada business license number.

The Real Estate Division is not the arbiter of determining whether the applicant needs a business license. Information about the Nevada business license can be found on the Secretary of State's website at: <http://nvsos.gov/>