

**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)


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CITY OF MIAMI BEACH  
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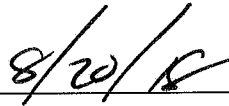
- Original Appointment       Change of Appointment  
 Change of Mailing Address       Change of Physical Address

**Registered Agent and Office Information**

Name Juan-Carlos Planas, Esq.		Telephone 305-929-8500
Street Address 600 Brickell Avenue, Suite 1715		
City Miami	State Florida	Zip Code 33131
Mailing Address 600 Brickell Avenue, Suite 1715		
City Miami	State Florida	Zip Code 33131

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

  
\_\_\_\_\_  
Signature of Registered Agent


  
\_\_\_\_\_  
Date

**Former Registered Agent and Office Information (for changes only)**

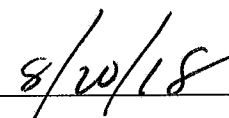
Name		Telephone
Street Address		
City	State	Zip Code

**Committee or Organization Information**

Name of Committee or Organization Vote Yes for MIAMI BEACH!		
Street Address 600 Brickell Avenue, Suite 1715		Telephone 305-531-2424
City Miami	State Florida	Zip Code 33131

  
\_\_\_\_\_  
Signature of Chairperson

Joy Malakoff  
\_\_\_\_\_  
Printed Name of Chairperson

  
\_\_\_\_\_  
Date