

OATH OF WITHDRAWAL

| | Date: 5-27-20 | |
|---|--|--|
| | I, JEAN MONESTIME | _, have filed as a candidate for the |
| | office of Miami-Dase County Mayor | |
| < | I wish to withdraw my name as a candidate for this office and I will no qualification papers Signature of Candidate | ot accept the office for which I filed |
| | Address North Miami City | FC 33/6/ State Zip |
| | Sworn to (or affirmed) and subscribed before me by physical or online presence this day of may, 2020. | ZOZO MAY |
| | Signature of Officer Administering the Oath or Notary Public EVELT JEUDY MY COMMISSION # GG29594 Print, Typeou Stanp Commissioned Name of Notary Public | CEIVED 27 PM 2: 29 CADE COUNTY S DEPARTMENT |
| | Personally Known or Produced Identification | |
| | Type of Identification Produced | |

Candidate Withdrawal Policy

The deadline for any candidate to withdraw is the end of qualifying. No qualifying fee shall be returned to the candidate unless the candidate withdraws his or her candidacy before the end of their qualifying period.

(Reference: Florida Statutes 99.092)