

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

OFFICE USE ONLY

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OFFICE OF THE CITY CLERK
CITY OF MIAMI

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name
SHERMAN RATTNER

Telephone
(310) 741-0777

Street Address
1809 BRICKELL AVE #1009

City
MIAMI

State
FL

Zip Code
33129

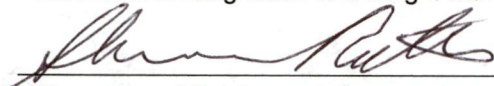
Mailing Address
1809 BRICKELL AVE #1009

City
MIAMI

State
FL

Zip Code
33129

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

9/15/2018
Date

Former Registered Agent and Office Information (for changes only)

Name
N/A

Telephone

Street Address

City

State

Zip Code

Committee or Organization Information

Name of Committee or Organization
PROTECT MIAMI

Street Address
1809 BRICKELL AVE #1009

Telephone
(310) 741-0777

City
MIAMI

State
FL

Zip Code
33129


Signature of Chairperson

SHERMAN RATTNER
Printed Name of Chairperson

9/15/2018
Date