

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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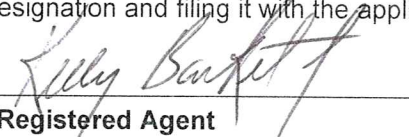
OFFICE OF THE CITY CLERK
CITY OF MIAMI

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

Registered Agent and Office Information

Name Kelly Barket		Telephone 305-342-3870
Street Address 6760 SW 75th Terrace		
City Miami	State Florida	Zip Code 33143
Mailing Address 6760 SW 75th Terrace		
City Miami	State Florida	Zip Code 33143

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.

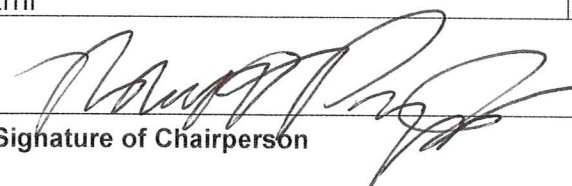
 2/11/2020
Signature of Registered Agent Date

Former Registered Agent and Office Information (for changes only)

Name Juan Cuba		Telephone 305-761-6650
Street Address 165 Ponce De Leon Blv.		
City Coral Gables	State Florida	Zip Code 33134

Committee or Organization Information

Name of Committee or Organization Take Back Our City		
Street Address 1401 SW 17 Terrace		Telephone 786-250-1160
City Miami	State Florida	Zip Code 33145


Signature of Chairperson

Robert F. Piper, III 2/11/2020
Printed Name of Chairperson Date