

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

OFFICE USE ONLY

RECEIVED

2021 MAY -4 PM 4:00

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
JOSE A. RIESCO, CPA

Telephone
305-445-0777

Street Address
2600 SOUTH DOUGLAS ROAD, SUITE 900

City
CORAL GABLES

State
FL

Zip Code
33134

Mailing Address
2600 SOUTH DOUGLAS ROAD, SUITE 900

City
CORAL GABLES

State
FL

Zip Code
33134

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

5/4/2021
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

MIAMI GOOD GOVERNMENT INITIATIVE

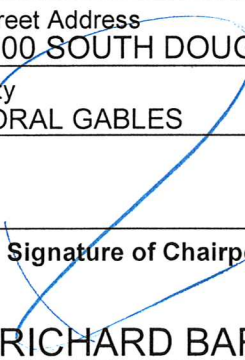
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Signature of Chairperson

RICHARD BARBARA

Printed Name of Chairperson

MAY 4, 2021
Date