

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

RECEIVED OFFICE USE ONLY

2022 JUN 29 PM 3:29

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 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

6/29/22
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 on Riverside Wharf PC, Inc.

Street Address: 123 SW North River Dr. Telephone: (305) 233-1539

City: Miami State: FL Zip Code: 33130


Signature of Chairperson

Alex Mantecon
Printed Name of Chairperson

6/29/22
Date