

**CANDIDATE OATH****NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)  
Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

8 JUL '24 PM 12:37 *ce*

OFFICE USE ONLY

**Candidate Oath**

Name to appear on ballot: NICOLE REINOSO

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☐ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the nonpartisan office of CITY OF DORAL COUNCIL,  
(Office) (District #)  
3 County, Florida;  
(Circuit #) (Group or Seat #) I am a qualified elector of MIAMI-DADE

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

**Statement of Outstanding Fines, Fees, or Penalties**

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do \_\_\_\_\_ NO, I Do Not X

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X *[Signature]* (305) 445-0777 nreinosotorres@gmail.com  
Signature of Candidate Telephone Number Email Address  
8477 NW 51 TERRACE DORAL FL 33166  
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Miami-Dade

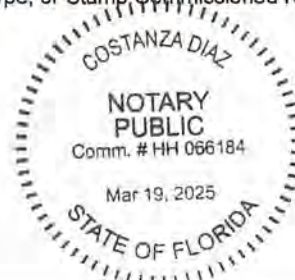
Sworn to (or affirmed) and subscribed before me by means of  
online notarization ☐ OR physical presence ☒  
this 8 day of July, 2024

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: \_\_\_\_\_

*[Signature]*  
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:



## Phonetic Spelling of Name

**Phonetic spelling for the audio ballot** (not required for qualifying purposes): Print the name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 3 of this form):

n ih - k OH I      R AI - n oh- s oh

## Statement of Outstanding Fines, Fees or Penalties

**Pursuant to Section 99.021(1)(d), F.S.**, each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity
N/A	N/A

## Affidavit of Nickname (Only required if using nickname for the ballot.)

My legal name is \_\_\_\_\_. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is \_\_\_\_\_. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

**Signature of Candidate:** \_\_\_\_\_

**STATE OF FLORIDA**

**COUNTY OF** \_\_\_\_\_

**Signature of Notary Public**

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means

of online notarization ☐ OR physical presence ☐

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Personally Known ☐ OR Produced Identification ☐

Type of Identification Produced: \_\_\_\_\_

## 2023 Form 1 - Statement of Financial Interests

## General Information

Name: Nicole Alexandra Reinoso  
Address: 8477 NW 51ST TER, DORAL, FL 33166  
County: Miami-Dade

Organization	Suborganization	Title
N/A		

## CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	Doral City Council	Doral City Council Member, Seat 3

## Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

## Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)  
(If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
The School Board of Miami-Dade County FL	1450 NE 2 Avenue, #614, Miami, FL 33132	Executive Director of Facilities
VEMINO Group LLC	8477 NW 51 Terrace, Doral, FL 33166i	Tech Accesories Sales



## 2023 Form 1 - Statement of Financial Interests

### Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

### Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)  
(If you have nothing to report, write "none" or "n/a")

Location/Description
N/A

### Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)  
(If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates
JP Morgan Chase Bank	Personal Checking Account
Capital One Bank	Personal Checking Account
Wells Fargo Bank	VEMINO Group LLC
403B-MDCPS	Retirement Account
51% Membership Interest-VEMINO Group LLC	Membership Interest in VEMINO Group LLC



## 2023 Form 1 - Statement of Financial Interests

### Liabilities

LIABILITIES (Major debts valued over \$10,000):  
(If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor
Mr. Cooper	8950 Cypress Waters Blvd, Coppell, TX 75019
Nelnet	401 S 21 St, Lincoln, NE 68510

### Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)  
(If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

### CPA/Attorney Signature Only

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, **Jose A Riesco CPA** prepared the CE Form 1 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

**Jose A Riesco CPA**

Digitally signed: 06/25/2024

Signature of Filer

***Nicole Alexandra Reinoso***

Digitally signed: 06/26/2024

For Qualifying  
Purposes Only

Li atantivman – Nimewo biwo vòt ou, lokal  
biwo vòt ou, oswa toude kapab te chanje. Itilize  
enfòmasyon sa—a pou w egzèsè dwa w pou w vote!

Detach here	Desprender por aqui	Detache isit la
		<b>Voter Information Card</b> Miami-Dade County, FL
		<b>Tarjeta de Información del Elector</b> Condado de Miami-Dade, FL
		<b>Kat Enfòmasyon Votè</b> Konte Miami-Dade, FL
Nicole Alexandra Reinoso 8477 NW 51St Ter Doral FL 33166		ISSUED EMITIDA ENPRIME
		09/11/23
Detach here	Bring photo identification when voting. Para votar, presente una identificación con fotografía. Pote pyès idantifikasyon avèk foto lè w ap vin vote.	
	Registration No. Núm. de Inscripción Nim. Enskripsyon  110249808	
Desprender por aqui	Voting Location   Centro de Votación   Lokal Biwo Vòt Doral Cultural Arts Center 8363 NW 53 St	
	Precinct No. Núm. del Recinto Nim. Biwo Vòt  370	Date of Birth Fecha de Nacimiento Dat Nesans 5/28/1986
	Registration Date Fecha de Inscripción Dat Enskripsyon 9/7/2004	
Detache isit la	Party Affiliation   Afiliación Partidista   Afilyasyon Pati Politik REPUBLICAN PARTY OF FLORIDA	
	Christina White Supervisor of Elections   Supervisora de Elecciones   Sipèvizè Eleksyon The districts listed below will appear on your ballot. En su boleta aparecerán los distritos que figuran abajo. Distrik ki endike anba yo va parèt sou bilten vòt ou.	
	Congress Congreso Kongrè 26	State Senate Senado Estatal Sena Eta 39
	State House Cámara Estatal Chanm Reprezantan Eta 111	
County Commission Comisión del Condado Komisyon Konte 12	School Board Junta Escolar Konsèy Eskolè 5	Community Council Consejo Comunitario Konsèy Kominotè N/A
Municipality   Municipio   Minisipalite DORAL		

8 JUL '24 PM12:44

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## Electric Bill Statement

For: Apr 1, 2022 to May 2, 2022 (31 days)

Statement Date: May 2, 2022

Account Number: [REDACTED]

Service Address:

5166 NW 83RD CT

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

## CURRENT BILL

**\$251.89****May 23, 2022**

## BILL SUMMARY

Amount of your last bill	245.63
Payments received	-245.63
Balance before new charges	0.00
Total new charges	251.89
Total amount you owe	<b>\$251.89</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

A new minimum base bill of \$25, which was approved by the Florida Public Service Commission, goes into effect next month for metered residential customers whose monthly base electric service costs fall below \$25.

## ENERGY USAGE HISTORY



## KEEP IN MIND

Payments received after May 23, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment. The amount due on your account will be drafted automatically on or after May 13, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM12:38

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](http://FPL.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$251.89**

TOTAL AMOUNT YOU OWE

**May 23, 2022**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED

**Electric Bill Statement**

For: May 2, 2022 to Jun 1, 2022 (30 days)

Statement Date: Jun 1, 2022

Account Number: [REDACTED]

Service Address:

5166 NW 83RD CT

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$261.79**

TOTAL AMOUNT YOU OWE

**Jun 22, 2022**

NEW CHARGES DUE BY

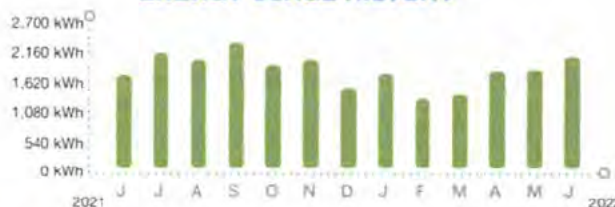
**BILL SUMMARY**

Amount of your last bill	251.89
Payments received	-251.89
Balance before new charges	0.00
Total new charges	261.79
<b>Total amount you owe</b>	<b>\$261.79</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

A new minimum base bill of \$25, which was approved by the Florida Public Service Commission, is now in effect for metered residential customers whose monthly base electric service costs fall below \$25.

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after June 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after June 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:38 *cb*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINGSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
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this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$261.79**

TOTAL AMOUNT YOU OWE

**Jun 22, 2022**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Jun 1, 2022 to Jul 1, 2022 (30 days)**Statement Date:** Jul 1, 2022**Account Number:** [REDACTED]**Service Address:**

5166 NW 83RD CT

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$265.16**

TOTAL AMOUNT YOU OWE

**Jul 22, 2022**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	261.79
Payments received	-261.79
Balance before new charges	0.00
 Total new charges	 265.16
<b>Total amount you owe</b>	<b>\$265.16</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after July 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after July 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:38

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
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Make check payable to FPL  
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FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

\$265.16

TOTAL AMOUNT YOU OWE

Jul 22, 2022

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Jul 1, 2022 to Aug 1, 2022 (31 days)**Statement Date:** Aug 1, 2022**Account Number:** [REDACTED]**Service Address:**5166 NW 83RD CT  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$270.56**

TOTAL AMOUNT YOU OWE

**Aug 22, 2022**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	265.16
Payments received	-265.16
Balance before new charges	0.00
Total new charges	270.56
<b>Total amount you owe</b>	<b>\$270.56</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after August 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after August 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:38

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
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this coupon to:

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GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$270.56**

TOTAL AMOUNT YOU OWE

**Aug 22, 2022**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED

**Electric Bill Statement****For:** Aug 1, 2022 to Sep 1, 2022 (31 days)**Statement Date:** Sep 1, 2022**Account Number:** [REDACTED]**Service Address:**5166 NW 83RD CT  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$283.57**

TOTAL AMOUNT YOU OWE

**Sep 22, 2022**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	270.56
Payments received	-270.56
Balance before new charges	0.00
Total new charges	283.57
<b>Total amount you owe</b>	<b>\$283.57</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after September 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after September 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:38

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

\$283.57

TOTAL AMOUNT YOU OWE

Sep 22, 2022

NEW CHARGES DUE BY

\$ Autopay - DO NOT PAY

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Sep 1, 2022 to Oct 3, 2022 (32 days)**Statement Date:** Oct 3, 2022**Account Number:** [REDACTED]**Service Address:**5166 NW 83RD CT  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$300.58**

TOTAL AMOUNT YOU OWE

**Oct 24, 2022**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	283.57
Payments received	-283.57
Balance before new charges	0.00
Total new charges	300.58
<b>Total amount you owe</b>	<b>\$300.58</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after October 24, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after October 14, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:38 *CO*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$300.58**

TOTAL AMOUNT YOU OWE

**Oct 24, 2022**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**Electric Bill Statement**

For: Oct 3, 2022 to Nov 1, 2022 (29 days)

Statement Date: Nov 1, 2022

Account Number [REDACTED]

Service Address:

5166 NW 83RD CT  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$305.08**

10,745 kWh (10,745 kWh)

**Nov 22, 2022**

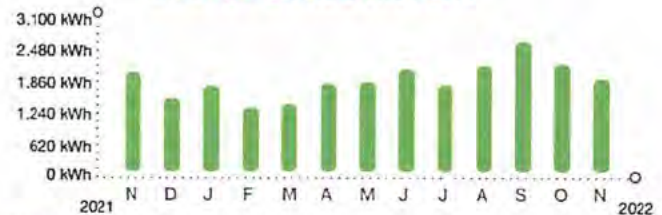
Nov 22, 2022 (Nov 22, 2022)

**BILL SUMMARY**

Amount of your last bill	300.58
Payments received	-300.58
Balance before new charges	0.00
Total new charges	305.08
<b>Total amount you owe</b>	<b>\$305.08</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after November 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after November 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:39

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*



NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

\$305.08

TOTAL AMOUNT YOU OWE

Nov 22, 2022

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED

**Electric Bill Statement****For:** Nov 1, 2022 to Dec 1, 2022 (30 days)**Statement Date:** Dec 1, 2022**Account Number:** [REDACTED]**Service Address:**5166 NW 83RD CT  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$311.58**

TOTAL AMOUNT YOU OWE

**Dec 22, 2022**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	305.08
Payments received	-305.08
Balance before new charges	0.00
Total new charges	311.58
<b>Total amount you owe</b>	<b>\$311.58</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission is reviewing proposed rates that would take effect on Jan. 1, 2023. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after December 22, 2022 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after December 12, 2022. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:33

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$311.58**

TOTAL AMOUNT YOU OWE

**Dec 22, 2022**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**\*TRANSFER FINAL BILL\***

For: Dec 1, 2022 to Jan 2, 2023 (32 days)

Statement Date: Jan 3, 2023

Account Number: [REDACTED]

Service Address:

5166 NW 83RD CT

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$308.48**

TOTAL AMOUNT YOU OWE

**Jan 24, 2023**

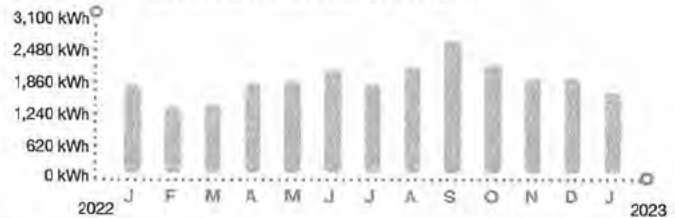
NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	311.58
Payments received	-311.58
Balance before new charges	0.00
Total new charges	308.48
<b>Total amount you owe</b>	<b>\$308.48</b>

**DO NOT PAY****\*TRANSFER FINAL BILL\***

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

The amount due on your account will be drafted automatically on or after January 14, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

The Florida Public Service Commission has approved new rates effective Jan. 1, 2023. An additional rate change will take effect on Feb. 1, 2023. Learn more at [FPL.com/Rates](http://FPL.com/Rates).

8 JUL '24 PM 12:39 *ur*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](http://FPL.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$308.48**

TOTAL AMOUNT YOU OWE

**Jan 24, 2023**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED

## BILL DETAILS

Amount of your last bill	311.58
Payment received - Thank you	-311.58
Balance before new charges	\$0.00

### New Charges

Rate: RS-1 RESIDENTIAL SERVICE

Base charge: \$9.48

Non-fuel: (First 1000 kWh at \$0.075240) \$134.17  
(Over 1000 kWh at \$0.085160)

Fuel: (First 1000 kWh at \$0.037430) \$70.29  
(Over 1000 kWh at \$0.047450)

Electric service amount 213.94

Gross receipts tax (State tax) 5.49

Franchise fee (Reqd local fee) 13.76

Utility tax (Local tax) 17.41

Taxes and charges 36.66

Regulatory fee (State fee) 0.17

Actual electric charges 250.77

Budget billing charges \$308.48

Total amount you owe \$308.48

**DO NOT PAY**

**\*TRANSFER FINAL BILL\***

## METER SUMMARY

Meter reading - Meter ACD0701.

Usage Type	Current	-	Previous	=	Usage
kWh used	04802		03110		1692

## ENERGY USAGE COMPARISON

	This Month	Last Month	Last Year
Service to	Jan 2, 2023	Dec 1, 2022	Jan 3, 2022
kWh Used	1692	1997	1840
Service days	32	30	33
kWh/day	53	67	56
Amount	\$250.77	\$288.22	\$264.62

## FPL BUDGET BILLING

Deferred Balance \$211.32

## KEEP IN MIND

- Taxes and charges on your bill are determined and required by your local and state government to be used at their discretion.
- The fuel charge represents the cost of fuel used to generate electricity. It is a direct pass-through to customers. FPL does not profit from fuel, although higher costs do result in higher state and local taxes and fees.

## Download the app

Get instant, secure access to outage and billing info from your mobile device.

Download now >

## Stronger, smarter grid

FPL's service reliability has improved 45% in the past decade.

See how >

When you pay by check, you authorize FPL to process your payment electronically or as a draft. If your payment is processed electronically, your checking account may be debited on the same day we receive the check and your check will not be returned with your checking account statement. FPL does not agree to any restrictions, conditions or endorsements placed on any bill statement or payments such as check, money order or other forms of payment. We will process the payment as if these restrictions or conditions do not exist.



NOTICE OF RENT INCREASE

May 10, 2022

Miguel and Nicole Reinoso  
5166 NW 83<sup>rd</sup> Ct  
Doral, FL 33166

Global Investments & Home Group, LLC  
4349 SW 175<sup>th</sup> AVE  
Miramar, FL 33029

Dear Miguel & Nicole,

Effective August 1, 2022, the monthly rent of the tenant property listed above will increase from \$3,300.00/month to \$5,300.00/month. The new monthly rent amount will be do on August 1, 2022 and on the 1<sup>st</sup> day of each month thereafter. All other provisions of your rental lease agreement will remain unchanged.

- ☐ Yes, I agree to this rent increase. Please send me a new lease to sign.
- ☐ No, I do not agree to thus new monthly rent amount and I will vacate the property by the end of the lease term. My intended move-out date is \_\_\_\_\_.

Please return this form at your earliest convenience, keeping in mind that your lease agreement requires a minimum of 60 days' notice. Which would be on or before June 1, 2022.

Please let me know if you have any questions or concerns.



Antonio Sardinha  
Global Investments & Home Group

8 JUL '24 PM 12:39





# Addendum to Contract

Addendum No. 2 to the Contract with the Effective Date of 09/01/2022 between  
Global Investments & Home Group LLC Landlord  
 (Seller)  
 and Miguel Reinoso and Nicole Reinoso Tenant  
 (Buyer)---  
 concerning the property described as: 5166 NW 83rd CT, Doral, FL 33166

Landlord and Tenant

(the "Contract"). ~~Seller and Buyer~~ make the following terms and conditions part of the Contract:

1) It is known that this addendum shall be added to the lease agreement dated August 1, 2021. The lease contract will be extended for 1 month expiring 10/01/2022.

2) Effective 09/01/2022 Rent payment is \$5,300.00 for the month of September 2022.

8 JUL '24 PM 12:39 *car*

Tenant *[Signature]*  
 Buyer: Miguel Reinoso (Sep 1, 2022 19:58 EDT)  
 Tenant *[Signature]*  
 Buyer: Nicole Reinoso (Sep 1, 2022 19:59 EDT)  
 Landlord *Global Investments & Home Group*  
 Seller: Global Investments & Home Group (Sep 1, 2022 20:06 EDT)  
 Seller: \_\_\_\_\_

Date: Sep 1, 2022  
 Date: Sep 1, 2022  
 Date: Sep 1, 2022  
 Date: \_\_\_\_\_



# 3rd Addendum to Contract - sign...

...

PDF - 321 KB

## Addendum to Contract



Addendum No. 3 to the Contract with the Effective Date of October 1, 2022 between

Global Investments & Home Group LLC

Landlord  
(Seller)

and Miguel Reinoso and Nicole Reinoso

Tenant  
(Buyer)

concerning the property described as: 5166 NW 83rd CT, Doral, FL 33166

### Landlord and Tenant

(the "Contract"). ~~Seller and Buyer~~ make the following terms and conditions part of the Contract:

1) It is known that this addendum shall be added to the lease agreement dated August 1, 2021. The Lease agreement will be extended for 1 month expiring 11/01/2022.

2) Effective 09/01/2022 Rent payment is \$5,300.00 for the month of September and October 2022.

8 JUL 24 PM 12:39

Tenant Miguel Reinoso  
Buyer 5166 NW 83rd CT, Doral, FL 33166  
Tenant Miguel Reinoso and Nicole Reinoso  
Buyer 5166 NW 83rd CT, Doral, FL 33166  
Landlord Global Investments and Home Group  
Seller Global Investments and Home Group (Oct 1, 2022 15:19 PDF)  
Seller: \_\_\_\_\_

Date: Oct 1, 2022  
Date: Oct 1, 2022  
Date: Oct 1, 2022  
Date: \_\_\_\_\_

ACSP-4 Rev 6/17  
Serial# 038575-000186-4486510

©2017 Florida Realtors®

Form  
Simplicity

## 3rd Addendum to Contract

Final Audit Report

2022-10-01

Created: 2022-09-29  
By: Carolina Sardinha (cjtaxsvcs@hotmail.com)  
Status: Signed  
Transaction ID: CBJCHBCAABAAVwgNLsQ44dcKATisu-XID037-kHX1eIA

### "3rd Addendum to Contract" History

Document created by Carolina Sardinha (cjtaxsvcs@hotmail.com)



## Addendum to Contract



Addendum No. 4 to the Contract with the Effective Date of November 1, 2022 between

Global Investment & Home Group, LLC

Landlord  
(~~Seller~~)

and Miguel A. Reinoso & Nicole Reinoso

Tenant  
(~~Buyer~~)

concerning the property described as: \_\_\_\_\_

(the "Contract"). ~~Seller and Buyer~~ <sup>Landlord and Tenant</sup> make the following terms and conditions part of the Contract:

1) It is known that this addendum shall be added to the lease agreement dated August 1st, 2021. The lease agreement will be extended for only 1 more month expiring 12/01/2022. This will be the last extension

2) Effective 09/01/2022 Rent Payment is \$5,300.00 for the month of September October and November 2022

8 JUL '24 PM 12:39 *cr*

Tenant MRS  
~~Buyer:~~ Miguel Reinoso (Nov 2, 2022 08:42 EDT)

Tenant N  
~~Buyer:~~ Nicole Reinoso (Nov 2, 2022 08:52 EDT)

Landlord Global Investment & Home Group LLC  
~~Seller:~~ Global Investment & Home Group LLC (Nov 2, 2022 08:58 EDT)

Seller: \_\_\_\_\_

Date: Nov 2, 2022

Date: Nov 2, 2022

Date: Nov 2, 2022

Date: \_\_\_\_\_



# Addendum to Contract



Addendum No. 5 to the Contract with the Effective Date of December 2, 2022 between  
Global Investment & Home Group, LLC Landlord  
Miguel A. Reinoso & Nicole Reinoso (Seller)  
and Miguel A. Reinoso & Nicole Reinoso Tenant  
concerning the property described as: 5166 NW 83rd CT, Doral, FL 33166 (Buyer)

~~Landlord~~ ~~Tenant~~-----  
(the "Contract"). ~~Seller~~ and ~~Buyer~~ make the following terms and conditions part of the Contract:  
1) It is known that this addendum shall be added to the lease agreement dated August 1st, 2021. An exception of the lease agreement that will be extended for 15 days until 12/15/2022. If tenants don't leave on December 15, 2022, the contract will be automatically extended until January 15, 2023 and Rent amount of \$5,300 should be paid on January 1, 2023  
2) Effective 09/01/2022 Rent Payment is \$5,300.00 for the month of September October and November 2022. Payment for December 1st to December 15 is \$2,650 and is due immediately.

8 JUL '24 PM12:39 *CO*

Tenant *MR*  
Buyer: Miguel Reinoso (Dec 2, 2022 12:46 EST)  
Tenant *NR*  
Buyer: Nicole Reinoso (Dec 2, 2022 12:48 EST)  
Landlord Global Investments & home Group  
Seller: Global Investments & home Group (Dec 2, 2022 13:41 EST)  
Seller: \_\_\_\_\_

Date: Dec 2, 2022  
Date: Dec 2, 2022  
Date: Dec 2, 2022  
Date: \_\_\_\_\_



Miami-Dade Water and Sewer Department  
P O Box 026055  
Miami, FL 33102-6055

8 JUL '24 PM12:39

*CP*

Name: NICOLE REINOSO  
Account Number: [REDACTED]  
Billing Date: 04/05/2022  
Past Due Date: 04/26/2022

Billing Inquiries (hours 8:00 AM - 7:00 PM) 305-665-7477  
Report any hazardous conditions to 305-274-9272  
Water Conservation Program Information- Call 311

Page 1 of 3

Messages

Go green by enrolling in Paperless Billing and/or Auto Pay. Pay your bill and view your account on-line at [www.miamidade.gov/water](http://www.miamidade.gov/water). To pay by phone using your bank account, call 1-800-565-1800. To use a credit card call 1-800-510-0880.

Failure to address higher than normal bills within 30 days of their issue date may disqualify requests for possible bill credits.

Account Summary

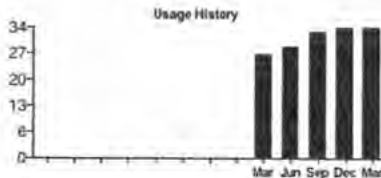
Previous Balance	\$ 368.82
Payment Received	-368.82
Current Charges	331.84
Additional Fees	55.00
Payment Plan	102.66
<b>Total Account Balance</b>	<b>\$ 489.50</b>

Service From	Service To	Meter Number	Days of Service	Prior Reading	Current Reading	Consumption in CCF	Consumption in Gallons
12/29/21	03/30/22	14219852	91	481	515	34	25432

Service Address: 5166 NW 83RD CT



Water Charges



Water Charges	98.21
Hydrant Charge	2.40
<b>Water Charges Subtotal</b>	<b>\$ 100.61</b>

Additional Fees

CONP Field Visit Charge	\$ 20.00
Reconnect Charge Fee	\$ 35.00

For more information see back of bill

Return this portion with Payment

Miami-Dade Water and Sewer Department  
P O Box 026055  
Miami, FL 33102-6055

Account Number	Past Due Date	Amount Due (US \$)	Amount Enclosed
[REDACTED]	04/26/2022	\$ 489.50	Thank you for your prompt payment

- Payment in US funds must be received by the past due date to avoid discontinuance of service. A 10% late charge will be assessed if payment is not received by the past due date
- ☐ Check box for address change. Please print changes on reverse side.


- Pay by phone or Online:  
1-800-565-1800 checking/savings  
1-800-510-0880 credit card

[www.miamidade.gov/water](http://www.miamidade.gov/water)

NICOLE REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300



40996734231 000000000048950

Name: NICOLE REINOSO  
Account Number:   
Billing Date: 07/05/2022  
Past Due Date: 07/26/2022

Billing Inquiries (hours 8:00 AM - 7:00 PM) 305-665-7477  
Report any hazardous conditions to 305-274-9272  
Water Conservation Program Information- Call 311

Page 1 of 3

**Messages**

*Failure to address higher than normal bills within 30 days of their issue date may disqualify requests for possible bill credits.*

*Go green by enrolling in Paperless Billing and/or Auto Pay. Pay your bill and view your account on-line at [www.miamidade.gov/water](http://www.miamidade.gov/water). To pay by phone using your bank account, call 1-800-565-1800. To use a credit card call 1-800-510-0880.*

*The use of fertilizers is restricted during the rainy season, May 15th - October 31st. For more details, please visit [www.miamidade.gov/fertilizer](http://www.miamidade.gov/fertilizer).*

**Account Summary**

Previous Balance	\$ 489.50
Payment Received	-489.50
Current Charges	287.05
Additional Fees	84.26
Payment Plan	102.66
<b>Total Account Balance</b>	<b>\$ 473.97</b>

Service From	Service To	Meter Number	Days of Service	Prior Reading	Current Reading	Consumption in CCF	Consumption in Gallons
03/30/22	06/28/22	14219852	90	515	545	30	22440

**Service Address:** 5166 NW 83RD CT



**Water Charges**




Water Charges	84.52
Hydrant Charge	2.40
<b>Water Charges Subtotal</b>	<b>\$ 86.92</b>

**Additional Fees**

Reconnect Charge Fee	\$ 35.00
CONP Field Visit Charge	\$ 20.00
Late Payment Fee	\$ 10.06

For more information see back of bill  
Return this portion with Payment

**Miami-Dade Water and Sewer Department**  
**P O Box 026055**  
**Miami, FL 33102-6055**

Account Number	Past Due Date	Amount Due (US \$)	Amount Enclosed
	07/26/2022	\$ 473.97	Thank you for your prompt payment

- Payment in US funds must be received by the past due date to avoid discontinuance of service. A 10% late charge will be assessed if payment is not received by the past due date

☐ Check box for address change. Please print changes on reverse side.

- Pay by phone or Online:

1-800-565-1800 checking/savings

1-800-510-0880 credit card

[www.miamidade.gov/water](http://www.miamidade.gov/water)

NICOLE REINOSO

5166 NW 83RD CT

DORAL FL 33166-5300



40996734231 000000000047397

21101607

011608



Name: NICOLE REINOSO  
Account Number: [REDACTED]  
Billing Date: 10/04/2022  
Past Due Date: 10/25/2022

Billing Inquiries (hours 8:00 AM - 7:00 PM) 305-665-7477  
Report any hazardous conditions to 305-274-9272  
Water Conservation Program Information- Call 311

Page 1 of 3

**Messages**

Failure to address higher than normal bills within 30 days of their issue date may disqualify requests for possible bill credits.

Go green by enrolling in Paperless Billing and/or Auto Pay. Pay your bill and view your account on-line at [www.miamidade.gov/water](http://www.miamidade.gov/water). To pay by phone using your bank account, call 1-800-565-1800. To use a credit card call 1-800-510-0880.

The use of fertilizers is restricted during the rainy season, May 15th - October 31st. For more details, please visit [www.miamidade.gov/fertilizer](http://www.miamidade.gov/fertilizer).

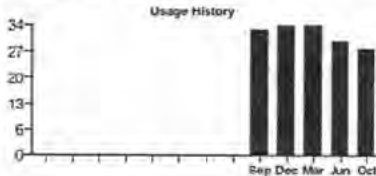
**Account Summary**

Previous Balance	\$ 473.97
Payment Received	-473.97
Current Charges	264.79
Payment Plan	102.66
<b>Total Account Balance</b>	<b>\$ 367.45</b>

Service From	Service To	Meter Number	Days of Service	Prior Reading	Current Reading	Consumption in CCF	Consumption in Gallons
06/28/22	10/01/22	14219852	95	545	573	28	20944

**Service Address:** 5166 NW 83RD CT

**Water Charges**



Water Charges 77.72  
Hydrant Charge 2.40  
**Water Charges Subtotal** **\$ 80.12**

For more information see back of bill  
Return this portion with Payment  
**Miami-Dade Water and Sewer Department**  
P O Box 026055  
Miami, FL 33102-6055

Account Number	Past Due Date	Amount Due (US \$)	Amount Enclosed
[REDACTED]	10/25/2022	\$ 367.45	Thank you for your prompt payment

- \* Payment in US funds must be received by the past due date to avoid discontinuance of service. A 10% late charge will be assessed if payment is not received by the past due date
- ☐ Check box for address change. Please print changes on reverse side.

- \* Pay by phone or Online:  
1-800-565-1800 checking/savings  
1-800-510-0880 credit card [www.miamidade.gov/water](http://www.miamidade.gov/water)

NICOLE REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300



21100008

010009

Name: NICOLE REINOSO  
Account Number: XXXXXXXXXX  
Billing Date: 01/04/2023  
Past Due Date: 01/25/2023

Billing Inquiries (hours 8:00 AM - 7:00 PM) 305-665-7477  
Report any hazardous conditions to 305-274-9272  
Water Conservation Program Information- Call 311

Page 1 of 3

**Messages**

*Go green by enrolling in Paperless Billing and/or Auto Pay. Pay your bill and view your account on-line at [www.miamidade.gov/water](http://www.miamidade.gov/water). To pay by phone using your bank account, call 1-800-565-1800. To use a credit card call 1-800-510-0880.*

*Failure to address higher than normal bills within 30 days of their issue date may disqualify requests for possible bill credits.*

**Account Summary**

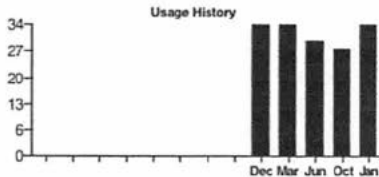
Previous Balance	\$ 367.45
Payment Received	-367.45
Current Charges	347.70
Payment Plan	102.66
<b>Total Account Balance</b>	<b>\$ 450.36</b>

Service From	Service To	Meter Number	Days of Service	Prior Reading	Current Reading	Consumption in CCF	Consumption in Gallons
10/01/22	01/03/23	14219852	94	573	607	34	25432

**Service Address:** 5166 NW 83RD CT



**Water Charges**



Water Charges	103.12
Hydrant Charge	2.40
<b>Water Charges Subtotal</b>	<b>\$ 105.52</b>

For more information see back of bill  
Return this portion with Payment  
**Miami-Dade Water and Sewer Department**  
P O Box 026055  
Miami, FL 33102-6055

Account Number	Past Due Date	Amount Due (US \$)	Amount Enclosed
<span style="background-color: black; color: black;">XXXXXXXXXX</span>	01/25/2023	\$ 450.36	Thank you for your prompt payment

- Payment in US funds must be received by the past due date to avoid discontinuance of service. A 10% late charge will be assessed if payment is not received by the past due date

☐ Check box for address change. Please print changes on reverse side.

- Pay by phone or Online:  
1-800-565-1800 checking/savings  
1-800-510-0880 credit card

[www.miamidade.gov/water](http://www.miamidade.gov/water)

NICOLE REINOSO  
5166 NW 83RD CT  
DORAL FL 33166-5300



40996734231 000000000045036

21100048



010049



**Tower Hill Insurance**

Post Office Box 147018  
Gainesville, FL 32614-7018

8 JUL '24 PM12:40 *CS*

Nicole Reinoso  
8477 NW 51ST TER  
DORAL, FL 33166

00101000000 W014974741 761640 SDEC D





B JUL '24 PM12:40

CP

November 30, 2022

Dear Nicole,

Thank you for choosing Tower Hill Insurance for your home insurance needs. Founded in 1972, Tower Hill has been protecting Florida's homes and families for **50 years**. Florida is our home too, so we understand better than most what it means when a storm or hurricane is on the horizon. In partnership with your local insurance agency, we're dedicated to providing you with *peace of mind* during storm season *and* all year round.

We're committed to being there when you need us most, helping you to repair or rebuild as quickly as possible when your home is damaged. **CastleCare**, our network of credentialed contractors exclusively for Tower Hill customers, provides expert repair service in specialty areas ranging from fire mitigation to roofing, and general construction to plumbing. When your home has a covered loss, CastleCare also provides emergency repair services 24/7 such as water extraction, board up and roof tarping. Contact **CastleCare 24/7 at 844.TOWER.11 (844.869.3711)**.

### YOUR INSURANCE POLICY

We're excited to welcome you as a subscriber of our newest member in the Tower Hill Family of Companies, Tower Hill Insurance Exchange (Exchange). Exchange is a reciprocal insurer whereby the policyholders, also known as members or subscribers, insure each other and share in the underwriting profits generated via subscriber savings accounts (SSA).

**Please return your signed agreement** to us electronically, online through your Customer Portal account, by email, by mail, or provide to your insurance agent for submission.

#### **Electronically**

Scan the QR code below using your smart phone or mobile device, or click here to access your personalized link to your agreement:

<https://oasis.thig.com/ssa/F1CGSOCRQ2M-FBPAJESIPG>



#### **Online**

Log in to your secure account at [THIG.com/Portal](https://THIG.com/Portal). Then follow the prompts to review and digitally sign the agreement.

#### **Email**

Scan in your signed agreement and email a copy to us at [TowerExchange@THIG.com](mailto:TowerExchange@THIG.com).

#### **Mail**

Send your signed agreement to us at Tower Hill Insurance Group / ATTN: UW Operations / PO Box 147018 / Gainesville, FL 32614-7018.

Please refer to your enclosed policy declarations page for important details about your coverages. For quick reference, below is some key information related to your insurance policy for the following location:  
**8477 NW 51ST TER, DORAL, FL 33166.**





8 JUL '24 PM12:40

4

## **TOWER HILL INSURANCE EXCHANGE**

### **Summary of Subscriber's Agreement and Power of Attorney**

Tower Hill Insurance Exchange ("Tower Hill Exchange") is a reciprocal insurance exchange organized under the laws of Florida, existing for the benefit of its subscribers. As a reciprocal insurance exchange, Tower Hill Exchange is an unincorporated association of subscribers operating through the contractual arrangements set forth in a Subscriber's Agreement and Power of Attorney (the "Agreement"). Under Florida law and pursuant to the Agreement, Tower Hill Exchange and its subscribers appoint a third party, known as an attorney-in-fact, to manage and administer Tower Hill Exchange's operations and affairs on behalf of all of the subscribers.

The attached Agreement provides the terms of your relationship with Tower Hill Exchange and appoints Tower Hill Risk Management, LLC, a Florida limited liability company ("Tower Hill Risk Management"), as Tower Hill Exchange's attorney-in-fact. **Please review the attached Agreement and sign below to acknowledge your intention to be legally bound by the terms and conditions of the Agreement.**

A summary of certain key business provisions of the Agreement is set forth below:

**Non-Assessable Policies:** Tower Hill Exchange will only issue non-assessable policies consistent with all applicable state statutes. Your liability as a subscriber of Tower Hill Exchange is limited to the costs of your insurance including premiums and surplus contributions (described below) for your policies.

**Surplus Contributions:** Along with your policy premium, you will pay surplus contributions to Tower Hill Exchange, which lowers Tower Hill Exchange's cost of capital and allows it to offer more competitively priced insurance to its subscribers. These contributions will be collected along with your policy premium and are set at 10% of total annual insurance premium. For any given year, Tower Hill Risk Management will have the discretion to lower the required surplus contribution, based on the capital needs of Tower Hill Exchange.

**Management of Tower Hill Exchange:** You will be appointing and designating Tower Hill Risk Management to be the attorney-in-fact for Tower Hill Exchange. Tower Hill Risk Management is a for-profit limited liability company. As the attorney-in-fact, Tower Hill Risk Management will manage all of the insurance operations of Tower Hill Exchange on behalf of you and all of the other subscribers. Tower Hill Risk Management may delegate the performance of some or all of its responsibilities to third parties.

**Subscribers' Advisory Committee:** Tower Hill Exchange has established a Subscribers' Advisory Committee ("SAC") for the benefit of its subscribers. The SAC, an advisory body, will oversee the finances and operations of Tower Hill Exchange to assure conformity with the Agreement and to exercise subscribers' rights under Florida law and the Agreement. The SAC will provide subscribers with an avenue for expressing their thoughts in connection with the operation of Tower Hill Exchange. Tower Hill Exchange will indemnify SAC members for, and you will agree not to sue them in connection with, their service on the SAC. You can learn more about the powers, duties and composition of the SAC and its members by visiting [www.thig.com/thie/sac](http://www.thig.com/thie/sac).

**Management Compensation:** In exchange for services rendered, Tower Hill Exchange will compensate Tower Hill Risk Management 17% of annual gross premium written by the Tower Hill Exchange for marketing and underwriting services. Additionally, Tower Hill Exchange will compensate Tower Hill Claims Service, LLC, and Bluegrass Insurance Management, LLC for claims management pursuant to a Claims Service Agreement and will pay per policy fees to Tower Hill Insurance Group, LLC pursuant to a Managing General Agency Agreement. Tower Hill Risk Management is authorized to utilize Tower Hill Exchange's funds to pay Tower Hill Exchange's expenses, including the cost of any director and officer liability insurance coverages for Tower Hill Risk Management and members of the SAC. These compensation arrangements are governed by the AIF Agreement available at [www.thig.com/thie/aif](http://www.thig.com/thie/aif).

**Subscriber Savings Accounts:** Tower Hill Exchange conducts its operations for the benefit of its subscribers and, as a result, it may, in its discretion, allocate a portion of its profits to its members. Any such distributions will be subject to Tower Hill Exchange's performance, overall financial strength and regulatory approval. Tower Hill Risk Management will contact you directly once more information on member rewards becomes available. For more information, visit [www.thig.com/thie/ssa](http://www.thig.com/thie/ssa).

The above is only a summary of certain provisions of the Agreement and does not purport to describe all of the terms of the Agreement. The summary is qualified in its entirety by reference to the complete text of the Agreement, which is attached hereto. You are urged to read the Agreement in its entirety because it is the primary legal document that governs your contractual relationship with Tower Hill Exchange.

By signing below, you agree, among other things, to become a subscriber of Tower Hill Exchange, to appoint Tower Hill Risk Management as Tower Hill Exchange's attorney-in-fact and to be legally bound by the terms and conditions of the Agreement.

Due to the nature of Tower Hill Exchange's structure, we must have your signature on this document. If you don't sign, by law, we may be unable to continue to provide you with coverage.

**APPLICANT**

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

**CO-APPLICANT**

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

**TOWER HILL INSURANCE EXCHANGE**



Kirk La  
CEO Tower Hill Risk  
Management as Attorney-in-Fact for  
Tower Hill Insurance Exchange





8 JUL '24 PM 12:40 *CR*

## TOWER HILL INSURANCE EXCHANGE Subscriber's Agreement and Power of Attorney

The subscriber to the Tower Hill Insurance Exchange, a reciprocal insurance exchange organized under the laws of Florida ("Tower Hill Exchange"), by signing the summary and cover letter attached hereto (the "Subscriber") agrees with all other subscribers to Tower Hill Exchange, and with Tower Hill Risk Management, LLC, a Florida limited liability company ("Tower Hill Risk Management"), as the attorney-in-fact for Tower Hill Exchange, as follows (this "Agreement"):

### 1. Power of Attorney.

**1.1 Designation.** The Subscriber hereby appoints Tower Hill Risk Management as the Attorney-In-Fact for Tower Hill Exchange with the express power, authority, and permission to effectuate and conduct the lawful business affairs of Tower Hill Exchange. This authority includes the ability to carry out all customary functions of a reciprocal insurance company, including but not limited to the following responsibilities: (a) exchange, with other subscribers to Tower Hill Exchange, any and all kinds of reciprocal insurance contracts, which Tower Hill Exchange is authorized by law to write; (b) issue, exchange, renew, non-renew, cancel or modify insurance policies; (c) act as intermediary to obtain reinsurance; (d) appear for, compromise, prosecute, adjust, settle, defend, litigate, appeal, and pay claims or losses under the insurance policies of subscribers; (e) accept service of process on behalf of Tower Hill Exchange in actions against Tower Hill Exchange upon contracts exchanged; (f) open accounts and borrow money in the name of Tower Hill Exchange; (g) negotiate a contract with and supervise a managing general agent and claims company which will perform services to Tower Hill Exchange; (h) hire and compensate personnel and agents; (i) collect premiums and invest and reinvest funds; (j) receive notices and proof of loss; (k) administer subscriber accounts, including their respective Subscriber Savings Accounts, if applicable, including allocations thereto and distributions therefrom; and (l) to conduct the business and affairs of Tower Hill Exchange as set forth herein, in the organizational documents of Tower Hill Exchange, and the AIF Agreement, dated December 24, 2021, between Tower Hill Exchange and Tower Hill Risk Management (the "AIF Agreement").


**1.2 Limited Power of Attorney.** Under applicable law, this power of attorney may: (a) provide for the right of substitution of the attorney and revocation of the power of attorney and rights thereunder; (b) impose such restrictions upon the exercise of the power as are agreed upon by the subscribers; (c) provide for the exercise of any right reserved to the subscribers directly or through their advisory committee; and (d) contain other lawful provisions deemed advisable. This power of attorney is limited to the purposes described in this Agreement.

**1.3 Offices of Attorney-In-Fact.** The Tower Hill Risk Management offices will be the same as the principal office of Tower Hill Exchange, located at 7201 N.W. 11th Place, Gainesville, Florida 32605. The offices of Tower Hill Exchange or Tower Hill Risk Management may be changed in compliance with the requirements of the laws of the State of Florida and the Subscriber will be promptly notified of any such change of office location and when any such change shall be effective.

**1.4 AIF Agreement.** The AIF Agreement between Tower Hill Exchange and Tower Hill Risk Management, which establishes Tower Hill Risk Management as the attorney-in-fact for Tower Hill Exchange, is incorporated herein by reference and a copy of the AIF Agreement shall be available for review at [www.thig.com/thie/aif](http://www.thig.com/thie/aif), or upon request from Tower Hill Risk Management.



## 2. Compensation of Tower Hill Risk Management.

8 JUL '24 PM12:40 

**2.1 Fees for Services.** In consideration for the services provided to Tower Hill Exchange and under the terms of the AIF Agreement, Tower Hill Risk Management will be compensated for underwriting and marketing management services provided to Tower Hill Exchange. Tower Hill Risk Management will receive as compensation an amount equal to seventeen percent (17%) of the annual gross premium written by Tower Hill Exchange. Additionally, Tower Hill Exchange will compensate Tower Hill Claims Service, LLC, and Bluegrass Insurance Management, LLC for claims management pursuant to a Claims Service Agreement and will pay per policy fees to Tower Hill Insurance Group, LLC pursuant to a Managing General Agency Agreement.

**2.2 Adjustments and Modifications.** Tower Hill Risk Management's total compensation, as set forth in greater detail in the AIF Agreement, may be revised or modified at any time, subject to the prior written approval of the Florida Office of Insurance Regulation. Any changes to the percentages in Section 2.1 are subject to the prior written approval of the Florida Office of Insurance Regulation and, if approved, will be disclosed to you in writing.

**2.3 Expenses.** Tower Hill Exchange will be liable, and will reimburse Tower Hill Risk Management on demand, for losses, loss adjustment expenses, investment expenses and other expenses attributable to the operations of Tower Hill Exchange.

**3. Exchange of Policies.** The Subscriber hereby offers and agrees to exchange policies with the other Tower Hill Exchange subscribers. The Subscriber understands and agrees that the reciprocal insurance contracts to be exchanged hereunder are non-assessable, consistent with section 629.261, Florida Statutes, thereby limiting the liability of the Subscriber to Tower Hill Exchange to the costs associated with the policies of insurance only.

## 4. Subscribers' Advisory Committee:

**4.1 Formation and Role of SAC.** The Subscriber understands that Tower Hill Exchange and Tower Hill Risk Management have established a Subscribers' Advisory Committee (the "SAC") pursuant to section 629.201, Florida Statutes, to exercise any rights reserved to subscribers and assist Tower Hill Risk Management in supervising the operations of Tower Hill Exchange. The duties and powers of the SAC, which are available for review at [www.thig.com/thie/sac](http://www.thig.com/thie/sac) (or upon request), are contained within the Subscribers' Advisory Committee Charter ("SAC Charter"). The Subscriber understands and agrees that the powers of the SAC are limited to those enumerated in the SAC Charter. Members of the SAC are selected annually by Tower Hill Risk Management and the Subscriber agrees that the SAC shall (a) have only the enumerated responsibilities specifically assigned to it, (b) exercise the rights of all subscribers of Tower Hill Exchange, and (c) consist of at least two-thirds current insured subscribers of Tower Hill Exchange who are independent of the attorney-in-fact for Tower Hill Exchange. The Subscriber understands and agrees that the Subscriber is not entitled to directly participate in the management of Tower Hill Exchange unless such Subscriber is a member of the SAC.

**4.2 Supervisory Powers of SAC.** The Subscriber agrees that the SAC will supervise the finances and operations of Tower Hill Exchange to the extent as is necessary to assure conformity with this Agreement and the AIF Agreement. The SAC also shall procure, at the expense of Tower Hill Exchange, an audit of the accounts and records of Tower Hill Exchange and Tower Hill Risk Management.

**4.3 Indemnification of SAC Members.** To the extent permitted by law, the Subscriber agrees that Tower Hill Exchange shall defend and hold harmless each and every member of the SAC from and against any liability that may arise from, or is in any way connected with, such member's participation on the SAC. This hold harmless provision does not apply where the member acted with criminal intent or reckless disregard in the performance of his or her duties as a member of the SAC.

The Subscriber also agrees that such Subscriber will not sue or name in any action or affirmative defense any SAC member or the SAC for actions arising from, or is in any way connected with, such member's participation on the SAC.

## 5. Surplus Contributions.

**5.1 Policy Premium and Surplus Contributions.** The Subscriber agrees to pay his or her policy premium when due and, in addition, to make a contribution to Tower Hill Exchange's surplus in the amounts and during the period of time set forth in 5.2 below (the "Surplus Contribution"). The Subscriber understands and agrees that the amounts paid as Surplus Contributions will be credited as policyholder surplus for the benefit and protection of all Tower Hill Exchange subscribers and that Surplus Contributions made to Tower Hill Exchange are not premiums for insurance.

**5.2 Timing and Amounts of Surplus Contributions.** The Surplus Contributions are payable to Tower Hill Exchange on or prior to the initial effective date of the Subscriber's coverage and within 30 calendar days of the effective date of all endorsements generating an additional premium, or in accordance with any premium finance or payment schedule in effect. The Surplus Contributions shall be paid at no greater than 10% of total annual insurance premiums (and may be charged at a lower rate, or not at all, in the discretion of Tower Hill Risk Management).

**5.3 Purpose of and Limitation on Return of Surplus Contributions.** The Subscriber understands and agrees that the amounts paid as Surplus Contributions will be credited as policyholder surplus for the benefit and protection of all Tower Hill Exchange subscribers, are not premiums for insurance, and may only be returned in limited circumstances. The Subscriber further understands and agrees that the ability of Tower Hill Exchange to return Surplus Contributions to its subscribers is subject to the provisions of this Agreement and is limited by law. Upon the issuance of an insurance policy, or other confirmation of coverage by Tower Hill Exchange, the return of Surplus Contributions can occur only with the approval of Tower Hill Risk Management and the Florida Office of Insurance Regulation, and as set forth in this Agreement. All Surplus Contributions, including those made for previous policy terms, will be retained by Tower Hill Exchange for the benefit of all remaining subscribers. The Subscriber understands and agrees that any return of Surplus Contributions will be subject to the approval of Tower Hill Risk Management, the Florida Office of Insurance Regulation, and the restrictions set forth in Section 7 hereof.

**6. Subscriber Savings Accounts.** Tower Hill Risk Management intends to operate Tower Hill Exchange for the benefit of all of its subscribers and will maintain separate individual Subscriber Savings Accounts ("SSAs") for each subscriber. In years in which Tower Hill Exchange achieves operating profit and surplus growth, after accounting for paid losses, loss reserves and operating and policy acquisition expenses, Tower Hill Risk Management, in its discretion, may credit your SSA with a portion of the amount of Tower Hill Exchange's growth in surplus for a fiscal year. Any such credit will be made pro rata, based on the Subscriber's earned premium for such year. The Subscriber understands and agrees that (a) any contributions to be made to a Subscriber's SSA are based on Tower Hill Exchange's overall results, not the results of any individual subscriber; and (b) any and all such funds allocated to the Subscriber would be considered part of Tower Hill Exchange's surplus and Tower Hill Risk Management would be authorized to use any and all such funds to pay any unsatisfied obligations of Tower Hill Exchange, even after it is credited to a SSA. As set forth in this Agreement, the Subscriber may be eligible for a distribution from its SSA at such time when the Subscriber is no longer insured by Tower Hill Exchange, or at such other times, if determined by Tower Hill Risk Management in its discretion, subject to the approval of the SAC. In order to avoid any impairment to the surplus of Tower Hill Exchange, Tower Hill Risk Management, subject to the approval of the SAC, retains the right to limit the distribution from the SSAs to subscribers whose coverage has been terminated. Furthermore, any payment or allocation to an SSA would be subject to the approval of the Florida Office of Insurance Regulation.

**7. Limitations on Distributions of Surplus Contributions and SSAs.** No payment of a returned Surplus Contribution or a distribution of SSA funds (together, a "Surplus Distribution") will be



made if such payment could risk the financial impairment of Tower Hill Exchange. Surplus Distribution payments may be delayed if, as determined by Tower Hill Risk Management, the total amount of such payments to all applicable subscribers to Tower Hill Exchange, within the preceding 12 months, would exceed the lesser of: (a) ten percent (10%) of the total surplus of Tower Hill Exchange calculated as of the immediately preceding December 31, or (b) the total net income of Tower Hill Exchange before savings allocations and federal income taxes for the calendar year ended as of the immediately preceding December 31. If payment to any subscriber would be delayed pursuant to the requirements set forth in this Section 7, the total amount which may be paid to all subscribers will be paid pro rata to each such subscriber who meets the conditions to receive a Surplus Distribution on an equitable basis as determined by Tower Hill Risk Management in its sole and absolute discretion and as allowed by applicable law. Any payments delayed pursuant to the requirements set forth in this Section 7 will be paid as soon as possible when payment can be made in compliance with this Section 7 and the requirements of the Florida Office of Insurance Regulation. If this Section 7 is found to conflict with other terms of this Agreement, this Section 7 supersedes all other terms and conditions of this Agreement.

**8. Return of Surplus upon Liquidation.** The Subscriber understands and agrees that, in accordance with Section 629.281, Florida Statutes, upon the liquidation of Tower Hill Exchange, the assets of Tower Hill Exchange remaining after discharge of its indebtedness and policy obligations, the return of any contributions of Tower Hill Risk Management or other persons to its surplus made as provided in Section 629.161, Florida Statutes, and the return of any unused premium, savings, or credits then standing on SSAs shall be distributed to its subscribers who were such within the 12 months prior to the last termination of its certificate of authority, according to such reasonable formula as the Florida Office of Insurance Regulation approves.

**9. Rejection of Coverage.** The Subscriber understands and agrees that Tower Hill Exchange has an obligation to its subscribers to maintain strict eligibility and underwriting requirements. Tower Hill Exchange has the right to reject any application for insurance, including this Agreement, and the offer of payment of premium and Surplus Contribution. If such a rejection of coverage occurs after receipt of the Surplus Contribution by Tower Hill Exchange, the Surplus Contribution will be returned to the Subscriber, without payment of interest. An existing subscriber applying for additional lines of coverage is not guaranteed acceptance for those new lines of coverage.

**10. Termination:** This Agreement may be terminated at any time, by the Subscriber or Tower Hill Risk Management, by terminating all insurance policies issued to the Subscriber, subject to applicable policy provisions and applicable law. Upon the termination of all insurance policies issued to the Subscriber, subject to the approval of the Florida Office of Insurance Regulation and as otherwise set forth in this Agreement, the balance remaining in your SSA will be returned to the Subscriber within six months thereafter. In the event that the Subscriber should cease to maintain insurance with Tower Hill Exchange, regardless of whether such insurance is cancelled, rescinded or non-renewed for any reason, you will lose all rights as a subscriber to Tower Hill Exchange.

**11. Acknowledgement of Receipt of Documents.** The Subscriber hereby acknowledges and confirms receipt of and represents and warrants to Tower Hill Exchange and Tower Hill Risk Management that the Subscriber has read and fully understands, the SAC Charter and the AIF Agreement prior to executing this Agreement.

**12. Binding Agreement.** This Agreement will be accepted by Tower Hill Risk Management upon receipt of the Subscriber's executed signature on the cover page. The Subscriber agrees that this Agreement, including the power of attorney set forth herein, will apply to all insurance policies for which the Subscriber has applied, or will apply, with Tower Hill Exchange. The subscriber further agrees and understands that upon acceptance of this Agreement by Tower Hill Risk Management, the terms and conditions of each of this Agreement, the SAC Charter, and the AIF Agreement will be valid and binding upon Tower Hill Risk Management, the Subscriber, and each of the parties' respective personal representatives, administrators, successors, and assigns, as indicated by the Subscriber's signature on the cover page.

**13. General Provisions.**

**13.1 Governing Law.** This Agreement and all matters relating to its validity, interpretation, performance and enforcement shall be governed by and construed in accordance with the substantive laws of the State of Florida, without giving effect to the principles of the conflict of laws or the rules thereof that might require the application of the laws of another jurisdiction.

**13.2 Limitation of Actions.** Absent a finding of criminal or willful misconduct or recklessness and except for legal actions that may arise directly from the Subscriber's insurance policy(ies) or legal actions to enforce this contract, the Subscriber agrees that Tower Hill Exchange will not be sued or named in any action or affirmative defense by the Subscriber.

**13.3 Rules of Construction.** When a reference is made in this Agreement to a Section or subsection, such reference shall be to a Section or subsection of this Agreement unless otherwise indicated. Any capitalized terms used in any attachment to this Agreement but not otherwise defined therein shall have the meanings as defined in this Agreement.

[End of Agreement]





# Tower Hill Insurance Exchange

P.O. Box 147016 Gainesville, FL 32614-7016

8 JUL '24 PM 12:41

## HOMEOWNERS DECLARATIONS

## POLICY NUMBER

**THIS IS NOT A BILL**

Payment notice will be sent separately to: Mortgagee

New  
Issued On:  
11/30/2022

Insured  
Nicole Reinoso  
8477 NW 51ST TER  
DORAL, FL 33166

AGENCY **FLT020**  
YRG Insurance Professionals Inc  
13025 SOUTHWEST 112TH STREET  
MIAMI, FL 33186

PHONE NUMBER: (786) 703-9914

**POLICY PERIOD:** 12/06/2022 to 12/06/2023. Each period begins and ends at 12:01 AM standard time at the insured location.

**INSURED LOCATION:** Same as address shown under Insured.

Coverage is provided where a premium or limit is shown for the coverage.

SECTION I - PROPERTY COVERAGE	LIMIT	SECTION II - LIABILITY COVERAGE	LIMIT
COVERAGE A - Dwelling	\$134,000	COVERAGE E - Personal Liability Each Occurrence	\$100,000
COVERAGE B - Other Structures	N/A		
COVERAGE C - Personal Property	\$10,000	COVERAGE F - Medical Payments to Others Each Person	\$1,000
COVERAGE D - Loss of Use	\$4,000		

### BREAKDOWN OF PREMIUM:

#### Charges

	Limit	Premium
Section I and II Premium		\$1,099.00
Catastrophic Ground Cover Collapse Coverage		Incl
Limited Fungi, Wet or Dry Rot, or Bacteria Coverage	\$10,000/\$10,000	Incl
Loss Assessment Coverage	\$2,000	\$4.00
Sinkhole Loss Coverage		Incl
Unit-Owners Coverage A - Special Coverage		Incl
Emergency Management Preparedness and Assistance Trust Fund (EMPAT) Fee		\$2.00
Florida Insurance Guaranty Association (FIGA) Assessment Fee 07-2022		\$14.34
Florida Insurance Guaranty Association (FIGA) Assessment Fee 2022		\$7.72
Managing General Agency (MGA) Fee		\$25.00
Surplus Contribution		\$110.30

#### Credits

	Premium
Age of Dwelling Credit	Incl
All Other Perils Deductible Credit	Incl
Building Code Effectiveness Grading Schedule (BCEGS) Credit	Incl
Hurricane Deductible Credit	Incl
Residential Windstorm Loss Mitigation Devices Credit	Incl

**Total Policy Premium: \$1,262.36**

### DEDUCTIBLE (Section I Only):

**The Calendar Year Hurricane Deductible is \$6,700 (5% of Coverage A).**  
**The All Other Perils Deductible is \$5,000.**

- In case of loss under Section I, we cover only that part of the covered loss over the deductible stated, unless otherwise stated in your policy.



**Mortgagee Information:**

CC: United Wholesale Mortgage, LLC  
ISAOA/ATIMA  
PO BOX 202028  
FLORENCE, SC 29502-2028  
Loan Id: 1222697789

**Additional Insured:**

CC: Miguel Reinoso  
8477 NW 51 ST  
DORAL, FL 33166

Important: Please notify your agent immediately if the mortgage company shown is incorrect.

**BASIC RATING INFORMATION:**

PROGRAM	FORM CODE	TERRITORY	COUNTY	CONSTRUCTION YEAR	CONSTRUCTION TYPE
TEFLHO	HO-6	320	MIAMI-DADE	2015	Masonry
FIRE PROTECTION CLASS	ROOF TYPE		ROOF MATERIAL		ROOF YEAR
2	Hip		Concrete/Clay Tile - Other Tiles		2015
BUILDING CODE (BCEG) GRADE	WIND PROTECTIVE DEVICE		PROTECTIVE DEVICE		
3	Class A (All Openings)		None		

**PREMIUM SUMMARY:**

Hurricane Premium: \$205.00  
Non-hurricane Premium: \$1,057.36

**Section II Other Location(s):**

NONE

**APPLICABLE FORMS AND ENDORSEMENTS:**

RPI HO 09 COV6 (08/21), HO 00 06 (04/91), HO 04 21 (10/94), HO 04 41 (04/91), HO 04 96 (04/91), HP-0087-00 (10/10), HP-0458-00 (07/21), HP-0800-00 (07/21), HP-1732-00 (08/21), IL-0301-00 (09/11), IL-0503-00 (09/16), IL-P-001 (01/04), IL-WMCA (04/11), Privacy Notice (08/21), RP-0160-00 (06/19), RP-0503-00 (08/18), RP-CKLS HO (08/21), RPI HO 09 2370 (03/08), RPI HO 09 DN (09/06), RPI HO 09 ED (12/08), RPI HO 09 ELE (08/21), RPI HO 09 FCE (09/16), RPI HO 09 HD (09/18), RPI HO 09 OTL (08/21), RPI HO 09 SLC (01/16), RPI HO 09 SP6 (08/21)

**NOTICES:**

- The Surplus Contribution fee is fully earned and will not be prorated if the policy is canceled.
- This policy does not provide Animal Liability coverage.
- This policy does not provide Flood coverage.
- Your Building Code Effectiveness Grading schedule adjustment is -8%. The adjustments can range from a surcharge of 1% to a discount of -12%.
- This Declarations replaces all previously issued policy Declarations, if any. This Declarations together with your policy and endorsements completes your policy. Refer to your policy and endorsements for details regarding your coverages, limits, and exclusions.
- To request the complete copy of your policy including all forms, endorsements, terms and conditions, please contact our Customer Service Center at (800) 342-3407 between the hours of 8:00 am and 6:00 pm, Monday through Friday (Eastern Time), excluding holidays.

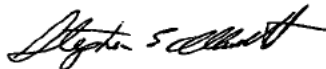
**THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.**

**LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.**

**FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.**

**COUNTERSIGNATURE:**

Countersigned by Authorized Representative:



Stephen E. Allnutt

Prepared: 11/30/2022

**AGENCY PHONE:** (786) 703-9914**CUSTOMER SERVICE:** (800) 342-3407

**QUESTIONS:** If you have questions about your insurance policy or coverages, please contact your agent. If you have payment or billing questions, please call the Customer Service number or contact your agent.

**TO FILE A CLAIM:** Tower Hill Claims Services, LLC **PHONE:** (800) 216-3711 (24 hours a day, 7 days a week)  
PO Box 142230 **FAX:** (352) 332-7999  
Gainesville, FL 32614-2230

**FRAUD HOTLINE:** (866) 265-6590 (Toll Free and Confidential)



**TO SUBMIT AN ASSIGNMENT OF BENEFITS AGREEMENT:**

**Customer Portal:** You can upload files to your claim using your Customer Portal account on your personal computer or mobile device at [THIG.com/Portal](http://THIG.com/Portal).

**Mail:** Tower Hill Claims Services, LLC  
PO Box 142230  
Gainesville, FL 32614-2230

**\*Email:** To submit information via email, please send it to [claims@thig.com](mailto:claims@thig.com) and make sure to include your claim number in the subject line of your email.

\*Email attachments are limited to 25 MB.

**Fax:** (352) 332-7999: As with email, please make sure to include your claim number on the cover sheet.



## USE OF INSURANCE SCORE DISCLOSURE

The Fair Credit Reporting Act (FCRA) requires Tower Hill Insurance Exchange to disclose that a consumer report may be used to determine your insurance policy premium at new business or for a future renewal term. In the event a security freeze is applied to your consumer reports, we will be able to access your report with no action on your part as per FCRA § 605A (i)(4)(H).

Insurance Score is provided by LexisNexis®, a consumer-reporting agency. Tower Hill has implemented Insurance Score as a rating factor in determining policy premiums. LexisNexis only provides the information, they do not make any decisions about your insurance policy, and cannot tell you how your insurance score may have impacted your premium.

If the Insurance Score adversely impacts your policy premium, the individual for whom the consumer report is ordered will receive a *Notice of Consumer Report Ordered and Information Used in Premium Determination*. For Tower Hill, adverse means an increase in any charge for any insurance, existing or applied for, in connection with the underwriting of personal insurance. Insurance Score may be collected on the applicant or on any other member(s) of the applicant's or insured's household as part of the insurance scoring credit process.

Insurance Score is only one of several factors that determines your premium.

If you feel that the information in your consumer report is inaccurate, you have the right to dispute it with LexisNexis. If a correction is made because of your dispute, please contact your insurance agent so we may reconsider our decision.

To receive a free copy of your consumer report, please contact LexisNexis within 60 days of receiving a *Notice of Consumer Report Ordered and Information Used in Premium Determination*.

LexisNexis Consumer Contact Center  
PO Box 105108  
Atlanta, GA 30348  
Phone: 800-456-6004  
Web: [www.consumerdisclosure.com](http://www.consumerdisclosure.com)

## INSURANCE SCORE: FREQUENTLY ASKED QUESTIONS

### **What is an Insurance Score?**

An insurance score is a number calculated from information on your credit report. It is a credit-based statistical analysis of a consumer's likelihood of filing an insurance claim. Insurance Score enables us to offer insurance coverage to more consumers at a fair cost.

### **Is an Insurance Score the same as a Credit Score?**

No. A Credit Score is an indication of your ability to repay borrowed monies. Job history and income may affect your ability to repay a loan. We do not consider job history or income, and we will not use your insurance score to deny you insurance.

Your Policy #	Insurance Company	Policy Effective Date
	Tower Hill Insurance Exchange	December 06, 2022

**YOUR INSURANCE AGENT**


If you have questions about your policy coverages or to request changes to your policy, please contact your insurance agent.

Your Insurance Agency	Phone Number	Agency Email
YRG Insurance Professionals Inc	(786) 703-9914	yesisgomez1@allstate.com

**YOUR ONLINE ACCOUNT AT THIG.COM**

To access your policy documents, pay your bill, or report a claim and track its progress 24/7, create your Tower Hill account online using our secure Customer Portal: <https://customerportal.thig.com/>

**To create your account at THIG.com, you'll need the following:**

Policy Number	Agency Code	ZIP Code (of Location Address)
	T020	33166

*Go green and save time by selecting our eDocs option to receive your notifications by email.*

**Have a question? We're here to help!**

<b>PAYMENTS</b>  <b>THIG.COM or</b> <b>(800) 342-3407</b>	<p>Make a payment online through your secure online account at THIG.com or by phone, using ACH, debit or credit card (VISA, Mastercard, Discover and American Express).</p> <p><i>As a convenience to our customers, we offer the option of debit or credit card payments through our third-party vendor, One Inc. To use this payment option, there is an additional processing fee charged by and paid directly to the vendor.</i></p> <p>When paying your bill by mail, please use the payment coupon and envelope included with your invoice. Write the policy number in the memo field of your check. If you're sending a money order or cashier's check, include your name as listed on your policy.</p> <p><b>MAIL TO:</b> Tower Hill Insurance Group          PO BOX 947001          Atlanta, GA 30394-7001</p>
<b>CUSTOMER SERVICE</b>  <b>(800) 342-3407</b>	<p>Call our Customer Service Center with billing questions, for help with payment plan options, or to make an e-check payment by phone <b>Monday through Friday 8am to 6pm (ET).</b></p>

## CLAIMS

**THIG.COM/PORTAL**  
or  
**(800) 342-3407**

Please report your claim as soon as possible after you experience damage to your home or property. For your convenience, you can report a claim by phone or online (THIG.com/Portal). Using our secure Customer Portal, you can upload photos of damage and supporting documentation to your account. *You can also track the status of your claim on Customer Portal.*

***Need emergency repair services? 844.TOWER.11 (844.869.3711)***

Exclusively for Tower Hill customers, **CastleCare** is our credentialed contractor network program dedicated to assisting you when emergency services, repairs or rebuilding are necessary. Completed projects qualify for CastleCare's Quality Assurance Program, which provides a warranty on workmanship (5 years) and materials (1 year).

**DID YOU KNOW?** Every June through November during hurricane season, we actively conduct outreach via text messages and emails to customers when a geographical area is threatened. Outreach text messages and emails include a personalized link you can use to report storm damage and initiate a claim directly from your mobile device, even if you don't have your policy number handy. *To receive these timely updates during hurricane season, please be sure to provide us with your mobile number and email address.*

We value you as a customer and will work tirelessly to deserve the trust you have placed in us.  
***To Protect Your Castle, Look to the Tower.***

Tower Hill Insurance

8 JUL '24 PM12:42

*cr*





Tower Hill Insurance

Post Office Box 147018  
Gainesville, FL 32614-7018

8 JUL '24 PM12:42 *CR*

Nicole Reinoso  
8477 NW 51ST TER  
DORAL, FL 33166

00100400000 W014974741 882518 SDEC D



8 JUL '24 PM 12:42 *cr*

June 19, 2024

Dear Nicole,

Enclosed is your Exchange policy amendment, effective May 9, 2024, for your property located at 8477 NW 51ST TER in DORAL, FL.

Please be sure to review this amendment carefully, noting any changes to your coverages. We recommend that you keep this letter and the enclosures with your insurance policy for your reference. If this amendment affects your policy premium, the amount will be indicated on your enclosed declarations page.

#### YOUR INSURANCE AGENT

If you have questions about your policy coverages or to request changes to your policy, please contact your insurance agent.

Your Insurance Agency	Phone Number	Agency Email
YRG Insurance Professionals Inc	(786) 703-9914	yesisgomez1@allstate.com

#### YOUR ONLINE ACCOUNT AT THIG.COM

To access your policy documents, pay your bill, or report a claim and track its progress 24/7, create your Tower Hill account online using our secure Customer Portal: <https://thig.com/portal>.

**To create your account at THIG.com, you'll need the following:**

Policy Number	Agency Code	ZIP Code (of Location Address)
██████████	T020	33166

*Go green and save time by selecting our eDocs option to receive your notifications by email.*

#### CASTLECARE

**We're committed to being there when you need us most**, helping you to repair or rebuild as quickly as possible when your home is damaged. **CastleCare**, our network of credential contractors exclusively for Tower Hill customers, provides expert repair service in specialty areas ranging from fire mitigation to roofing, and general construction to plumbing. When your home has a covered loss, CastleCare also provides emergency repair services 24/7 such as water extraction, board up and roof tarping. **Contact CastleCare 24/7 at 844.TOWER.11 (844.869.3711).**

<p><b>PAYMENTS</b></p> <p><b>THIG.COM or (800) 342-3407</b></p>	<p>Make a payment online through your secure online account at THIG.com or by phone, using ACH, debit or credit card (VISA, Mastercard, Discover and American Express).</p> <p>As a convenience to our customers, we offer the option of debit or credit card payments through our third-party vendor, One Inc. To use this payment option, there is an additional processing fee charged by and paid directly to the vendor.</p> <p>When paying your bill by mail, please use the payment coupon and envelope included with your invoice. Write the policy number in the memo field of your check. If you're sending a money order or cashier's check, include your name as listed on your policy.</p> <p><b>MAIL TO:</b> Tower Hill Insurance Group PO BOX 947001 Atlanta, GA 30394-7001</p>
<p><b>CUSTOMER SERVICE</b></p> <p><b>(800) 342-3407</b></p>	<p>Call our Customer Service Center with billing questions, for help with payment plan options, or to make an e-check payment by phone <b>Monday through Friday 8am to 6pm (ET).</b></p>
<p><b>CLAIMS</b></p> <p><b>THIG.COM/PORTAL or (800) 342-3407</b></p>	<p>Please report your claim as soon as possible after you experience damage to your home or property. For your convenience, you can report a claim by phone or online (THIG.com/Portal). Using our secure Customer Portal, you can upload photos of damage and supporting documentation to your account. <i>You can also track the status of your claim on Customer Portal.</i></p> <p><b>Need emergency repair services? 844.TOWER.11 (844.869.3711)</b></p> <p>Exclusively for Tower Hill customers, <b>CastleCare</b> is our credentialed contractor network program dedicated to assisting you when emergency services, repairs or rebuilding are necessary. Completed projects qualify for CastleCare's Quality Assurance Program, which provides a warranty on workmanship (5 years) and materials (1 year).</p>

We value you as a customer and will work tirelessly to deserve the trust you have placed in us.  
**To Protect Your Castle, Look to the Tower.**

Tower Hill Insurance





# Tower Hill Insurance Exchange

P.O. Box 147018 Gainesville, FL 32614-7018

8 JUL '24 PM12:42

cr

## HOMEOWNERS DECLARATIONS

## POLICY NUMBER

**THIS IS NOT A BILL**

Payment notice will be sent separately to: Mortgagee

Amended  
Change Effective:  
05/09/2024

Insured  
Nicole Reinoso  
8477 NW 51ST TER  
DORAL, FL 33166

AGENCY  
YRG Insurance Professionals Inc  
13025 SOUTHWEST 112TH STREET  
MIAMI, FL 33186

PHONE NUMBER: (786) 703-9914

**POLICY PERIOD:** 12/06/2023 to 12/06/2024. Each period begins and ends at 12:01 AM standard time at the insured location.

**INSURED LOCATION:** Same as address shown under Insured.

Coverage is provided where a premium or limit is shown for the coverage.

SECTION I - PROPERTY COVERAGE	LIMIT	SECTION II - LIABILITY COVERAGE	LIMIT
COVERAGE A - Dwelling	\$148,000	COVERAGE E - Personal Liability	\$100,000
COVERAGE B - Other Structures	N/A	Each Occurrence	
COVERAGE C - Personal Property	\$10,000	COVERAGE F - Medical Payments to Others	\$1,000
COVERAGE D - Loss of Use	\$4,000	Each Person	

### BREAKDOWN OF PREMIUM:

#### Charges

	Limit	Premium
Section I and II Premium		\$1,980.00
Catastrophic Ground Cover Collapse Coverage		Incl
Limited Fungi, Wet or Dry Rot, or Bacteria Coverage	\$10,000/\$10,000	Incl
Loss Assessment Coverage	\$2,000	\$4.00
Sinkhole Loss Coverage		Incl
Unit-Owners Coverage A - Special Coverage		Incl
Emergency Management Preparedness and Assistance Trust Fund (EMPAT) Fee		\$2.00
Florida Insurance Guaranty Association (FIGA) Assessment Fee 2022		\$8.44
Florida Insurance Guaranty Association (FIGA) Emergency Assessment Fee 2023		\$12.06
Managing General Agency (MGA) Fee		\$25.00
Surplus Contribution		\$120.60

#### Credits

	Premium
Age of Dwelling Credit	-\$452.00
Building Code Effectiveness Grading Schedule (BCEGS) Credit	Incl
Deductible Options	-\$326.00
Residential Windstorm Loss Mitigation Devices Credit	Incl

**Total Policy Premium:**

**\$1,374.10**

### DEDUCTIBLE (Section I Only):

**The Calendar Year Hurricane Deductible is \$7,400 (5% of Coverage A).**  
**The All Other Perils Deductible is \$5,000.**

- In case of loss under Section I, we cover only that part of the covered loss over the deductible stated, unless otherwise stated in your policy.

**Mortgagee Information:**

CC: NATIONSTAR MORTGAGE LLC  
ITS SUCCESSORS AND/OR ASSIGNS  
PO BOX 7729  
SPRINGFIELD, OH 45501-7729  
Loan Id: 0732641238

**Additional Insured:**

CC: Miguel Reinoso  
8477 NW 51 ST  
DORAL, FL 33166

8 JUL '24 PM 12:42

CB

Important: Please notify your agent immediately if the mortgage company shown is incorrect.

**BASIC RATING INFORMATION:**

PROGRAM	FORM CODE	TERRITORY	COUNTY	CONSTRUCTION YEAR	CONSTRUCTION TYPE
TEFLHO	HO-6	320	MIAMI-DADE	2015	Masonry
FIRE PROTECTION CLASS	ROOF TYPE	ROOF MATERIAL			ROOF YEAR
2	Hip	Concrete/Clay Tile - Other Tiles			2015
BUILDING CODE (BCEG) GRADE	WIND PROTECTIVE DEVICE	PROTECTIVE DEVICE			
3	Class A (All Openings)	None			

**PREMIUM SUMMARY:**

Hurricane Premium: \$220.00  
Non-hurricane Premium: \$1,154.10

**Section II Other Location(s):**

NONE


**APPLICABLE FORMS AND ENDORSEMENTS:**

RPI HO 09 COV6 (08/21), HO 00 06 (04/91), HO 04 21 (10/94), HO 04 41 (04/91), HO 04 96 (04/91), HP-0087-00 (10/10), HP-0458-00 (07/21), HP-0800-00 (07/21), HP-1732-00 (08/21), IL-0001 (11/01), IL-0010 (02/11), IL-0301-00 (09/11), IL-0503-00 (09/16), IL-P-001 (01/04), IL-WMCA (04/11), Privacy Notice (08/21), RP-0160-00 (06/19), RP-0503-00 (08/18), RP-CKLS HO (08/21), RPI HO 09 2370 (03/08), RPI HO 09 DN (09/06), RPI HO 09 ED (12/08), RPI HO 09 ELE (08/21), RPI HO 09 FCE (09/16), RPI HO 09 HD (09/18), RPI HO 09 OTL (08/21), RPI HO 09 SLC (01/16), RPI HO 09 SP6 (01/23)

**NOTICES:**

- Amended Declarations: Mortgagee information has changed
- This change did not affect the total premium.
- **This policy does not provide Animal Liability coverage.**
- **This policy does not provide Flood coverage.**
- Your Building Code Effectiveness Grading schedule adjustment is -8.00%. The adjustments can range from a surcharge of 1.00% to a discount of -12.00%.
- This Declarations replaces all previously issued policy Declarations, if any. This Declarations together with your policy and endorsements completes your policy. Refer to your policy and endorsements for details regarding your coverages, limits, and exclusions.
- To request the complete copy of your policy including all forms, endorsements, terms and conditions, please contact our Customer Service Center at (800) 342-3407 between the hours of 8:00 am and 6:00 pm, Monday through Friday (Eastern Time), excluding holidays.



8 JUL '24 PM12:42 

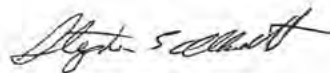
**THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.**

**LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.**

**FLOOD INSURANCE: YOU SHOULD CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOUR UNCOVERED LOSSES CAUSED BY FLOOD ARE NOT COVERED. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.**

**COUNTERSIGNATURE:**

Countersigned by Authorized Representative:



Stephen E. Allnutt

Prepared: 06/18/2024

**AGENCY PHONE:** (786) 703-9914**CUSTOMER SERVICE:** (800) 342-3407

**QUESTIONS:** If you have questions about your insurance policy or coverages, please contact your agent.  
If you have payment or billing questions, please call the Customer Service number or contact your agent.

**TO FILE A CLAIM:** Tower Hill Claims Services, LLC  
PO Box 142230  
Gainesville, FL 32614-2230

**PHONE:** (800) 216-3711 (24 hours a day, 7 days a week)  
**FAX:** (352) 332-7999

**FRAUD HOTLINE:** (866) 265-6590 (Toll Free and Confidential)



CFN: 20220928749 BOOK 33500 PAGE 4683  
DATE: 12/13/2022 02:47:02 PM  
DEED DOC 4,500.00  
HARVEY RUVIN, CLERK OF COURT, MIA-DADE CTY

**THIS INSTRUMENT PREPARED BY:**

Barry S. Bendetowies, Esq.  
Barry S. Bendetowies, P.A.  
10100 W. Sample Road, Suite 202  
Coral Springs, FL 33065  
Our File No.: 84775ALE

**AND RETURN TO:**

Titles Unlimited, Inc.  
7925 SW 24<sup>th</sup> St.  
Miami, FL 33166

Property Appraisers Parcel Identification (Folio) Number: 35-3022-035-0210  
Deed Documentary Stamps have been paid hereon.

8 JUL '24 PM 12:42 

SPACE ABOVE THIS LINE FOR RECORDING DATA

## WARRANTY DEED

THIS WARRANTY DEED, made the 9<sup>th</sup> day of December, 2022 by RAFFAELE ANTONIO ANTINUCCI SERRANO and KATIUSCA DEL VALLE GONZALEZ FARIAS, husband and wife, whose post office address is 7547 NW 52ND ST, MIAMI, FL 33166 herein called the Grantors, to MIGUEL A. REINOSO and NICOLE A. REINOSO, husband and wife, whose post office address is 8477 NW 51 TER, DORAL, FL 33166, hereinafter called the Grantees: (Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

**WITNESSETH:** That the Grantors, for and in consideration of the sum of TEN AND 00/100'S (\$10.00) Dollars and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, allens, remises, releases, conveys and confirms unto the Grantee all that certain land situate in MIAMI-DADE County, State of Florida, viz.:

**Lot 1, Block 4, Downtown Doral Dutcher Plat, according to the plat thereof, as recorded in Plat Book 170, Page 70, Public Records of Miami-Dade County, Florida.**

**Subject to easements, restrictions and reservations of record and taxes for the year 2023 and thereafter.**

**TOGETHER**, with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

**TO HAVE AND TO HOLD**, the same in fee simple forever.

**AND**, the Grantors hereby covenant with said Grantees that the Grantors are lawfully seized of said land in fee simple; that the Grantors have good right and lawful authority to sell and convey said land, and hereby warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2022.

CFN: 20220928749 BOOK 33500 PAGE 4684

IN WITNESS WHEREOF, the said Grantors have signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Gina Salcedo  
Witness #1 Signature

Gina Salcedo  
Witness #1 Printed Name

Maria Teresa Alejo  
Witness #2 Signature

Maria Teresa Alejo  
Witness #2 Printed Name

Raffaele Antonio Antinucci Serrano  
RAFFAELE ANTONIO ANTINUCCI SERRANO

Katusca Del Valle Gonzalez Farias  
KATIUSCA DEL VALLE GONZALEZ FARIAS

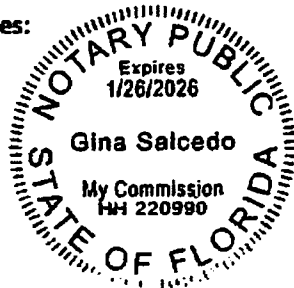
State of Florida

County of Miami-Dade

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 22 day of December, 2022, by RAFFAELE ANTONIO ANTINUCCI SERRANO and KATIUSCA DEL VALLE GONZALEZ FARIAS, who are personally known to me or have produced \_\_\_\_\_ as identification and ☐ did ☐ did not take an oath.

SEAL

My commission expires:



Gina Salcedo  
Notary Public  
Gina Salcedo  
Printed Notary Name

CFN: 20220928749 BOOK 33500 PAGE 4685

8 JUL '24 PM 12:42 *cl***DOWNTOWN DORAL TOWNHOMES HOA****CERTIFICATE OF APPROVAL OF SALE**

**DOWNTOWN DORAL TOWNHOMES HOA** "the Association", does hereby certify that the Sale located at 8477 NW 51 TER, Doral, Florida 33166 a home owned by RAFFAELE A ANTINUCCI SERRANO & KATIUSKA D VALLE GONZALEZ FARIA, (current owner(s) according to the records of the Association) as Grantor(s), to NICOLE REINOSO & MIGUEL REINOSO Grantee(s), has been approved by the Board of Directors on behalf of the Association.

Dated this 23 day of November, 2022.

**DOWNTOWN DORAL TOWNHOMES HOA**

By: \_\_\_\_\_

Name: Patrizia Mathropanu, LCMTitle: Property Managerfor Board of Directors Member

FOR AN ACKNOWLEDGEMENT IN AN INDIVIDUAL CAPACITY:

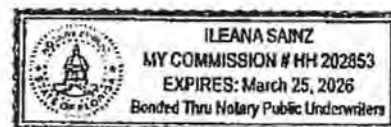
STATE OF FLORIDA

COUNTY OF DADE

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of November, 2022 by Patrizia Mathropanu as member of the Board of Directors of **DOWNTOWN DORAL TOWNHOMES HOA** who acknowledges that he/she as an officer of said Association, executed the above Certificate of Approval of Sale and that same is the act and deed of said Association.

Personally Known: ☒ or Produced Identification \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_



(NOTARY SEAL)

**NOTARY PUBLIC-STATE OF FLORIDA****THIS CERTIFICATE IS SUBJECT TO ANY MONIES DUE TO THE ASSOCIATION**

**YOU ARE ADVISED TO OBTAIN ESTOPPEL INFORMATION BEFORE THE CLOSING TAKES PLACE**  
**AS THE NEW OWNER IS RESPONSIBLE FOR ANY UNPAID ASSESSMENTS AND/OR LEGAL**  
**FEES/COSTS THAT MAY HAVE INCURRED.**

**WE REMIND YOU TO SEND US A COPY OF THE WARRANTY DEED OR CLOSING STATEMENT AFTER THE CLOSING, SO THAT WE MAY MAKE THE NECESARRY CHANGES TO THE ASSOCIATION'S RECORDS. PLEASE MAIL IT TO MIAMI MANAGEMENT, INC., 14275 SW 142 AVE., MIAMI, FL 33186, OR VIA EMAIL TO SCREENINGS@MIAMIMANAGEMENT.COM**



**Electric Bill Statement**

For: Dec 10, 2022 to Jan 3, 2023 (24 days)

Statement Date: Jan 3, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

8 JUL '24 PM 12:43

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$111.40****Jan 24, 2023****BILL SUMMARY**

Balance before new charges	0.00
Total new charges	111.40
<b>Total amount you owe</b>	<b>\$111.40</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission has approved new rates effective Jan. 1, 2023. An additional rate change will take effect on Feb. 1, 2023. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

**KEEP IN MIND**

- Thank you for enrolling in the FPL E-Mail Bill program. Now that you are participating, THIS WILL BE THE LAST PAPER BILL YOU RECEIVE FROM FPL. You will be notified of future bills by e-mail.
- Payments received after January 24, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The amount due on your account will be drafted automatically on or after January 14, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.
- Your current FPL Budget Billing charges are based on actual usage because the billing period is less than a month; bill factors are available upon request. We've installed a smart meter on your property and it's ready to give you information--by the month, day and hour--about your energy use. For more information about the benefits, including how the smart meter will be read remotely, visit [www.fpl.com/smartmeter](https://www.fpl.com/smartmeter).
- The Service/Initial Charge is a one-time charge to defray administrative costs required to start your electric service or to make a change to your account at your request.
- Thank you for choosing FPL's Budget Billing Plan.

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

**/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \***

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$111.40**

TOTAL AMOUNT YOU OWE

**Jan 24, 2023**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED

**Electric Bill Statement**

For: Jan 3, 2023 to Feb 1, 2023 (29 days)

Statement Date: Feb 1, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

8 JUL '24 PM 12:43

**CURRENT BILL****\$284.62****Feb 22, 2023****BILL SUMMARY**

Amount of your last bill	111.40
Payments received	-111.40
Balance before new charges	0.00
Total new charges	284.62
Total amount you owe	\$284.62

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**KEEP IN MIND**

Payments received after February 22, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after February 12, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

The Florida Public Service Commission has approved new rates effective Feb. 1, 2023. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*



NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/paybill)  
for ways to pay.

ACCOUNT NUMBER

\$284.62

TOTAL AMOUNT YOU OWE

Feb 22, 2023

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED



**Electric Bill Statement**

For: Feb 1, 2023 to Mar 2, 2023 (29 days)

Statement Date: Mar 2, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$284.35**

Total Amount Due

**Mar 23, 2023**

NEW CHARGES DUE BY

Stay on Budget Billing  
to avoid seasonal bill  
spikes. Visit  
[FPL.com/BBcustomer](http://FPL.com/BBcustomer)

**KEEP IN MIND**

- Payments received after March 23, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The amount due on your account will be drafted automatically on or after March 13, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

**BILL SUMMARY**

Amount of your last bill	284.62
Payments received	-284.62
Balance before new charges	0.00
Total new charges	284.35
Total amount you owe	\$284.35

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission is reviewing new FPL rates for fuel and storm costs that would take effect in April.  
Learn more at [FPL.com/Rates](http://FPL.com/Rates).

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*



NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
FPL Care To Share: \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](http://FPL.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY  
AMOUNT ENCLOSED



**Electric Bill Statement****For:** Mar 2, 2023 to Apr 3, 2023 (32 days)**Statement Date:** Apr 3, 2023**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$292.69**

TOTAL AMOUNT YOU OWE

**Apr 24, 2023**

NEW CHARGES DUE BY

**KEEP IN MIND**

8 JUL '24 PM 12:43

Payments received after April 24, 2023 are considered late: a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after April 14, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

**BILL SUMMARY**

Amount of your last bill	284.35
Payments received	-284.35
Balance before new charges	0.00
Total new charges	292.69
<b>Total amount you owe</b>	<b>\$292.69</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission has approved new rates effective April 1, 2023. State regulators are reviewing FPL's plan to reduce 2023 fuel costs. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
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ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

AMOUNT ENCLOSED



## Electric Bill Statement

For: Apr 3, 2023 to May 1, 2023 (28 days)

Statement Date: May 1, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

## CURRENT BILL

**\$305.83**

TOTAL AMOUNT DUE

**May 22, 2023**

NEW CHARGES DUE BY

## KEEP IN MIND

- Payments received after May 22, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The amount due on your account will be drafted automatically on or after May 12, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

## BILL SUMMARY

Amount of your last bill	292.69
Payments received	-292.69
Balance before new charges	0.00
Total new charges	305.83
Total amount you owe	<b>\$305.83</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission has approved a new fuel reduction effective May 1, 2023. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

8 JUL '24 PM 12:43



Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*



NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

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ACCOUNT NUMBER

**\$305.83**

TOTAL AMOUNT YOU OWE

**May 22, 2023**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**Electric Bill Statement****For:** May 1, 2023 to Jun 1, 2023 (31 days)**Statement Date:** Jun 1, 2023**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$321.50**

TOTAL AMOUNT YOU OWE

**Jun 22, 2023**

NEW CHARGES DUE

**BILL SUMMARY**

Amount of your last bill	305.83
Payments received	-305.83
Balance before new charges	0.00
Total new charges	321.50
<b>Total amount you owe</b>	<b>\$321.50</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**KEEP IN MIND**

- Payments received after June 22, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The amount due on your account will be drafted automatically on or after June 12, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

State regulators are reviewing FPL's plan to reduce 2023 fuel costs that would take effect in July. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



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ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

AMOUNT ENCLOSED



**Electric Bill Statement**

For: Jun 1, 2023 to Jul 3, 2023 (32 days)

Statement Date: Jul 3, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$337.13**

TOTAL AMOUNT YOU OWE

**Jul 24, 2023**

NEW CHARGES DUE BY

**KEEP IN MIND**

- Payments received after July 24, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The amount due on your account will be drafted automatically on or after July 14, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

**BILL SUMMARY**

Amount of your last bill	321.50
Payments received	-321.50
Balance before new charges	0.00
Total new charges	337.13
Total amount you owe	<b>\$337.13</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

8 JUL '24 PM 12:43



The Florida Public Service Commission has approved a new fuel reduction effective July 1, 2023. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

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ACCOUNT NUMBER

**\$337.13**

TOTAL AMOUNT YOU OWE

**Jul 24, 2023**

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED

**Electric Bill Statement**

For: Jul 3, 2023 to Aug 2, 2023 (30 days)

Statement Date: Aug 2, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$350.48****Aug 23, 2023****BILL SUMMARY**

Amount of your last bill	337.13
Payments received	-337.13
Balance before new charges	0.00

Total new charges	350.48
-------------------	--------

<b>Total amount you owe</b>	<b>\$350.48</b>
-----------------------------	-----------------

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after August 23, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after August 13, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
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for ways to pay.

ACCOUNT NUMBER

\$350.48

TOTAL AMOUNT YOU OWE

Aug 23, 2023

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED





## Electric Bill Statement

For: Aug 2, 2023 to Sep 1, 2023 (30 days)

Statement Date: Sep 1, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

## CURRENT BILL

**\$361.63****Sep 22, 2023**

## BILL SUMMARY

Amount of your last bill	350.48
Payments received	-350.48
Balance before new charges	0.00
Total new charges	361.63
Total amount you owe	\$361.63

FPL automatic bill pay - DO NOT PAY

(See page 2 for bill details.)

## ENERGY USAGE HISTORY



## KEEP IN MIND

Payments received after September 22, 2023 are considered late: a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after September 12, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

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for ways to pay.

ACCOUNT NUMBER

**\$361.63**  
TOTAL AMOUNT YOU OWE**Sep 22, 2023**  
NEW CHARGES DUE BY\$ Auto pay - DO NOT PAY  
AMOUNT ENCLOSED



**Electric Bill Statement**

For: Sep 1, 2023 to Oct 2, 2023 (31 days)

Statement Date: Oct 2, 2023

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$365.04****Oct 23, 2023****BILL SUMMARY**

Amount of your last bill	361.63
Payments received	-361.63
Balance before new charges	0.00
Total new charges	365.04
<b>Total amount you owe</b>	<b>\$365.04</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after October 23, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after October 13, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
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ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY  
AMOUNT ENCLOSED

**Electric Bill Statement****For:** Oct 2, 2023 to Nov 1, 2023 (30 days)**Statement Date:** Nov 1, 2023**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$367.33**

TOTAL AMOUNT YOU OWE

**Nov 22, 2023**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	365.04
Payments received	-365.04
Balance before new charges	0.00

Total new charges	367.33
-------------------	--------

<b>Total amount you owe</b>	<b>\$367.33</b>
-----------------------------	-----------------

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

Subscribe to FPL SolarTogether® and enjoy solar energy with zero upfront costs and no rooftop panels. Available if you rent or own.

[FPL.com/LetsGoSolar](https://www.fpl.com/LetsGoSolar)**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after November 22, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after November 21, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

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MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$367.33**

TOTAL AMOUNT YOU OWE

**Nov 22, 2023**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Nov 1, 2023 to Dec 1, 2023 (30 days)**Statement Date:** Dec 1, 2023**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$368.29**

(TOTAL AMOUNT YOU OWE)

**Dec 22, 2023**

(NEW CHARGES DUE BY)

**BILL SUMMARY**

Amount of your last bill	367.33
Payments received	-367.33
Balance before new charges	0.00
Total new charges	368.29
<b>Total amount you owe</b>	<b>\$368.29</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

The Florida Public Service Commission has approved new rates effective Jan. 1, 2024. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after December 22, 2023 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after December 21, 2023. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

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for ways to pay.

ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY  
AMOUNT ENCLOSED





## Electric Bill Statement

For: Dec 1, 2023 to Jan 2, 2024 (32 days)

Statement Date: Jan 2, 2024

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER

DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

## CURRENT BILL

**\$373.62**

TOTAL CHARGES DUE BY

**Jan 23, 2024**

NEW CHARGES DUE BY

## BILL SUMMARY

Amount of your last bill	368.29
Payments received	-368.29
Balance before new charges	0.00
Total new charges	373.62
Total amount you owe	<b>\$373.62</b>

FPL automatic bill pay - DO NOT PAY

(See page 2 for bill details.)

New rates are in effect. An additional rate change will take effect on Feb. 1, 2024. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).

## ENERGY USAGE HISTORY



## KEEP IN MIND

Payments received after January 23, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after January 22, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:43

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

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for ways to pay.

ACCOUNT NUMBER

\$373.62

TOTAL AMOUNT YOU OWE

Jan 23, 2024

NEW CHARGES DUE BY

\$ Auto pay - DO NOT PAY

AMOUNT ENCLOSED

**Electric Bill Statement**

For: Jan 2, 2024 to Feb 1, 2024 (30 days)

Statement Date: Feb 1, 2024

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$369.62**

TOTAL AMOUNT YOU OWE

**Feb 22, 2024**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	373.62
Payments received	-373.62
Balance before new charges	0.00
Total new charges	369.62
<b>Total amount you owe</b>	<b>\$369.62</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after February 22, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after February 21, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

New February rates are in effect. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).

8 JUL '24 PM 12:43 *ca*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

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for ways to pay.

ACCOUNT NUMBER

**\$369.62**

TOTAL AMOUNT YOU OWE

**Feb 22, 2024**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED



**Electric Bill Statement**

For: Feb 1, 2024 to Mar 1, 2024 (29 days)

Statement Date: Mar 1, 2024

Account Number: [REDACTED]

Service Address:

8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$731.45**

TOTAL AMOUNT YOU OWE

**Mar 22, 2024**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	369.62
Balance before new charges	369.62*
Total new charges	361.83
<b>Total amount you owe</b>	<b>\$731.45</b>

**\*This \$369.62 is PAST DUE -- PLEASE PAY IMMEDIATELY**

(See page 2 for bill details.)

The Florida Public Service Commission has approved a rate decrease that will take effect on April 1. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after March 22, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The total amount you owe includes an amount covered by a short-term payment arrangement. Please pay by the agreed upon date.

8 JUL '24 PM 12:43 *CR*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 27

36962 8301163248916545413700000

NICOLE ALEXANDRA REINOSO  
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DORAL FL 33166-5648

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ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Mar 1, 2024 to Apr 1, 2024 (31 days)**Statement Date:** Apr 1, 2024**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$708.53**

(TOTAL AMOUNT YOU OWE)

**Apr 22, 2024**

(NEW CHARGES DUE BY)

**BILL SUMMARY**

Amount of your last bill	731.45
Payments received	-369.62
Balance before new charges	361.83
Total new charges	346.70
<b>Total amount you owe</b>	<b>\$708.53</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

An approved rate decrease is in effect. FPL has proposed another rate decrease to begin in May. Learn more at [FPL.com/Rates](https://www.fpl.com/Rates).

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after April 22, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after April 21, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

Warning--if your balance remains past due, your account will be removed from FPL's Budget Billing Plan.

8 JUL '24 PM 12:44 *CR*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

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MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

**\$708.53**

TOTAL AMOUNT YOU OWE

**Apr 22, 2024**

NEW CHARGES DUE BY

**\$ Auto pay - DO NOT PAY**

AMOUNT ENCLOSED

**Electric Bill Statement**

For: Apr 1, 2024 to May 1, 2024 (30 days)

**Statement Date:** May 1, 2024**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$329.64**

(TOTAL AMOUNT YOU OWE)

**May 22, 2024**

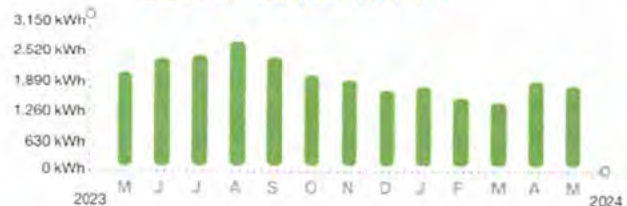
(NEW CHARGES DUE BY)

**BILL SUMMARY**

Amount of your last bill	708.53
Payments received	-708.53
Balance before new charges	0.00
Total new charges	329.64
<b>Total amount you owe</b>	<b>\$329.64</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

An approved rate decrease is in effect. Learn more at [FPL.com/Rates](https://www.fpl.com/rates).**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after May 22, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment. The amount due on your account will be drafted automatically on or after May 21, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:44

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)

/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001Visit [FPL.com/PayBill](https://www.fpl.com/paybill)  
for ways to pay.

ACCOUNT NUMBER

\$329.64  
TOTAL AMOUNT YOU OWEMay 22, 2024  
NEW CHARGES DUE BY\$ Auto pay - DO NOT PAY  
AMOUNT ENCLOSED



**Electric Bill Statement****For:** May 1, 2024 to Jun 3, 2024 (33 days)**Statement Date:** Jun 3, 2024**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$323.20**

TOTAL AMOUNT YOU OWE

**Jun 24, 2024**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	329.64
Payments received	-329.64
Balance before new charges	0.00
Total new charges	323.20
<b>Total amount you owe</b>	<b>\$323.20</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after June 24, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

The amount due on your account will be drafted automatically on or after June 23, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM12:44 *Cr*

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/PayBill)  
for ways to pay.

ACCOUNT NUMBER

TOTAL AMOUNT YOU OWE

NEW CHARGES DUE BY

AMOUNT ENCLOSED



**Electric Bill Statement****For:** Jun 3, 2024 to Jul 2, 2024 (29 days)**Statement Date:** Jul 2, 2024**Account Number:** [REDACTED]**Service Address:**8477 NW 51ST TER  
DORAL, FL 33166

Hello Nicole Alexandra Reinoso,  
Here's what you owe for this billing period.

**CURRENT BILL****\$322.96**

TOTAL AMOUNT YOU OWE

**Jul 23, 2024**

NEW CHARGES DUE BY

**BILL SUMMARY**

Amount of your last bill	323.20
Payments received	-323.20
Balance before new charges	0.00
Total new charges	322.96
<b>Total amount you owe</b>	<b>\$322.96</b>

**FPL automatic bill pay - DO NOT PAY**

(See page 2 for bill details.)

With Florida Public Service Commission approval, FPL will issue a bill credit next month to reflect the final accounting of past hurricane restoration costs. Details at [FPL.com/Rates](https://www.fpl.com/rates).

**ENERGY USAGE HISTORY****KEEP IN MIND**

Payments received after July 23, 2024 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment. The amount due on your account will be drafted automatically on or after July 22, 2024. If a partial payment is received before this date, only the remaining balance due on your account will be drafted automatically.

8 JUL '24 PM 12:44

Customer Service: (305) 442-8770  
Outside Florida: 1-800-226-3545

Report Power Outages: 1-800-4OUTAGE (468-8243)  
Hearing/Speech Impaired: 711 (Relay Service)



/ 3\* FPL AUTOMATIC BILL PAY - DO NOT PAY \*

NICOLE ALEXANDRA REINOSO  
8477 NW 51ST TER  
DORAL FL 33166-5648

The amount enclosed includes  
the following donation:  
**FPL Care To Share:** \_\_\_\_\_

Make check payable to FPL  
in U.S. funds and mail along with  
this coupon to:

FPL  
GENERAL MAIL FACILITY  
MIAMI FL 33188-0001

Visit [FPL.com/PayBill](https://www.fpl.com/paybill)  
for ways to pay.

ACCOUNT NUMBER

**\$322.96**  
TOTAL AMOUNT YOU OWE**Jul 23, 2024**  
NEW CHARGES DUE BY**\$** Auto pay - DO NOT PAY  
AMOUNT ENCLOSED



23-84



21-22

8 JUL '24 PM 12:44 *df*



# CITY OF DORAL

## CANDIDATE AFFIRMATION AND OATH STATEMENT

8 JUL '24 PM12:45 *cr*

My name is Nicole Reinoso

I am a citizen of the United States; I am a bona fide resident and qualified elector (voter) of the City of Doral and have been a bona fide resident and qualified elector (voter) of the City of Doral for at least two (2) years prior to the beginning of the qualifying period for office.

I am a registered voter and a duly qualified elector of the City of Doral, Florida presently registered to vote in precinct No. 370.

I presently reside at the following address (must include zip code):

5166 NW 83rd Ct, Doral, FL 33166,

which is my legal address, and I have resided continually at said address from the

1 (day) of August (month), 2020 (year) to the 31 (day) of  
December (month), 2022 (year)

I have never been convicted of any crime in the State of Florida or any other state or jurisdiction.

**I hereby make this statement under penalty of perjury.**



Before me, an officer authorized to administer oaths, personally appeared Nicole Reinoso to me well known ✓ or who produced \_\_\_\_\_ as identification, who, being sworn, says that he/she is a candidate for the office of Council Seat #3; that he/she has resided in the City of Doral for the past two (2) years; that he/she is a qualified elector of Miami-Dade County, Florida; that he/she qualified under the Constitution and the laws of Florida to hold the office to which he/she seeks election; that he/she has qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with that of the office he/she seeks; that he/she has resigned from any office from which he/she is required to resign pursuant to § 99.012 Florida Statutes; that he/she has never been convicted of any crime in the State of Florida or any other state or jurisdiction; and that he/she will support the Constitution of the United States and the Constitution of the State of Florida.



(Signature of Candidate)

Nicole Reinoso

(Candidate Printed Name)

Sworn to and subscribed before me this 8 day of July, 24 at the City of Doral, Miami-Dade County, Florida.



Connie Diaz, MMC  
City Clerk, City of Doral



# CITY OF DORAL

## CANDIDATE AFFIRMATION AND OATH STATEMENT

8 JUL '24 PM 12:45 *CR*

My name is Nicole Reinoso

I am a citizen of the United States; I am a bona fide resident and qualified elector (voter) of the City of Doral and have been a bona fide resident and qualified elector (voter) of the City of Doral for at least two (2) years prior to the beginning of the qualifying period for office.

I am a registered voter and a duly qualified elector of the City of Doral, Florida presently registered to vote in precinct No. 370.

I presently reside at the following address (must include zip code):

8477 NW 51st Terrace, Doral, FL 33166

which is my legal address, and I have resided continually at said address from the

7 (day) of December (month), 2022 (year) to the — (day) of — (month), — (year) present day

I have never been convicted of any crime in the State of Florida or any other state or jurisdiction.

**I hereby make this statement under penalty of perjury.**



Before me, an officer authorized to administer oaths, personally appeared Nicole Reinoso to me well known ☒ or who produced \_\_\_\_\_ as identification, who, being sworn, says that he/she is a candidate for the office of Council seat #3; that he/she has resided in the City of Doral for the past two (2) years; that he/she is a qualified elector of Miami-Dade County, Florida; that he/she qualified under the Constitution and the laws of Florida to hold the office to which he/she seeks election; that he/she has qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with that of the office he/she seeks; that he/she has resigned from any office from which he/she is required to resign pursuant to § 99.012 Florida Statutes; that he/she has never been convicted of any crime in the State of Florida or any other state or jurisdiction; and that he/she will support the Constitution of the United States and the Constitution of the State of Florida.



(Signature of Candidate)

Nicole Reinoso

(Candidate Printed Name)

Sworn to and subscribed before me this 8 day of July, 24 at the City of Doral, Miami-Dade County, Florida.



Connie Diaz, MMC  
City Clerk, City of Doral



Born to Cuban Puerto Rican parents in San Juan, Puerto Rico, Nicole's parents separated when she was just four years old. Her mother's determination to become a doctor and pursue a better life for her family left a lasting impression on Nicole. Raised by her maternal Cuban grandparents, Nerino and Nereida, alongside her siblings, Nicole learned the values of Christian faith, hard work, compassion, and community involvement. Her grandfather, a dedicated bodega owner, taught her the importance of diligence and service. Her grandmother's nurturing presence provided a foundation of love and support. Together, they instilled in Nicole the significance of giving back to her community and caring for those in need, setting her on a path of lifelong service and dedication to others.

Today, Nicole Reinoso is running for Doral City Council in Seat 3 with a clear vision and dedication to enhance Doral in meaningful ways. Aside from her campaign platform, Nicole aspires to enrich the lives of Doral's seniors by providing them with more engaging activities and fostering partnerships with community organizations. Moreover, she is committed to advocating for children, including those with special needs, by utilizing Doral's parks and resources to ensure they have access to the support and opportunities they deserve. With experience in working for both the City of Doral and in the Miami-Dade County School Board and Administration, Nicole has gained valuable insights into the city's needs and how to effectively solve problems. For Nicole, decisions she makes as a Doral Councilwoman will shape the future for Doral's children so that they grow up in the best city in Florida.



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

*All information on this form becomes a public record upon receipt by the City Clerk.*

*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*


I, Nicole Reinoso the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
05/28/1986	110249808	8477 NW 51st Terrace	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		07/08/2024	





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Paola moreno the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
08/08/1978	123945031	6102 NW 114th #109	
City	County	State	Zip Code
DORAL	MIAMI-DADE	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
Paola moreno		06/21/2024	

8 JUL '24 PM 12:46







# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Marco Billau the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
03/10/1969	130383558	10411NW 48th St	
City	County	State	Zip Code
Doral	Dade	Florida	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/20/2024	

8 JUL '24 PM 12:46 

✓



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*


I, JAVIER VALLADARES the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
10/16/71	109350645	9951 NW 26 ST	
City	County	State	Zip Code
DORAL	MIAMI-DADE	FL	33172
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		6/20/24	

8 JUL '24 PM 12:46 



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

**This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.**

*All information on this form becomes a public record upon receipt by the City Clerk.*

*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Luz Adriana Nodal the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY) <u>06/30/75</u>	Voter Registration Number <u>119406266</u>	Address <u>10750 NW 66 St</u> <u>Apto # 412</u>	
City <u>Doral</u>	County <u>Dade</u>	State <u>FL</u>	Zip Code <u>33178</u>
Signature of Voter <u>[Signature]</u>		Date Signed (MM/DD/YYYY) [to be completed by Voter] <u>6/21/24</u>	

8 JUL '24 PM 12:46

CR

/





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

*All information on this form becomes a public record upon receipt by the City Clerk.*

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, PAULO CESAR SOUZA AMODIO the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY) <u>04/11/1972</u>	Voter Registration Number <u>122020524</u>	Address <u>9755 NW 29 ST</u>	
City <u>DORAL</u>	County <u>MIAMI-DADE</u>	State <u>FL</u>	Zip Code <u>33172</u>
Signature of Voter 		Date Signed (MM/DD/YYYY) [to be completed by Voter] <u>06/21/2024</u>	

8 JUL '24 PM 12:46 

✓



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

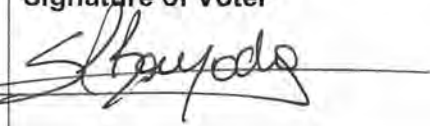
I, Silvina Bouzada the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
11/21/1977	130858822	7130 NW 109 CT	
City	County	State	Zip Code
Doral	<del>Miami</del> Dade	<del>FL</del> Florida	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/21/2024	

8 JUL '24 PM 12:46 



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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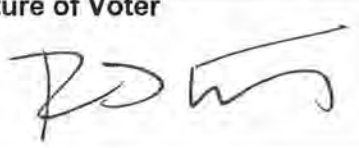
I, Rosa Linares-Ribeiro the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
01/01/1983	121738143	9932 NW 31 st	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33172
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06-21-24	

8 JUL '24 PM 12:46





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

*All information on this form becomes a public record upon receipt by the City Clerk.*

*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Ana Lizeth Apaid the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
03/23/1991	128744880	4725 NW 85th Ave unit 19	
City	County	State	Zip Code
Doral	Miami-Dade	Florida	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		6/16/2024	

8 JUL '24 PM 12:47 CO



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

*All information on this form becomes a public record upon receipt by the City Clerk.*

*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*


I, JORGE ANICAMA the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: NICOLE REINOSO

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

CITY COUNCIL SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY) 03/23/1967	Voter Registration Number 123179340	Address 8224 NW 115 <sup>TH</sup> CT	
City DORAL	County MIAMI-DADE	State FLORIDA	Zip Code 33178
Signature of Voter 		Date Signed (MM/DD/YYYY) [to be completed by Voter] 06/17/2024	

8 JUL '24 PM 12:47

CR ✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Miguel Reinoso the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
11-22-1985	124291517	8477 NWS 1st Terce	
City	County	State	Zip Code
Doral	Miami-Dade	Florida	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		07/04/2024	

8 JUL '24 PM 12:47





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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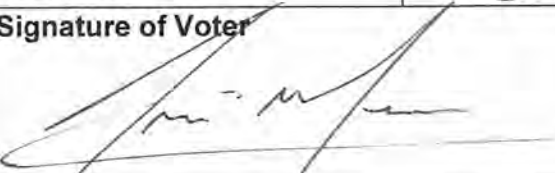
*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*


I, Ivan Miguel Mendoza the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
10/22/1975	109650468	4557 NW 96 <sup>th</sup> Ave	
City	County	State	Zip Code
Doral	Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		07/05/2024	

8 JUL '24 PM 12:47 



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Ana Maria Alfageme the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
08/16/1960	114329976	10720 NW 66 <sup>th</sup> St #212	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
<u>A. Alfageme</u>		06/18/24	

8 JUL '24 PM12:47 CR







# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

*All information on this form becomes a public record upon receipt by the City Clerk.*

*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Annelisse Sandoval the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
11/15/1983	130079029	10775 NW 83 <sup>rd</sup> Ter #6	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
<u>Annelisse Sandoval</u>		07.05.2024	

8 JUL '24 PM 12:47 cr







# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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All information on this form becomes a public record upon receipt by the City Clerk.

It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]

If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.

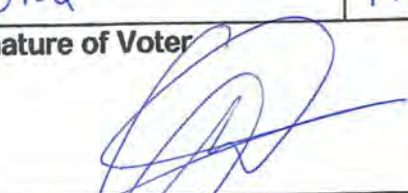
I, Gonzalo Matallana the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
11/07/1989	115 673985	9926 Costa del Sol Blvd	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/19/2024	

8 JUL '24 PM 12:47 

✓



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Megan Campos Huan the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City Council Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
08/26/1981	110311365	4475 NW 81 <sup>st</sup> Ct	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
Megan Campos		06/16/2024	

8 JUL '24 PM 12:47 CO ✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

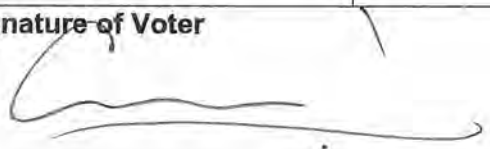
I, Camilo Correa the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
08/01/1964	117543203	8278 NW 46 St.	
City	County	State	Zip Code
Doral		Florida	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06-26-24	

8 JUL '24 PM 12:47 

✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Glenda Correa the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
02/10/1964	116408182	8278 NW 46 St	
City	County	State	Zip Code
Doral		Florida	33166
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
Glenda S. Correa		06-26-24	

8 JUL '24 PM 12:47 *cp*

✓



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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*It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, F.S.]*

*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, Ana Cecilia Mendoza the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
03/04/1981	115427572	4557 NW 96 <sup>th</sup> Ave	
City	County	State	Zip Code
Doral	miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		6/18/2024	

8 JUL '24 PM 12:47 CB

✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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I, CECILIA MATAALLANA the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: NICOLE REINOSO

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
05/25/1961	110093903	9926 Costa del Sol Blvd	
City	County	State	Zip Code
DORAL	miami - Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
Cecilia Mataallana		06/18/2024	

8 JUL '24 PM 12:48

✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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*If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, ENRIQUE MATALLANA SR. the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City of Doral, Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
08/04/1957	117918323	9926 Costa del Sol Blvd.	
City	County	State	Zip Code
DORAL	miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/18/2024	

8 JUL '24 PM 12:48 

✓



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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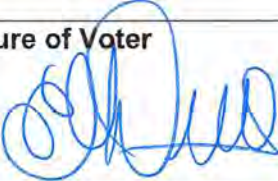
I, DVO, EDUARDO N. the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

SEAT 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY) <u>12/02/1946</u>	Voter Registration Number <u>121884268</u>	Address <u>5125 NW 113 CT</u>	
City <u>DORAL</u>	County <u>MIAMI DADE</u>	State <u>FL</u>	Zip Code <u>33178</u>
Signature of Voter 		Date Signed (MM/DD/YYYY) [to be completed by Voter] <u>06/26/2024</u>	

8 JUL '24 PM 12:48 CD

✓





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

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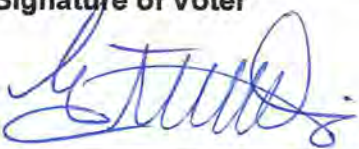
If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.


I, Gustave Stinfil the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

Doral City Council, Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
07/05/65	109359954	6770 NW 109 Ct	
City	County	State	Zip Code
Doral	Miami-Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		07/05/2024	

8 JUL '24 PM 12:48 



# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

***This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.***

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I, PATRICIA LUJAN FERNANDEZ the undersigned, a registered voter in said  
(print name as it appears on your voter information card)


state and county, petition to have the name of: Nicole Meinozo

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

Doral City Council Seat 3

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
06/15/1960	110046236	5570 NW 113 <sup>th</sup> PLACE	
City	County	State	Zip Code
DORAL	MIAMI-DADE	FLORIDA	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/26/2024	

8 JUL '24 PM 12:48 





# CITY OF DORAL

## NOMINATING PETITION FOR CANDIDACY

**This petition must be signed by at least twenty-five (25) electors who have not already signed a nominating petition and are qualified to vote in the election.**

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If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.

I, Juan A. Fernandez the undersigned, a registered voter in said  
(print name as it appears on your voter information card)

state and county, petition to have the name of: Nicole Reinoso

placed on the General Election and/or Special Election Ballot as a candidate for the office of:

City Council Seat 3  
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth (MM/DD/YYYY)	Voter Registration Number	Address	
02/16/1985	110096070	10891 NW 58th Lane	
City	County	State	Zip Code
Doral	Miami Dade	FL	33178
Signature of Voter		Date Signed (MM/DD/YYYY) [to be completed by Voter]	
		06/15/2024	

8 JUL '24 PM 12:48

cr ✓

**Nicole Reinoso Campaign Account**2600 South Douglas Road, Suite 900  
Coral Gables, FL 33134CITY NATIONAL BANK OF FLORIDA  
63-436/660

102

6/26/2024

PAY TO THE  
ORDER OF CITY OF DORAL

\$\*\*200.00

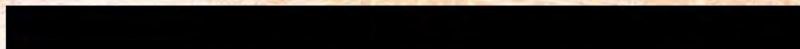
Two Hundred and 00/100\*\*\*\*\* DOLLARS

A PROTECTED AGAINST FRAUD A

CITY OF DORAL  
8401 NW 53RD TERRACE  
DORAL, FL 33166

MEMO

QUALIFYING FEE



Nicole Reinoso Campaign Account

CITY OF DORAL

QUALIFYING FEE

6/26/2024

200.00

102





Nicole Reinoso Campaign Account

2600 South Douglas Road, Suite 900  
Coral Gables, FL 33134

CITY NATIONAL BANK OF FLORIDA  
83-436/660

103

6/26/2024

PAY TO THE  
ORDER OF

CITY OF DORAL

\$\*\*500.00

Five Hundred and 00/100\*\*\*\*\*

DOLLARS

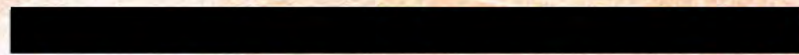
PROTECTED AGAINST FRAUD

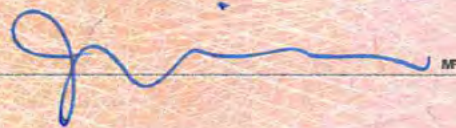
CITY OF DORAL  
8401 NW 53RD TERRACE  
DORAL, FL 33166



MEMO

SIGN BOND



 MP

Nicole Reinoso Campaign Account

CITY OF DORAL

SIGN BOND

6/26/2024

500.00

103

**Nicole Reinoso Campaign Account**  
2600 South Douglas Road, Suite 900  
Coral Gables, FL 33134

CITY NATIONAL BANK OF FLORIDA  
63-436/660

104

6/26/2024

PAY TO THE  
ORDER OF CITY OF DORAL

\$\*\*120.00

One Hundred Twenty and 00/100\*\*\*\*\* DOLLARS

PROTECTED AGAINST FRAUD

CITY OF DORAL  
8401 NW 53RD TERRACE  
DORAL, FL 33166

MEMO

ELECTION ASSESMENT FEE COUNCIL SEAT 3  
[REDACTED]

Nicole Reinoso Campaign Account

CITY OF DORAL

6/26/2024

ELECTION ASSESMENT FEE COUNCIL SEAT 3

120.00