

MIAMI BEACH

OATH OF WITHDRAWAL

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I, Robin Jacobs, have filed as a candidate for the office of Commissioner. I wish to withdraw my name as a candidate for this office.

[Signature]
Signature of Candidate

5/25/21
Date

3605 Flamingo Drive
Address

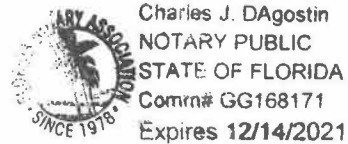
Miami Beach FL 33146
City State Zip Code

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization this 25th day of MAY, 2021 by _____

[Signature]
Signature of Notary Public-State of Florida

(NOTARY SEAL)

Charles DAgostin
Name of Notary Typed, Printed or Stamped



Personally Known OR Produced Identification
Type of Identification Produced FL Driver License

Candidate Withdrawal Policy

The deadline for any candidate to withdraw is the end of qualifying. No qualifying fee shall be returned to the candidate unless the candidate withdraws his or her candidacy before the end of their qualifying period.

(Reference: Florida Statutes 99.092)