

OATH OF WITHDRAWAL

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I. Shawn Vardi	, have filed as a candidate for the office of
Miami Beach City Commission	. I wish to withdraw my name as a candidate for this office.
X/W//i	7-23-21
Signature of Candidate 1220 Stillwater Dr	Date
Address	
Miami Beach City FL State	33141 Zip Code
Sworn to (or affirmed) and subscribed before notarization this 23 day of July	e me by means of X physical presence or online, 2021, by Shawh Jardi
Signature of Notary Public-State of Florida	(NOTARY SEAL)
Aurora Dillon Name of Notary Typed, Printed or Stamped	AURORA DILLON Notary Public – State of Florida Commission # GG 88902 My Comm. Expires Jul 25, 2021 Ronded through National Notary Assn.
Personally Known OR Produced Ide	ntification
Type of Identification Produced	
Candidate Withdrawal Policy	
-	is the end of qualifying. No qualifying fee shall be returned to the is or her candidacy before the end of their qualifying period.
(Reference: Florida Statutes 99.092)	

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