

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

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CITY OF MIAMI BEACH
OFFICE OF THE CITY CLERK

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name Jamie C. Jodoin		Telephone (813) 335-7472
Street Address 1760 Glen Lakes Blvd., N.		
City St. Petersburg	State Florida	Zip Code 33702
Mailing Address Post Office Box 20252		
City St. Petersburg	State Florida	Zip Code 33742

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.


Signature of Registered Agent

August 25, 2021
Date

Former Registered Agent and Office Information (for changes only)

Name		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization Residents for a Safer Miami Beach		
Street Address 9429 Harding Avenue, Suite 218		Telephone (813) 335-7472
City Surfside	State Florida	Zip Code 33154


Signature of Chairperson

Alex Cruz
Printed Name of Chairperson

8/25/21
Date