

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

OFFICE USE ONLY

RECEIVED

SEP 24 2021

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: Juan-Carlos Planas, Esq. Telephone: 850-980-6542

Street Address: 2332 Galiano Street, Suite 204

City: Coral Gables State: Florida Zip Code: 33134

Mailing Address: 2332 Galiano Street, Suite 204

City: Coral Gables State: Florida Zip Code: 33134

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


Signature of Registered Agent

9/2/21
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: YES for a Safer Miami Beach

Street Address: 1742 W Flagler Street Telephone: 786-762-4990

City: Miami State: Florida Zip Code: 33135


Signature of Chairperson

Sam Rabin
Printed Name of Chairperson

09/24/21
Date