## REGISTERED AGENT STATEMENT OF APPOINTMENT

(Section 106.022, F.S.)

## PEFFOETISE ONLY

2022 JUL 19 PM 12: 05

	1	
		OFFICE OF THE CITY CLERK
✓ Original Appointment ☐ Change of Appoin	itment	911102011111
Change of Mailing Address Change of Physical	al Address	
Registered Ag	ent and O	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
	d that I may	h and accept the obligations of the position as set ay resign this appointment by executing a written officer.
		7/19/22
Signature of Registered Agent		Date
Former Registered Agent and Office Information (for changes only)		
Name N/A		Telephone
Street Address		1
City	State	Zip Code
Committee or	Organiza	ation Information
Name of Committee or Organization  For Our Miami Beach Quality of	Life	
Street Address 1742 W Flagler Street		Telephone 786-762-4990
City Miami	State Florida	Zip Code 33135
Signature of Chairperson		
Alex Fernandez Printed Name of Chairperson		07-19-22 Date