REGISTERED AGENT STATEMENT OF APPOINTMENT

OFFICE USE ONLY

(Section 106.022, F.S.)			NECEIVED	
9		AUG 5 2022		
✓ Original Appointment ☐ Change of Appointment		CIT	CITY OF MIAMI BEACH	
			ICE OF THE CITY CLERK	
Registered Agent and Office Information				
Name Juan-Carlos Planas, Esq.			Telephone 850-980-6542	
Street Address 2332 Galiano Street, Suite 204				
City State Coral Gables Florida		Zip Code 33134		
Mailing Address 2332 Galiano Street, Suite 204				
City Coral Gables			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.				
8/4/77				
Signature of Registered Agent Date				
Former Registered Agent and Office Information (for changes only)				
Name N/A			Telephone	
Street Address				
City	State		Zip Code	
Committee or Organization Information				
Name of Committee or Organization				
YES For A Safe and Strong Future Street Address 1742 W Flagler Street			Telephone 786-762-4990	
City Miami	State Florida		Zip Code 33135	
M///m				
Signature of Chairperson			1 1	
Neisen Kasdin		4	3/5/27	
Printed Name of Chairperson		Date		