

LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name: Losner Max
Last Name First Middle

Lobbyist Phone: (305) 260-1049

Lobbyist Address: 121 Alhambra Plaza, 10th Floor, Coral Gables, FL 33134
Street City State Zip

2. Principal Represented: ABM Building Services, LLC

Principal Address: 28 Liberty Street, New York New York 10005
Street City State Zip

Other Principals or Interests and Address (Detail):

N/A

3. Specific Issue on which the Lobbyist has been retained (Describe in Detail):

Performance services

Lobbyist specifically includes principal as well as any agent, officer, or employee of a principal. Each person who withdraws as a lobbyist is required to file a Certificate of Withdrawal.

4. Registration Fee paid? NO YES X (Cash or Check X)

5. Please identify all Council People or Personnel to be lobbied:

All Council, City Attorney, Public Work Director and City Managers

6. The subject matter in number (3) above is to be considered at which meeting? (Check all applicable)

- City Council X
Zoning Board of Adjustment
Planning Commission
City Board
RFP Review/Selection Committee
CRA Board
CRA

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7. Please state the extent of any business, financial, familial, and professional or other relationship which exists with any individual identified in number (5) above.

None

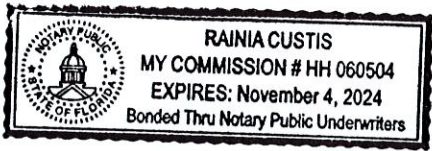
OATH

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
Broward

I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

Signature

Sworn to and subscribed before me this 21 day of June, 20 21.



Notary Public

My Commission Expires: November 4, 2024

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