LOBBystR REGISTRATION AFFIDAVIT

Choose One:  Renewal  X  Fiscal Year 2021-2022  X

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  NY  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 Advisory Committee

776 NE 125 Street  North Miami  Florida  33161  305.893.6511
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

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 29th day of September, 2021

Notary Public

My Commission Expires:__________________

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