

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)

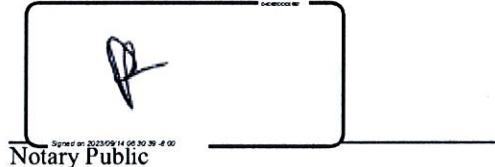
I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

DocuSigned by:


59FD16D240F04D9

Signature

Sworn to and subscribed before me this 14 day of September, 2023.



Received

SEP 22 2023

**City Of North Miami
City Clerk's Office**

