



LOBBYIST REGISTRATION AFFIDAVIT

Choose One:

Renewal

Fiscal Year 2024-2025

1. Lobbyist Name: Braynon,II Oscar

Last Name

First

Middle

Lobbyist Phone: 305 421-6304

Lobbyist Address: 9155 S Dadeland Blvd, Site 1716 Miami, FL 33156

Street

City

State

Zip

2. Principal Represented: Cigna

Principal Address: 1571 Sawgrass Corporate Pkwy, Sunrise, FL 33323

Street

City

State

Zip

Other Principals or Interests and Address (Detail):
NONE

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

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 (Cash or Check)

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

City Manager, Mayor and Council Members

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

City Council

Zoning Board of Adjustment

Planning Commission

City Board

RFP Review/Selection Committee

CRA Board

CRA Advisory Committee

Received

OCT 2 2024

City Of North Miami
City Clerk's Office

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 1st day of October, 2024.



Oneca D. Lowery
Notary Public

My Commission Expires: 01/24/2027

