



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.

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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.



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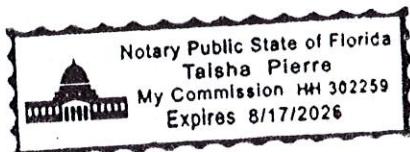
Signature

Sworn to and subscribed before me this 22<sup>nd</sup> day of October, 20\_\_\_\_.



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Notary Public



My Commission Expires: 08/17/2024

Received

OCT 22 2024

City Of North Miami  
City Clerk's Office  
776 NE 125 Street | North Miami | Florida | 33161  
305.893.6511