LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name: McDearmaid Michael
   Last Name First Middle
   Lobbyist Phone: (305) 439-5838

   Lobbyist Address: 840 N.E 127th Street North Miami FL 33161
   Street City State Zip

2. Principal Represented: OZ + BF LLC
   Principal Address: 5414 Sunrise Blvd Delray Beach FL 33484
   Street City State Zip
   Other Principals or Interests and Address (Detail):
   Civic Center Project
   Solo Condo - Solo Condo II

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

   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 City Council and Staff

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 X
   City Board
   RFP Review/Selection Committee
   CRA Board X
   CRA

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 that exists with any individual identified in number (5) above.

Friendly Association

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 __th day of October, 20__.

[Notary Public]

My Commission Expires: Oct 22, 2023