

RECEIVED

MAY 22 2018

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

MIAMI  
FLORIDA

LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name: DELLAGLORIA JOAN C  
Last Name First Middle

Lobbyist Phone: 305 431-0704

Lobbyist Address: P.O. Box 560383 Miami FL 33176  
Street City State Zip

2. Principal Represented: BSD 18, LLC

Principal Address: 2618 N.E. 191<sup>st</sup> St, Miami FL 33180  
Street City State Zip

Other Principals or Interests and Address (Detail):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Specific Issue on which the Lobbyist has been retained (Describe in Detail):  
The Chamber of Commerce, City, 131<sup>st</sup> Street  
TRANSACTION

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:  
Entire Council; City Manager; City CP+D;  
City Attorney; CRA Director

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 \_\_\_\_\_  
Others (Specify) \_\_\_\_\_

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.

N/A

OATH

STATE OF FLORIDA )

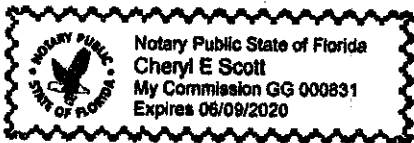
COUNTY OF MIAMI-DADE )

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

*[Signature]*  
Signature

Sworn to and subscribed before me this 22<sup>nd</sup> day of May, 2018.

*[Signature]*  
Notary Public



My Commission Expires: 06/09/2020