



RECEIVED

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

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SEP 02 2022



OATH

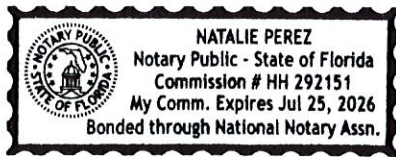
STATE OF FLORIDA )

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.

*[Handwritten Signature]*  
 Signature

Sworn to and subscribed before me this 2nd day of September, 20    .



Natalie Perez  
 Notary Public

My Commission Expires: 7/25/26