Sec. Twp. Range

ZONING HEARING APPLICATION
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES

LIST ALL FOLIO #s: 30-5017-0000-530 Date Received

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By AW

1. NAME OF APPLICANT (Owner(s) of record of the property or lessee. If applicant is a lessee, an executed 'Owner's Sworn-to-Consent' and copy of a valid lease for 1 year or more is required. If the applicant is a corporation, trust, partnership, or like entity, a 'Disclosure of Interest' is required).

CMG HOMES - 10201, LLC

2. APPLICANT'S MAILING ADDRESS, TELEPHONE NUMBER:

Mailing Address: 255 University Drive

City: Coral Gables State: Fl Zip: 33134 Phone#:

3. OWNER'S NAME, MAILING ADDRESS, TELEPHONE NUMBER:

Owner's Name (Provide name of ALL owners):

Mailing Address:

City: State: Zip: Phone#:

4. CONTACT PERSON'S INFORMATION:

Name: Juan R. Martinez Company: Juan R. Martinez and Associates

Mailing Address: 8550 West Flagler Street, Suite #106

City: Miami State: Florida Zip: 33144

Phone# 305-552-7007 Fax# 305-552-7016 E-mail: martinez.associates@live.com

5. LEGAL DESCRIPTION OF ALL PROPERTY COVERED BY THE APPLICATION

(Provide complete legal description, i.e., lot, block, subdivision name, plat book & page number, or metes and bounds. Include section, township, and range. If the application contains multiple rezoning requests, a legal description for each requested zone must be provided. Attach separate sheets as needed and clearly label (identify) each legal description attached. In addition to paper version it is requested that lengthy metes and bounds descriptions be provided on diskette or compact disc in Microsoft Word or compatible software.)

The East 295 feet of the South 1/2 of the Southeast 1/4 of the Southeast 1/4 of the Southwest, Less the North 140 feet thereof, and Less the South 35 feet and the East 35 feet for the roads all in Section 17, Township 55 South, Range 40 East, Miami-Dade County, Florida.

6. ADDRESS OR LOCATION OF PROPERTY (For location, use description such as NE corner of, etc.)

10201 SW 136th Street, Miami, Florida 33176

7. SIZE OF PROPERTY _____ ft x _____ ft (in acres): .93 acres
(divide total sq. ft. by 43,560 to obtain acreage)

8. DATE property ☒ acquired ☐ leased: November 2014 (month & year)

9. Lease term: _____ years

10. IS CONTIGUOUS PROPERTY OWNED BY THE SUBJECT PROPERTY OWNER(S)?
no ☒ yes ☐ If yes, provide complete legal description of said contiguous property.

_____

_____

_____

11. Is there an option to purchase ☐ or lease ☐ the subject property or property contiguous thereto?
no ☒ yes ☐ (If yes, identify potential purchaser or lessee and complete 'Disclosure of Interest' form)

_____

12. PRESENT ZONING CLASSIFICATION: AU

13. APPLICATION REQUESTS (Check all that apply and describe nature of the request in space provided)

☒ District Boundary(zone) Changes [Zone(s) requested]: EUM
(Provide a separate legal description for each zone requested)

☐ Unusual Use: _____

☐ Use Variance: _____

☐ Non-Use Variance: _____

☐ Alternative Site Development: Option: _____

☐ Special Exception: _____

☐ Modification of Previous Resolution/Plan: _____

☐ Modification of Declaration or Covenant: _____

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14. Has a public hearing been held on this property within the last year & a half? no ☒ yes ☐.
If yes, provide applicant's name, date, purpose and result of hearing, and resolution number:

15. Is this application a result of a violation notice? no ☒ yes ☐. If yes, give name to whom the violation notice was served: _____ and describe the violation:

_____

16. Describe structures on the property: Residential single family home - 1 unit

17. Is there any existing use on the property? no ☐ yes ☒. If yes, what use and when established?
Use: AU Year: _____

18. Do you require a translator for the actual hearing? Yes ☐ No ☒
If yes: Spanish ☐ Haitian Creole ☐ Other ☐ (Please specify which language)
_____

19. If you would like a preliminary courtesy review of your application by the technical staff of the Developmental Impact Committee, please check Yes ☒
If yes, the application will be placed on the next available Developmental Impact Committee agenda. There is no additional charge for this service.

APPLICANT'S AFFIDAVIT

The Undersigned, first being duly sworn depose that all answers to the questions in this application, and all supplementary documents made a part of the application are honest and true to the best of (my)(our) knowledge and belief. (I)(We) understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

****

OWNER OR TENANT AFFIDAVIT

(I)(WE), _____, being first duly sworn, depose and say that (I am)(we are) the ☐ owner ☐ tenant of the property described and which is the subject matter of the proposed hearing.

_____ Signature

_____ Signature

Sworn to and subscribed to before me this _____ day of _____, _____.

Notary Public: _____
Commission Expires:

****

CORPORATION AFFIDAVIT

(I)(WE), CMG HOMES-10201,LLC, a Florida Limited Liability Company, being first duly sworn, depose and say that (I am)(we are) the ☐ President ☐ Vice-President ☐ Secretary ☐ Asst. Secretary of the aforesaid corporation, and as such, have been authorized by the corporation to file this application for public hearing; and that said corporation is the ☐ owner ☐ tenant of the property described herein and which is the subject matter of the proposed hearing.

Attest: Oscar A. Garcia

_____ Authorized Signature

Managing Member, CMG HOMES-10201, LLC.
Manager Office Held

(Corp. Seal)

Sworn to and subscribed to before me this _____ day of _____, _____

Notary Public: _____
Commission Expires: August 26, 2017

****

PARTNERSHIP AFFIDAVIT

(I)(WE), _____, being first duly sworn, depose and say that (I am)(we are) partners of the hereinafter named partnership, and as such, have been authorized to file this application for a public hearing, and that said partnership is the ☐ owner ☐ tenant of the property described herein which is the subject matter of the proposed hearing.

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By

_____ (Name of Partnership)

By _____ % By _____ %

By _____ % By _____ %

Sworn to and subscribed to before me this _____ day of _____, _____.

Notary Public: _____
Commission Expires:

****

ATTORNEY AFFIDAVIT

I, _____, being first duly sworn, depose and say that I am a State of Florida Attorney at Law, and I am the Attorney for the Owner of the property described and which is the subject matter of the proposed hearing.

_____ Signature

Sworn to and subscribed to before me this _____ day of _____, _____

Notary Public: _____
Commission Expires

ACKNOWLEDGEMENT BY APPLICANT

1. The Public Works Department, the Department of Environmental Resources Management (DERM), and other County agencies review and critique zoning hearing applications which may affect the scheduling and outcome of my hearing. These reviews may require additional hearings before DERM's Environmental Quality Control Board (EQCB), or other County boards, and/or the proffering of agreements to be recorded. I am also aware that I must comply promptly with any DERM or Public Works conditions and advise this office in writing if my application will be withdrawn.

2. Filing fees may not be the total cost of a hearing. Some requests require notices to be mailed to property owners up to a mile from the subject property and I am responsible for paying the additional radius mailing costs. In addition to mailing costs, I am responsible for additional fees related to application changes, plan revisions, deferrals, re-advertising, etc., that may be incurred. I understand that fees must be paid promptly. Applications withdrawn within 60 days of the filing are eligible for a refund of 50% of the hearing fee but after that time hearings withdrawn or returned will be ineligible for a refund. Refunds must be requested in writing.

3. Applicable Florida Building Code requirements may affect my ability to obtain a building permit even if my zoning application is approved; and a building permit will probably be required. I am responsible for obtaining any required permits and inspections for all structures and additions proposed, or built without permits. And that a Certificate of Use (C.U.) must be obtained for the use of the property after it has been approved at Zoning Hearing. Failure to obtain the required permits and/or C.U., Certificates of Completion (C.C.) or Certificate of Occupancy (C.O.) will result in enforcement action against any occupant and owner. Submittal of the Zoning Hearing application may not forestall enforcement action against the property.

4. The 3rd District Court of Appeal has ruled that zoning applications inconsistent with the Comprehensive Development Master Plan (CDMP) should not be approved by a zoning board and the recommendation will be for denial or deferral. Therefore, I acknowledge that if the hearing request is inconsistent with the CDMP and I decide to go forward then my hearing request can only be denied or deferred, but not approved. I also understand that I will not be reimbursed any fees paid unless I withdraw within 60 days of filing and then I will receive a 50% refund.

5. Any covenant to be proffered must be submitted to the Department's Legal Advisor, on County form, at least 1 month prior to the hearing date. The covenant will be reviewed and the applicant will be notified if changes or corrections are necessary. Once the covenant is acceptable, the applicant is responsible to submit the executed covenant with a current 'Opinion of Title' within 1 week of the hearing. Legal Advisor can advise as to additional requirements applicable to foreign corporations. Documents submitted to Legal Advisor must carry a cover letter indicating subject matter, application number and hearing date. Legal Advisor may be reached at (305) 375-3075

(Applicant's Signature)

Oscar A Garcia

(Print Name of Applicant)

Managing Member, CMG HOMES-10201,LLC.
of Manager of

Sworn to and subscribed before me on the

3RD Day of December 2014

Affiant is personally known to me or has produced _____ as identification.

(Notary Public's Signature)

Juan R. Martinez

Print Name

My commission expires August 26, 2017

State of: Florida

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(Space reserved for Clerk)

ACKNOWLEDGMENT
LIMITED LIABILITY COMPANY

Signed, witnessed, executed and acknowledged on this ____ day of _____, _____.

IN WITNESS WHEREOF, CMG HOMES-10201,LLC (Corporate name) has caused these presents to be signed in its name by its proper officials.

Witnesses:

Signature

Luis Chacon
Print Name

Signature

MAGGIE A. GUERRA
Print Name

CMG HOMES-10201, LLC
Name of LLC
Address:
255 University Drive
Coral Gables, Florida 33134

By
(Managing Member) Manager

Print Name: Oscar A. Garcia

[*Note: All others require attachment of original corporate resolution of authorization]

STATE OF Florida **COUNTY OF** Miami-Dade

The foregoing instrument was acknowledged before me by Oscar A. Garcia (Name) the Managing Member (Title) of CMG Homes-10201, LLC (Name) LLC, on behalf of the LLC.
He/She is personally known to me or has produced _____, as identification.

(Space reserved for Clerk)

Witness my signature and official seal this 3RD day of December, 2014, in the County and State aforesaid.

MARTINEZ
State of Florida
Aug 26, 2017
FF 015458
Notary Assn.

Signature

Notary Public-State of Florida

Juan R. Martinez

Print Name

My Commission Expires: August 26, 2017

JUAN R. MARTINEZ
Notary Public - State of Florida
My Comm. Expires Aug 26, 2017
Commission # FF 015458
Bonded Through National Notary Assn.

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DISCLOSURE OF INTEREST*

If a CORPORATION owns or leases the subject property, list principal stockholders and percent of stock owned by each. [Note: Where principal officers or stockholders consist of other corporation(s), trust(s), partnership(s) or other similar entities, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

CORPORATION NAME: CMG HOMES-10201, LLC.

NAME AND ADDRESS		Percentage of Stock
CMG FAMILY MANAGEMENT, LLC.	Oscar Garcia	~~100%~~ 50%
255 UNIVERSITY DRIVE	Icer Palacio	50%
CORAL GABLES, FLORIDA 33144		

If a **TRUST** or **ESTATE** owns or leases the subject property, list the trust beneficiaries and the percent of interest held by each. [Note: Where beneficiaries are other than natural persons, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

TRUST/ESTATE NAME _____

NAME AND ADDRESS	Percentage of Interest

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If a PARTNERSHIP owns or leases the subject property, list the principals including general and limited partners. [Note: Where the partner(s) consist of another partnership(s), corporation(s), trust(s) or other similar entities, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

PARTNERSHIP OR LIMITED PARTNERSHIP NAME: _____

NAME AND ADDRESS	Percentage of Ownership

If there is a **CONTRACT FOR PURCHASE**, by a Corporation, Trust or Partnership list purchasers below, including principal officers, stockholders, beneficiaries or partners. [Note: Where principal officers, stockholders, beneficiaries or partners consist of other corporations, trusts, partnerships or other similar entities, further disclosure shall be made to identify natural persons having the ultimate ownership interests].

NAME OF PURCHASER: _____

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest

Date of contract: _____

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership or trust.

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NOTICE: For any changes of ownership or changes in purchase contracts after the date of the application, but prior to the date of final public hearing, a supplemental disclosure of interest is required.

The above is a full disclosure of all parties of interest in this application to the best of my knowledge and belief.

Signature: _____
(Applicant)

Sworn to and subscribed before me this 3RD day of December, 20 14. Affiant is personally know to me or has produced _____ as identification.

_____
(Notary Public)

My commission expires: August 26, 2017

JUAN R. MARTINEZ
Notary Public - State of Florida
My Comm. Expires Aug 26, 2017
Commission # FF 015456
Bonded Through National Notary Assn.

*Disclosure shall not be required of: 1) any entity, the equity interests in which are regularly traded on an established securities market in the United States or another country; or 2) pension funds or pension trusts of more than five thousand (5,000) ownership interests; or 3) any entity where ownership interests are held in a partnership, corporation or trust consisting of more than five thousand (5,000) separate interests, including all interests at every level of ownership and where no one (1) person or entity holds more than a total of five per cent (5%) of the ownership interest in the partnership, corporation or trust. Entities whose ownership interests are held in a partnership, corporation, or trust consisting of more than five thousand (5,000) separate interests, including all interests at every level of ownership, shall only be required to disclose those ownership interest which exceed five (5) percent of the ownership interest in the partnership, corporation or trust.

Prepared by:
Jennie G. Farshchian
Jurado & Farshchian, P.L.
12955 Biscayne Blvd. Suite 328
Miami, FL 33181

Return to:
Maribel Clemente
Independent Title of Fort Lauderdale
2929 E. Commercial Blvd., Suite 605
Fort Lauderdale, FL 33308

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By

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 14th day of November, 2014 between Harris B. Shoopman and Diane M. Shoopman a/k/a Diane Michele Kolodgy, husband and wife whose post office address is 10201 SW 136th Street, Miami, FL 33176, grantor, and CMG HOMES-10201, LLC, a Florida limited liability company whose post office address is 255 University Drive, Coral Gables, FL 33134, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS ($10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Miami-Dade County, Florida to-wit:

> The East 295 feet of the South 1/2 of the Southeast 1/4 of the Southeast 1/4 of the Southwest, Less the North 140 feet thereof, and Less the South 35 feet and the East 35 feet for roads all in Section 17, Township 55 South, Range 40 East, Miami-Dade County, Florida.
>
> *Parcel Identification Number:* 30-5017-0000-530

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2014.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Witness Name: Jennie Forshchian

Witness Name: Jennie Forshchian

Harris B. Shoopman (Seal)
Harris B. Shoopman

Witness Name: Jennie Forshchian

Witness Name: Jennie Forshchian

Diane M. Kolodgy (Seal)
Diane M. Shoopman a/k/a Diane Michele Kolodgy

State of Florida
County of Miami-Dade

The foregoing instrument was acknowledged before me this 14th day of November, 2014 by Harris B. Shoopman and Diane M. Shoopman a/k/a Diane Michele Kolodgy, who [_] are personally known or [✓] have produced FL drivers license as identification.

[Notary Seal]

Jennie Forshchian
COMMISSION # EE 846817
EXPIRES: OCT. 28, 2016
WWW.AARONNOTARY.com

Notary Public

Printed Name: Jennie Forshchian

My Commission Expires: Oct. 28, 2016

OPINION OF TITLE

To: Miami-Dade County

With the understanding that this Opinion of Title is furnished to Miami-Dade County, as inducement for acceptance of a Declaration of Use, Unity of Title, Declaration of Restrictions, Development Agreement or as an inducement for acceptance of a subdivision plat or tentative plat, covering the real property, or other zoning or land use application and approval covering the real property (cumutavely referred to herein as "Land Use change"), hereinafter described, it is hereby certified that I have examined a complete Abstract of Title covering the period from the beginning to the 28th day of October, 2014, at the hour of 8:00am, inclusive, of the following described property:

Address:	10201 SW 136 St., Miami-Dade County, FL
Folio:	30-5017-000-0530
Legal:	The East 295 feet of the South ½ of the Southeast ¼ of the Southeast ¼, Less the North 140 feet thereof, and Less the South 35 feet and the East 35 feet for roads all in Section 17, Township 55 South, Range 40 East, Miami-Dade County, Florida.

I am of the opinion that on the last mentioned date, the fee simple title to the above-described real property was vested in:

CMG Homes – 10201, LLC

The identity and capacity of the individual authorized to execute documents is as follows:

CMG Homes – 10201, LLC
By: CMG Family Management, LLC, as Manager
By: **Oscar A. Garcia**, Managing Member

Subject to the following encumbrances, liens and other exceptions (If "none" please indicate):

1. RECORDED MORTGAGES:	None
2. RECORDED CONSTRUCTION LIENS, CONTRACT LIENS AND JUDGMENTS:	None
3. GENERAL EXCEPTIONS:	None
4. SPECIAL EXCEPTIONS:	None

I HEREBY CERTIFY that I have reviewed all the aforementioned encumbrances and exceptions and that none of them hinder or affect the recording or enforcement of the Land Use Change.

Therefore, it is my opinion that the following party(ies) must join in the agreement in order to make the Land Use Change a valid and binding covenant on the lands described herein.

CMG Homes – 10201, LLC
By: CMG Family Management, LLC, as Manager
By: **Oscar A. Garcia**, Managing Member

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I, the undersigned, further certify that I am an attorney-at-law duly admitted to practice in the State of Florida and a member in good standing of the Florida Bar.

Respectfully submitted this 2nd day of December, 2014

Carlos A. Marin
Florida Bar No. 383960
Address:
Marin, Eljaiek & Lopez, P.L.
2601 S. Bayshore Drive, Suite 850
Coconut Grove, FL 33133

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 2nd day of December, 2014 by Carlos A. Marin, who is personally known to me or has produced _____, as identification.

Notary Public

Cristel Montes

My Commission Expires: Print Name

CRISTEL MONTES
MY COMMISSION # FF 064741
EXPIRES: October 20, 2017
Bonded Thru Notary Public Underwriters

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