Sec. Twp. Range

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

LIST ALL FOLIO #s: See Attached Exhibit "A"

Date Received

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).

See Attached Exhibit "B"

2. APPLICANT'S MAILING ADDRESS, TELEPHONE NUMBER:

Mailing Address: See Attached Exhibit "B"

City: _____ State: _____ Zip: _____ Phone#: _____

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

Owner's Name (Provide name of ALL owners): See Attached Exhibit "B"

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

4. CONTACT PERSON'S INFORMATION:

Name: Javier L. Vazquez Company: Berger Singerman LLP

Mailing Address: 1450 Brickell Avenue, Suite 1900

City: Miami State: Florida Zip: 33131

Phone# (305) 714-4378 Fax# (305) 714-4340 E-mail: jvazquez@bergersingerman.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.)

See Attached Exhibit "A"

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RESOURCES DEVELOPMENT SERVICES
By

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

NW corner of SW 132nd Avenue and SW 232nd Street

7. **SIZE OF PROPERTY** _____ ft x _____ ft (in acres): 39 Acres
(divide total sq. ft. by 43,560 to obtain acreage)

8. **DATE** property ☐ acquired ☐ leased: See Attached Exhibit "B" (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)
Palmcorp Development Group LLC

12. **PRESENT ZONING CLASSIFICATION:** Agricultural

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

☒ District Boundary(zone) Changes [Zone(s) requested]: EU-M
(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: _____

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:** _____

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

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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), Team Martin Inc., 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: _____

(Corp. Seal)

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

_____ Authorized Signature

Pres.
Office Held

Sworn to and subscribed to before me this 14 day of August, 2015.

Notary Public: _____
Commission Expires:

****

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.

_____ (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

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Z15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES
DAH

8/3/12 rcc

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

pres
(Applicant's Signature)

Charles F Markin
(Print Name of Applicant)

Sworn to and subscribed before me on the

15 Day of August, 2015.

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

(Notary Public's Signature)

My commission expires Nov. 15, 2017

State of: Florida

Nayle Sanchez
Print Name

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SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

NAYLE SANCHEZ
MY COMMISSION EXPIRES
NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

OWNERSHIP AFFIDAVIT
FOR
CORPORATION

STATE OF Florida **Public Hearing No.** _____

COUNTY OF Dade

Before me, the undersigned authority, personally appeared _____

_____ hereinafter the Affiant(s), who being first duly sworn by me, on oath, deposes and says:

1. Affiant is the president, vice-president or CEO of the Corporation, with the following address:
   13295 SW 232 Street, Miami, FL 33170
2. The Corporation owns the property which is the subject of the proposed hearing.
3. The subject property is legally described as:
   See Attached Exhibit "A"
4. Affiant is legally authorized to file this application for public hearing.
5. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

_____ Pres
Signature — Affiant's signature

Nayle Sanchez — Charles F Morfis
Print Name — Print Name

_____
Signature

John Michael Lynn
Print Name

Sworn to and subscribed before me on the 14 day of August 2015.

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

Notary _____

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

(Stamp/Seal)

Commission Expires:

[L:forms/afficorp.sam (1/04)]

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SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DEVELOPMENT SERVICES

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NAME OF PURCHASER: Palmcorp Development Group, LLC

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest
TOSCA REAL ESTATE CORPORATION	50%
↳ CARLOS TOSCA (100%)	
GAMA REAL ESTATE HOLDINGS, LLC	50%
↳ GUSTAVO DERIBEAUX (100%)	

Date of contract: _____

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

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: _____ Pres.
(Applicant)

Sworn to and subscribed before me this 14 day of August 2015. Affiant is personally known to me or has produced _____ as identification.

_____
(Notary Public)

My commission expires: NOV. 15, 2017

Seal

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC STATE OF FLORIDA

*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.

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MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

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), Charles F. Martin Revocable Trust, 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.

X _____ _____
Signature Signature

Sworn to and subscribed to before me this 14 day of August, 2015.

Notary Public: _____
Commission Expires: Nov. 15, 2017

NATALIE SANCHEZ MY COMMISSION EXPIRES NOV 15, 2017 #FF066388 NOTARY PUBLIC, STATE OF FLORIDA

****

CORPORATION AFFIDAVIT

(I)(WE), _____, 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: _____ _____
Authorized Signature

_____
Office Held

(Corp. Seal)

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

Notary Public: _____
Commission Expires:

****

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.

_____
(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

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MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

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.

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(Applicant's Signature)

Charles F Martin
(Print Name of Applicant)

Sworn to and subscribed before me on the
14 Day of August, 2015.

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

(Notary Public's Signature)

My commission expires NOV. 15, 2017

State of: Florida

Nayle Sanchez
Print Name

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

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SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES
DKH

8/3/12 rcc

OWNERSHIP AFFIDAVIT
FOR
INDIVIDUAL

STATE OF Florida **Public Hearing No.** _____

COUNTY OF Dade

Before me, the undersigned authority, personally appeared _____, hereinafter the Affiant, who being first duly sworn by me, on oath, deposes and says:

1. Affiant is the fee owner of the property that is the subject of the proposed hearing.

2. The subject property is legally described as: See Attached Exhibit "A"

3. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

Signature

Nayle Sanchez
Print Name

Signature

John Michael Lynn
Print Name

Affiant's signature

Charles F Morfin
Print Name

Sworn to and subscribed before me on the 14 day of August, 2015

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

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

Notary

(Stamp/Seal)

Commission Expires: NOV 15, 2017

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[L:forms/afficorp.sam (1/04)]

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OAH

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: _____

NAME AND ADDRESS	Percentage of Stock

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 Charles F Martin Revocable Trust

NAME AND ADDRESS	Percentage of Interest
Charles F. Martin, Trustee & Beneficiary	100%
13295 SW 232 Street	
Miami, FL 33170	

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: Palmcorp Development Group, LLC

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest
TOSCA REAL ESTATE CORPORATION	50%
↳ CARLOS TOSCA (100%)	
GAMA REAL ESTATE HOLDINGS, LLC	50%
↳ GUSTAVO DERIBEAUX (100%)	

Date of contract: _____

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

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: _____ Trustee
(Applicant)

Sworn to and subscribed before me this 14 day of August, 2015. Affiant is personally know to me or has produced _____ as identification.

_____
(Notary Public)

My commission expires: NOV. 15, 2017

Seal

NAYLE SANCHEZ
MY COMMISSION EXPIRES
NOV 15, 2017
#FF066388
NOTARY PUBLIC STATE OF FLORIDA

*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.

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DEVELOPMENT SERVICES
for DAH

8/3/12 rcc

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), Helen C Martin Trustee, 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.

Trustee
Signature

Signature

Sworn to and subscribed to before me this 19 day of August, 2015.

Notary Public:
Commission Expires:

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

****

CORPORATION AFFIDAVIT

(I)(WE), _____, 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: _____

_____
Authorized Signature

_____
Office Held

(Corp. Seal)

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

Notary Public:
Commission Expires:

****

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.

_____
(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

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DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES

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8/3/12 rcc

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.

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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)

Charles F Martin
(Print Name of Applicant)

Sworn to and subscribed before me on the

14 Day of August, 2015.

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

(Notary Public's Signature)

My commission expires Nov. 15, 2017

State of: Florida

Nayle Sanchez
Print Name

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

RECEIVED
Z 15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

OWNERSHIP AFFIDAVIT
FOR
INDIVIDUAL

STATE OF Florida **Public Hearing No.** _____

COUNTY OF Dade

Before me, the undersigned authority, personally appeared _____, hereinafter the Affiant, who being first duly sworn by me, on oath, deposes and says:

1. Affiant is the fee owner of the property that is the subject of the proposed hearing.

2. The subject property is legally described as: See Attached Exhibit "A"

3. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

Nayle Sanchez Trustee
Signature

Trustee
Affiant's signature

Charles F Mortin
Print Name

Charles F Mortin
Print Name

Signature

Print Name

Sworn to and subscribed before me on the 14 day of August, 2015

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

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

Notary

(Stamp/Seal)

Commission Expires: NOV. 15, 2017.

[L:forms/afficorp.sam (1/04)]

8/3/12 rcc

RECEIVED
Z15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DEVELOPMENT SERVICES

for DAH

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: _____

NAME AND ADDRESS	Percentage of Stock

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 Helen C Martin Trustee

NAME AND ADDRESS	Percentage of Interest
Charles F. Martin, Co-Trustee	100%
Benjamin Martin, Co-Trustee	
13200 SW 232 Street	
Miami, FL 33170	

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].

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SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
PLANNING SERVICES
Z15-093

8/3/12 rcc

For DAH

NAME OF PURCHASER: Palmcorp Development Group, LLC

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest
TOSCA REAL ESTATE CORPORATION	50%
↳ CARLOS TOSCA (100%)	
GANA REAL ESTATE HOLDINGS, LLC	50%
↳ GUSTAVO DERIBEAUX (100%)	

Date of contract: _____

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

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: _____ Trustee
(Applicant)

Sworn to and subscribed before me this 14 day of August 20 15. Affiant is personally know to me or has produced _____ as identification.

_____
(Notary Public)

My commission expires: NOV. 15, 2017

Seal

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC STATE OF FLORIDA

*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.

RECEIVED
Z15-095
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

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), Helen C Martin Trustee, 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.

x Trustee
Signature

Signature

Sworn to and subscribed to before me this 14 day of August, 2015

Notary Public:
Commission Expires:

NAYLE SANCHEZ MY COMMISSION EXPIRES NOV 15, 2017 #FF066388 NOTARY PUBLIC, STATE OF FLORIDA

****

CORPORATION AFFIDAVIT

(I)(WE), _____, 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: _____

_____
Authorized Signature

_____
Office Held

(Corp. Seal)

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

Notary Public:
Commission Expires:

****

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.

_____
(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

RECEIVED
Z15-013
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
PLANNING SERVICES
DAH

8/3/12 rcc

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

X Trustee
(Applicant's Signature)

Charles F Morkin
(Print Name of Applicant)

Sworn to and subscribed before me on the

14 Day of August, 2015.

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

(Notary Public's Signature)

My commission expires NOV. 15, 2017

State of: Florida

Nayle Sanchez
Print Name

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC, STATE OF FLORIDA

RECEIVED
Z15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
DEVELOPMENT SERVICES

8/3/12 rcc

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: _____

NAME AND ADDRESS	Percentage of Stock

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 Helen C Martin Trustee

NAME AND ADDRESS	Percentage of Interest
Charles F. Martin, Co-Trustee	100%
Benjamin Martin, Co-Trustee	
13200 SW 232 Street	
Miami, FL 33170	

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].

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Z15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES

NAME OF PURCHASER: Palmcorp Development Group, LLC

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest
TOSCA REAL ESTATE CORPORATION	50%.
↳ CARLOS TOSCA (100%.)	
GAMA REAL ESTATE HOLDINGS, LLC	50%.
↳ GUSTAVO DERIBEAUX (100%.)	

Date of contract: _____

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

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: Trustee
(Applicant)

Sworn to and subscribed before me this 14 day of August 20 15. Affiant is personally know to me or has produced _____ as identification.

(Notary Public)

My commission expires: NOV. 15, 2017

Seal

NAYLE SANCHEZ
MY COMMISSION EXPIRES NOV 15, 2017
#FF066388
NOTARY PUBLIC STATE OF FLORIDA

*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.

RECEIVED
Z15.043
SEP 08 2015
...STORY AND
...ES
DAH

8/3/12 rcc

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: Team Martin Inc.

NAME AND ADDRESS	Percentage of Stock
Charles F. Martin	100%
13295 SW 232 Street	
Miami, FL 33170	

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

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].

RECEIVED
Z15-043
SEP 08 2015
MIAMI-DADE COUNTY

EXHIBIT "A"

Folio # 30-6914-000-0351

Legal Description

The South 1025 feet of the East ½ of the East ½ of the Southeast ¼ of the Southwest ¼, of Section 14, Township 56 South, Range 39 East, lying and being in Miami-Dade County, Florida.

Folio # 30-6914-000-0280

Legal Description

The Southeast ¼ of the Northwest ¼ of the Southeast ¼ less beginning Southwest corner of the Southeast ¼ of the Northwest ¼ of the Southeast ¼ proceeding East 334.10 feet, then North 155.56 feet, then Northwest 334.79 feet, then South 175.79 feet to Point of Beginning, and less the North, South, East and West 25 feet for roads, in Section 14, Town-ship 56 South, Range 39 East, lying and being in Dade County, Florida.

Folio # 30-6914-000-0360

Legal Description

The East 150 feet of the South 290.4 feet of the West ½ of the East ½ of the SE ¼ of the SW ¼, less the South 40 feet, in Section 14, Township 56 South, Range 39 East, Miami-Dade County, Florida.

Folio # 30-6914-000-0350

Legal Description

The North 304.20 feet of the East ½ of the East ½ of the Southeast ¼ of the Southwest ¼ of Section 14, Township 56 South, Range 39 East, lying and being in Dade County, Florida.

Folio # 30-6914-000-0370

Legal Description

The West ½ of the East ½ of the Southeast ¼ of the Southwest ¼, less the South 40 feet thereof for road purposes, and also, less the East 150 feet of the South 290.4 feet thereof, in Section 14, Township 56 South, Range 39 East, Dade County, Florida

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SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DAH

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), Aquarian Ventures Inc., 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: Melanie Rodriguez
MELANIE RODRIGUEZ

x _____
Authorized Signature

_____
Office Held

(Corp. Seal)

SALOME GONZALEZ
MY COMMISSION # FF 036586
EXPIRES: July 16, 2017
Bonded Thru Notary Public Underwriters

Sworn to and subscribed to before me this 14TH day of AUGUST, 2015.

Notary Public: Salome Gonzalez
Commission Expires: JULY 16, 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.

_____
(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

RECEIVED
Z-15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DRH

8/3/12 rcc

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

X _____
(Applicant's Signature)

_____
(Print Name of Applicant)

Sworn to and subscribed before me on the

14TH Day of AUGUST, 2015.

Affiant is personally known to me or has produced FL DRIVERS LICENSE as identification.

_____
(Notary Public's Signature)

Salomé González
Print Name

My commission expires JULY 16, 2017

State of: FLORIDA

RECEIVED
Z15-003
SEP 08 2015
...COUNTY
...ATORY AND
...CES
...ICES

SALOME GONZALEZ
MY COMMISSION # FF 036586
EXPIRES: July 16, 2017
Bonded Thru Notary Public Underwriters

8/3/12 rcc

OWNERSHIP AFFIDAVIT
FOR
CORPORATION

STATE OF Florida **Public Hearing No.** _____

COUNTY OF Dade

Before me, the undersigned authority, personally appeared _____

_____ hereinafter the Affiant(s), who being first duly sworn by me, on oath, deposes and says:

1. Affiant is the president, vice-president or CEO of the Corporation, with the following address: P.O. Box 204, Goulds, Florida 33170
2. The Corporation owns the property which is the subject of the proposed hearing.
3. The subject property is legally described as: See Attached Exhibit "A"
4. Affiant is legally authorized to file this application for public hearing.
5. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

_____
Signature

Melanie Rodriguez
Print Name

_____
Signature

Salome Gonzalez
Print Name

X _____
Affiant's signature

_____
Print Name

Sworn to and subscribed before me on the 14th day of AUGUST 20 15.

Affiant is personally known to me or has produced FL DRIVERS LICENSE as identification

Notary Salome Gonzalez
SALOME GONZALEZ

(Stamp/Seal)

SALOME GONZALEZ
MY COMMISSION # FF 036586
EXPIRES: July 16, 2017
Bonded Thru Notary Public Underwriters

Commission Expires: JULY 16, 2017

[L:forms/afficorp.sam (1/04)]

RECEIVED
Z-15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
PLANNING SERVICES

SALOME GONZALEZ
MY COMMISSION # FF 036586
EXPIRES: July 16, 2017
Bonded Thru Notary Public Underwriters

8/3/12 rcc

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: Aquarian Ventures Inc.

NAME AND ADDRESS	Percentage of Stock

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

RECEIVED
Z15-093
SEP 08 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND
ECONOMIC RESOURCES
DEVELOPMENT SERVICES

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: Palmcorp Development Group, LLC

NAME, ADDRESS AND OFFICE (if applicable)	Percentage of Interest
TOSCA REAL ESTATE CORPORATION	50%
↳ CARLOS TOSCA (100%)	
GAMA REAL ESTATE HOLDINGS, LLC	50%
↳ GUSTAVO DERIBEAUX (100%)	

Date of contract: _____

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

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 14th day of AUGUST, 2015. Affiant is personally know to me or has produced FL DRIVERS LICENSE as identification.

_____
(Notary Public)

SALOME GONZALEZ
MY COMMISSION # FF 036586
EXPIRES: July 16, 2017
Bonded Thru Notary Public Underwriters

My commission expires: JULY 16, 2017

Seal

*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.

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MIAMI-DADE COUNTY
DEPARTMENT OF [illegible]

DAH

8/3/12 rcc

EXHIBIT "B"

1. Folio # 30-6914-000-0351
   Team Martin Inc.
   13295 SW 232 Street
   Miami, FL 33170

2. Folio # 30-6914-000-0280
   Aquarian Ventures Inc.
   P.O. Box 204
   Goulds, FL 33170

3. Folio # 30-6914-000-0360
   Charles F Martin Revocable Trust
   13200 SW 232 Street
   Miami, FL 33170

4. Folio # 30-6914-000-0350
   Helen C Martin Trustee
   13295 SW 232 Street
   Miami, FL 33170

5. Folio # 30-6914-000-0370
   Helen C Martin Trustee
   13295 SW 232 Street
   Miami, FL 33170

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RESOURCES DEVELOPMENT SERVICES
By