

ADDITIONAL PETITIONER INFORMATION	
Petitioner 2:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

ADDITIONAL PETITIONER INFORMATION	
Petitioner 3:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

ADDITIONAL PETITIONER INFORMATION	
Petitioner 4:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

ADDITIONAL PETITIONER INFORMATION	
Petitioner 5:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

ADDITIONAL PETITIONER INFORMATION	
Petitioner 6:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

ADDITIONAL PETITIONER INFORMATION	
Petitioner 7:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

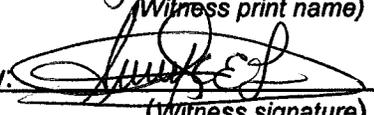
ADDITIONAL PETITIONER INFORMATION	
Petitioner 8:	Folio(s):
Address:	Phone:
Address:	Fax:
City/State/Zip:	Email:

The undersigned Petitioner(s) has fully reviewed the Instructions concerning the Application for Vacation and Abandonment and understands that the Application must be complete and accurate prior to Broward County acceptance and review. The undersigned hereby petitions the Broward County Board of County Commissioners to vacate and abandon the property described herein. By signing as Petitioner(s), the undersigned certifies authenticity of ownership and, when applicable, authorizes the Agent to be its representative in this Application to Vacate and Abandon process.

PETITIONER/OWNER(S)

2/20/2020 Savannah Hills LLC
Date Petitioner

Haim Sklash, as Manager
(print name)
By: 
(signature)

Angela Espinal
(Witness print name)
By: 
(Witness signature)

DANIEL GAFNI
(Witness print name)
By: 
(Witness signature)

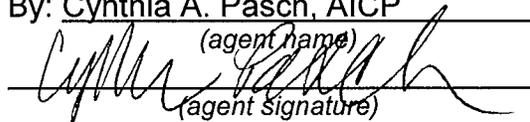
AFFIDAVIT TO AUTHORIZE PETITIONER(S) AGENT

I/We Savannah Hills LLC the property owner(s) of property to be vacated in the subject Application for Vacation and Abandonment, being duly sworn, depose(s) and say(s):

1. That I/We am/are the owner(s) and record title holder(s) of the lands that are to be vacated and abandoned. My/Our Folio Number(s) is/are as follows: 4942-06-22-0010.
2. That I/We do hereby appoint the following Agent to act on my, our behalf in the processing of the subject Application for Vacation and Abandonment to Broward County Board of Commissioners:

Name: Greenspoon Marder LLP
 Address: 200 East Broward Blvd., Suite 1800
 City/State/Zip: Fort Lauderdale, FL 33301
 Telephone: (954) 527-6266
 Contact Person: Cynthia A. Pasch, AICP

SAVANNAH HILLS LLC
 Name of Petitioner/Owner(s)

By: Cynthia A. Pasch, AICP
 (agent name)

 (agent signature)

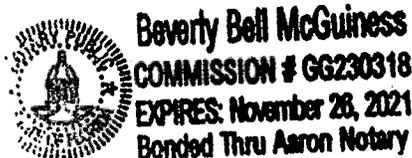
20th day of February, 2020

STATE OF FLORIDA)
 COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, the foregoing instrument was acknowledged before me by means of physical presence or online notarization, by CYNTHIA PASCH, as agent for SAVANNAH HILLS LLC, a Florida limited liability company, who is personally known to me or who has produced _____ as identification.

NOTARY
SEAL

Signature: 
 Print Name: Beverly Bell McGuinness
 Notary Public in and for the County and State last aforesaid.
 My Commission Expires: _____
 Commission/Serial No.: _____



PETITIONER ACKNOWLEDGMENT (By Business or Government Entity)

State Florida

County Miami-Dade

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, the foregoing instrument was acknowledged before me by means of physical presence or online notarization, by Haim Sklash, as Manager of Savannah Hills LLC, a Florida limited liability company on behalf of the business or government entity, who being first duly sworn by me this day, deposes and states that s/he is authorized on behalf of the business or government entity as Petitioner(s) in the foregoing Application for Vacation and Abandonment.

The foregoing instrument was acknowledged before me this 20 day of February, 2020 by Haim Sklash who is personally known to me or has produced _____ as identification.



Signature: *Kim N. Santiago*
Print Name: Kim N. Santiago
Notary Public in and for the County and State last aforesaid.
My Commission Expires: 2/23/24
Commission/Serial No.: _____