Environmental Protection and Growth Management Department
Planning and Development Management Division
1 North University Drive, Room 102A • Plantation, Florida 33324 • 954-357-6666

## REVIEW AND APPROVAL OF VACATION PETITION APPLICATION

| Date: 1/23/2020  |
|--|
| To: County Attorney's Office Attention: Maite Azcoitia, Office of County Attorney  |
| From: Planning and Development Management Division   |
| Subject: Vacation Petition No. 2019-V-07   |
| Petitioner(s): SMAX, LLC   |
| Agent for Petitioner(s): Self  |
| Type:  |
| <ul> <li>□ Chapter 25.100 – Abandon Street, Alleyway, Road or Other Travel Place</li> <li>□ Chapter 25.101 – Release Public Easement or Private Platted Easement</li> </ul>  |
| Project: ■ Easement □Right-of-Way □ Other  |
|  |
|  |
| Pursuant to Florida Statute Chapter 177.101 and Broward County Administrative Code Chapters 25.99, 25.100 and 25.101, the following determined that the requested vacation petition would not affect the ownership or right of convenient access of persons owning other parts of the subdivision:   |
| Designated Review Agencies and Organizations Date: 8/28/2019   |
|  |
| Required Documentation:  |
| Vacation Petition Application  Date Accepted: 8/13/2019  File For (made a parallel to Bounds (County Bounds (Co |
| File Fee (made payable to Broward County Board of Commissioners and deposited)  Petitioner Notice of Intent  Dates Published: 5/12/2019 and 5/19/2019  |
| Petitioner Notice of Intent  Dates Published: 5/12/2019 and 5/19/2019  Certificate of Real Estate Taxes Paid [Revenue Collection Division] Date:   |
| ■ Property Location ■ Municipality of Pompano  |
| Certified Copy of Municipal Resolution: No: 2019-63 Date(s): 5/28/2019   |
| Sketch and Legal Description by: Robert L. Thompson, PSM No. 3869, Accurate Land Surveyors, Inc.   |
| Location Map (Created by County Surveyor)  |
| ☐ Aerial Photograph and Section Map (No longer provided; advise if needed for review)  |
| ■ Plat, if applicable □ Certified ■ Copy   |
| □ Written Consent of All Abutting Owners in Plat, if applicable  |
| ■ Certificate or Opinion of Title by: Scott Marcus, Bar No. 0998718 Date: 4/16/2019  |
| ■ Documentation of all reviewers responding "no objection/no comment"  |
| ■ Waivers of Objection by Utility Companies  |
| ■ Affidavit of Posting of Notice of Vacation Signage   |
| ■ Draft Resolution to Set Public Hearing   |
| ■ Draft Resolution of Adopted Vacation   |
|  |
|  |
| Comments: Approved subject to the Office of the County Attorney's receipt, review, and approval of a Title Certificate dated within 45 days prior to the Public Hearing.   |
| Reviewed and Approved as to Form by:  Signature  |
| Print Name: Deanna M. Kalil, Assistant County  Date: 128/2020  |
| Attorney   |



# Environmental Protection and Growth Management Department Planning and Development Management Division

1 N. University Drive, Suite 102-A, Plantation, FL 33324 Phone 954-357-6666 FAX 954-357-6521

Application Number: 2019 - V-07

Exhibit 1
Page 2 of 8
Office Use Only

Date Application Accepted:

8/13/2019

## APPLICATION FOR VACATION AND ABANDONMENT

- A. Vacation of Plats, or any Portion Thereof (BCAC 25.99)
- B. 

  Abandonment of Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 25.100)
- C. ☐ Release of Public Easements and Private Platted Easements or Interests (BCAC 25.101)

| PETITIO  | NER INFORMATION  |  |  |  |
|--|--|--|--|--|
| Petitioners (Owners):  |  |  |  |  |
| Petitioner 1: SMAX LLC   | Folio(s):4842 34 39 0010   |  |  |  |
| Address: 601 SE 5 Terrace Phone: 561-674-3308  |  |  |  |  |
| Address (cont'd):  | Fax:   |  |  |  |
| City, State Zip: Pompano Beach, FL 33060 Email: SMAXLLC@gmail.com  |  |  |  |  |
| Important: Proof of Property Ownership required.  Note: For Co-Petitioners/Owners, complete additional Petitioner/Owners/Owners                        | vner Information page(s).  |  |  |  |
| AGEN   | IT INFORMATION   |  |  |  |
| Agent for Petitioners:   |  |  |  |  |
| Contact Person: Phone 1:   |  |  |  |  |
| Address: 3 Phone 2:  |  |  |  |  |
| Address (cont'd):  | Fax:   |  |  |  |
| City, State Zip:   | Email:   |  |  |  |
| Note: Proof of Agent Authorization by Petitioners required.  |  |  |  |  |
| PROPE  | RTYINFORMATION   |  |  |  |
| Vacation Requested: (brief description)  |  |  |  |  |
| Section: 34 Township: 48 South   | Range: 42 East   |  |  |  |
| Approximate Street Address: 291 NW 12th Ave P  | ompano Beach, FL 33069   |  |  |  |
| Location:  | Municipal Services District  |  |  |  |
| Folio Number(s): 4842 34 39 0010   |  |  |  |  |
| Plat: Kevin Thomas Scot Greve Plat - Book 1  | 77, Page 80  |  |  |  |
| Surveyor/Mapper:Accurate Land Surveyors  |  |  |  |  |
| Legal Description Attached:   ✓ Full   Short Zon   | ning: I-1 Industrial Land Use:Industrial   |  |  |  |
| The varation is requested bacause it was determine proposed building design conflicts with the east the area. We have city and county staff support to | ned by city planners that the awning which is incorporated into sement, and that the easement is atypical of other properties in |  |  |  |
|  | s Application No:  |  |  |  |

| ADDITIONAL PETITIONER INFORMATION |           |  |  |  |
|-----------------------------------|-----------|--|--|--|
| Petitioner 2:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFORMATION |           |  |  |  |
| Petitioner 3:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFORMATION |           |  |  |  |
| Petitioner 4:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFORMATION |           |  |  |  |
| Petitioner 5:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFO        | ORMATION  |  |  |  |
| Petitioner 6:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFO        | ORMATION  |  |  |  |
| Petitioner 7:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | Fax:      |  |  |  |
| City, State Zip:                  | Email:    |  |  |  |
| ADDITIONAL PETITIONER INFO        | ORMATION  |  |  |  |
| Petitioner 8:                     | Folio(s): |  |  |  |
| Address:                          | Phone:    |  |  |  |
| Address (cont'd):                 | 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)

| /        |                     |                       |
|----------|---------------------|-----------------------|
| 6/13/19  | Smal LLC            | Julian M. Stern       |
| Date     | Petitioner          | (print name)          |
|          |                     | 111 11201             |
|          |                     | By file for           |
|          |                     | (signature)           |
| (121.    | M                   | .1                    |
| 6/13/19  | 31/                 | Michael Smith         |
|          | Witness             | (Witness print name)  |
| 6 13/10  | a 20 Fallons        | - Tiftany Hallam      |
|          | Witness             | (Witness print name)  |
| 6/13/19  | Almay LLC           | Swah W. Shem          |
| Date     | /// Petitioner      | (print name)          |
|          |                     |                       |
| 6/13/19  | MICHAEL SHETH       | Ву                    |
|          | Witness             | (signature)           |
| 0/13/19/ | & Hallan Tiffary th | allon                 |
|          | Witness             | (print signer's name) |



#### PETITIONER ACKNOWLEDGMENT (By Individual)

| State   |   |
|---|---|
| County  | <del></del>   |
| I hereby certify that on this day personally a acknowledgments,   | appeared before me, an officer duly authorized to administer oaths and take |
| (name), who being first duly sworn by mo<br>Application for Vacation and Abandonment.                       | e this day, depose and state that s/he is the Petitioner in the foregoing   |
| The foregoing instrument was acknowledged 20 , by who is personally known to me or has p as identification. | before me this day of   |
| NOTARY  |   |
| (SEAL)  | Notary Signature:   |
|   | Print Name:   |
|   | Notary Public in and for the County and State last aforesaid.               |
|   | My Commission Expires:  |
|   | Serial No., if any:   |

### PETITIONER ACKNOWLEDGMENT (By Business or Government Entity)

| State Florida   |  |
|---|--|
| County Browns   |  |
| I hereby certify that on this day personally appeared be acknowledgments, ケベム   | fore me, an officer duly authorized to administer oaths and take     |
|   | (name)   |
| as Manager of SMAX 1-1 (  | (title) (name of entity),  |
| a Partnership LLC   | (type of corporation/partnership/government),                        |
|   | ing first duly sworn by me this day, deposes and states that s/he    |
|   | ntity as Petitioner(s) in the foregoing Application for Vacation and |
| Abandonment.  MM  A  M  A | Λ  |
| The foregoing instrument was acknowledged before me 20 19, by Javah Naomi Stein   | this day of /////  |
| 2019, by Javan Maomi Stein  |  |
| who is  personally known to me or  has producedas identification.   |  |
| as identification.  |  |
|   |  |
| Titany Hallam  ACOMMISSION #FF235976  EXPIRES: May 31, 2019  WWW.AARONNOTARY.COM  | Notary Signature: A Hallam  Print Name: 11 Ffanty Hallam             |
|   | Notary Public in and for the County and State last aforesaid.        |
|   | My Commission Expires: May 31. 2019                                  |
|   | Serial No., if any:  |

## PETITIONER ACKNOWLEDGMENT (By Business or Government Entity)

| State Florida County Banard  |   |
|--|---|
| County Broward   |   |
| I hereby certify that on this day personally appeared before acknowledgments, Think Marwell Sten | me, an officer duly authorized to administer oaths and take   |
| as President   | (name)  |
|  | (title) (name of entity),   |
| of SMAX LLC  Portnership LLC   | (type of corporation/partnership/government),   |
| on behalf of the business or government entity, who being  | first duly sworn by me this day, deposes and states that s/he as Petitioner(s) in the foregoing Application for Vacation and                                      |
| The foregoing instrument was acknowledged before me this 2010, by Julian Mayuru Strin            | 19 day of ADril   |
| who is personally known to me or has produced as identification.                                 |   |
| Tiffany Hallam  COMMISSION #FF235976  EXPIRES: May 31, 2019  www.AARONNOTARY.COM                 | Notary Signature:  Print Name: The Hallam  Notary Public in and for the County and State last aforesaid  My Commission Expires: May 31. 2019  Serial No., if any: |

#### AFFIDAVIT TO AUTHORIZE PETITIONER(S) AGENT

| I/We, _  | Sorah Na                            | on Sten  | え 丁           | Ilian        | M.          | Stein        | *           |  |
|----------|-------------------------------------|--|---------------|--------------|-------------|--------------|-------------|--|
| proper   | ty to be vacated in th              | ne subject Application                           | n for Vacatio | on and Aba   | ndonment    | t, being dul |             | property owner(s) of pose(s) and say(s): |
| 1.       |                                     | ne owner(s) and reco<br>per(s) is/are as follows |               |              |             |              | vacated and | abandoned.                               |
| 2.       |                                     | y appoint the following ation and Abandonm       |               |              |             |              |             | e subject                                |
|          | Name:                               | Julian St.                                       | 21~           |              |             |              |             |  |
|          | Address:                            | 601 SE SH  | Tore          | ce           |             |              |             | _  |
|          | City, State Zip:                    | forgano D  | each F        | - 33         | 060         |              |             | _  |
|          | Telephone:                          | 561-674-   | 3308          | -            |             | -            |             | _  |
|          | Contact Person:                     | Julian   |               |              |             |              |             | _  |
|          | SMAX                                | LLC  |               |              |             |              |             |  |
|          | Name of Pet                         | itioner/Owner(s)                                 |               | age agent at |             |              |             |  |
|          | By full                             | nature)  | <u> </u>      |              |             | 51530        | Luc 1       |  |
|          | Julian                              | - M. Ster  | <b>^</b>      |              |             |              |             |  |
|          | (prin                               | t name)  |               |              | -           | m            | ne          |  |
|          | $\frac{8}{8}$ day of $\frac{1}{8}$  | , 20 ]   | ?             |              |             |              |             |  |
| State    | Florida                             |  |               |              |             |              |             |  |
| County   | Browa                               | vd   |               |              |             |              |             |  |
| The fore | going instrument wa                 | as acknowledged befo                             | ore me this   | l day of     | April       |              |             |  |
| 2019, b  | y Julian Max<br>Spersonally known t | well stein<br>to me or ⊡has produ                |               |              |             |              |             |  |
|          |                                     |  |               |              |             |              |             |  |
|          |                                     | Tiffany Hallam                                   |               |              |             | ۸ ۱ ،        | 1           |  |
|          | SOM                                 | MISSION #FF235976<br>RES: May 31, 2019           |               | Notary S     | signature:  |              | Hall        | 2MJ                                      |
|          | OF FLOR                             | V.AARONNOTARY.COM                                |               | Print Na     | me: 1       | ttaku        | Hall        | aM                                       |
|          |                                     |  |               |              |             |              | A 1 .       | State last aforesaid.                    |
|          | $\bigcirc$                          |  |               | My Com       | mission Ex  | kpires:      | Maya        | >1.7014                                  |
|          |                                     |  |               | Serial No    | o., if any: |              | <i></i>     |  |