



Public Works Department REAL PROPERTY SECTION 115 South Andrews Avenue (Room 326) Ft. Lauderdale, FL 33301 Phone 954-357-6826 FAX 954-357-6292	Office Use Only
	Date Application Accepted: 11-21-2017
Application Number: 2018-V-03	

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)

PETITIONER INFORMATION	
Petitioners (Owners):	
Petitioner 1: Q-MED Corporation, a Florida Corporation	Folio(s): 5042-29-53-0010
Address: 3801 SW 30 th Ave	Phone: 954-627-9340
Address (cont'd): N/A	Fax: N/A
City, State Zip: FORT LAUDERDALE, FL 33312	Email: Chuck.Luedemann@stiles.com
Important: Proof of Property Ownership required.	
Note: For Co-Petitioners/Owners, complete additional Petitioner/Owner Information page(s).	

AGENT INFORMATION	
Agent for Petitioners:	
Contact Person: Leigh R. Kerr, Leigh Robinson Kerr & Associates, Inc.	Phone 1: 954-467-6308
Address: 808 E. Las Olas Blvd. #104	Phone 2: n/a
Address (cont'd):	Fax: 954-467-6309
City, State Zip: Fort Lauderdale, FL 33301	Email: Lkerr808@bellsouth.net
Note: Proof of Agent Authorization by Petitioners required.	

PROPERTY INFORMATION		
Vacation Requested: (brief description)		
Vacate 12-ft Utility Easement on the Griffin Pointe Plat (178/19).		
Section: 29	Township: 50S	Range: 42E
Approximate Street Address: 2281 Griffin Road, Dania Beach, Florida 33312		
Location: <input checked="" type="checkbox"/> Municipality Dania Beach		<input type="checkbox"/> Unincorporated Broward County
Folio Number(s): 504229530010		
Plat: Griffin Pointe Plat (PB 178/PG 19)		
Surveyor/Mapper: McLaughlin Engineering		
Legal Description Attached: <input checked="" type="checkbox"/> Full <input type="checkbox"/> Short	Zoning: C-3	Land Use: Commercial
Reason for Vacation (be specific): Vacate easement to facilitate proposed development – 180,000 sf of medical/warehouse use.		
First Application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, previous Application No:		

NOTE: Please type/print clearly. Application must be complete and accurate for acceptance.

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 INFORMATION	
Petitioner 6:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 7:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
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)

8/1/2018
Date

Petitioner

Witness
Carlos Garcia
Witness

Q-MED Corporation, a Florida Corporation

(print name)
By [Signature]

(signature)
Joaquin Lorie

(print signer's name)

Date

Petitioner

Witness

Witness

(print name)
By _____
(signature)

(print signer's name)

PETITIONER ACKNOWLEDGMENT (By Individual)

State _____
County _____

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, _____

(name), who being first duly sworn by me this day, depose and state that s/he is the Petitioner in the foregoing Application for Vacation and Abandonment.

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

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 BROWARD

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments,

_____ (name)
as _____ (title)
of _____ (name of entity),
a _____

_____ (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 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 1 day of AUGUST
2018, by JOAQUIN LORIE
who is personally known to me or has produced _____
as identification.



Print Name: JANET ACOSTA CARRIL
Notary Public in and for the County and State last aforesaid.
My Commission Expires: APR 9, 2022
Serial No., if any: _____

SECRETARY'S CERTIFICATE

RESOLVED, that the President, any of the Vice Presidents, the Secretary, the Treasurer and each other officer and each agent of this corporation, or any one or more of them, be and they are hereby authorized and empowered on behalf of this corporation: to act as an agent of the Corporation; to apply for permits and to execute notes and other evidences of this corporation's indebtedness with respect thereto; to guaranty the obligations of third parties; to execute and deliver any and all assignments, schedules, transfers, endorsements, contracts, guarantees, agreements, designations, consignments, deeds of trust, mortgages, instruments of pledge or other instruments in respect thereof and to make remittances and payments in respect thereof by checks, drafts or otherwise; and to do and perform all other acts and things deemed by such officer or agent necessary, convenient or proper to carry out any of the foregoing; hereby ratifying, approving and confirming all that any said officers or agents have done or may do in the premises.

I, J. Carlos Rodriguez, do hereby certify that I am the Secretary of **Q-MED CORPORATION**, a corporation organized and existing under the laws of the State of Florida, having its principal place of business in the City of Fort Lauderdale, State of Florida; that I am the keeper of the corporate records and the seal of said corporation; that the foregoing is a true and correct copy of a resolution duly adopted and ratified by formal written consent to action in accordance with its bylaws and the laws of said State, on the 10th day of NOVEMBER, 2017, and that the same has not in any way been modified, repealed or rescinded but is in full force and effect; that the within and foregoing agreement is one of the agreements referred to in said resolution and was duly executed pursuant thereto. I do further certify that the following are the names and specimen signatures of the officers and agents of said corporation, so empowered and authorized, namely:

President


Manuel E. Aguero
(Print Name)



(Signature)

Vice President, Finance

Joaquin A. Lorie
(Print Name)



(Signature)

Secretary

J. Carlos Rodriguez
(Print Name)



(Signature)

Treasurer

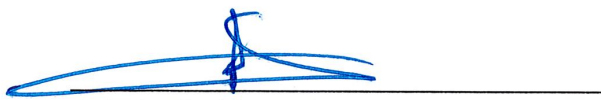
Manuel E. Aguero
(Print Name)



(Signature)

Witness my hand and the seal of said corporation, as of the 10TH day of NOVEMBER, 2017.

[SEAL]



J. Carlos Rodriguez, Secretary