ATTACHMENT A

APPLICATION NUMBER
19-SE-002

RECEIVED
FEB 05 2019
BY: PSZ

SPECIAL EXCEPTION USE APPLICATION FOR

ENTER TYPE OF USE /BUSINESS: Medical Office

Business Name: Gothrig Healthcare Services LLC
Business Address: 2331 N. State Road 7, Suite 207

Business Telephone Number: (561) 727-0347
Business Email: gothrighealth@gmail.com

APPLICANT AND CONTACT INFORMATION

Applicant Name: Dr. Gardy Rigaud
Applicant Address: 2862 Bellarosa Circle
Royal Palm Beach, Fl. 33411
Applicant Telephone Number: (561) 469-8972
Applicant Mobile Telephone Number (757) 613-5942
Applicant Email address: grigaud70@gmail.com

FILL IN BELOW THE CONTACT INFORMATION FOR ANYONE ELSE WHO SHOULD RECEIVE COPIES OF NOTICES /CORRESPONDENCE

Name: Eglintine Rigaud
Address: 2862 Bellarosa Circle
Royal Palm Beach, Fl. 33411
Telephone Number: (561) 469-8972 **Mobile** (757) 613-5943
Email address: eglintiner@gmail.com

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Name: _____

Address: _____

_____

Telephone Number: _____ Mobile _____

Email address: _____

INFORMATION ABOUT THE USE/ BUSINESS

Business Description (Please list all activities conducted at your business):
Psychiatric health care and general practice.

Date the business opened or is expected to be opened: March, 2019

The Days and Hours of operation for the business :

LIST NEXT TO EACH DAY, THE HOURS YOU WILL BE OPEN			LIST NEXT TO EACH DAY THE # OF EMPLOYEES ON DUTY
Sunday	Closed	to	
Monday	10 AM	to 6 PM	approx. 2 - 3
Tuesday	10 AM	to 2 PM	" " "
Wednesday	10 AM	to 6 PM	" " "
Thursday	10 AM	to 2 PM	" " "
Friday	10 AM	to 6 PM	" " "
Saturday	* 9 AM	to 1 PM 3rd Saturday of the month	" " "

How many persons will the proposed business employ?
Approximately 2 - 3 individuals

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List the job titles and approximate salaries for the proposed employees?
Office assistant approx. $15/hr
LPN approx. $20/hr
RN approx. $31/hr

Square footage of building space to be occupied by the business : 1765 sq. ft.

INFORMATION ABOUT THE SITE

Property Owner Name: Seccour Realty, LLC (Eglintine Rigaud)
Property Owner Street Address: 2862 Bellarosa Circle
City, State & Zip Code: Royal Palm Beach, Fl. 33411
Telephone #: (561) 469-8972 **Email** eglintiner@gmail.com

STANDARDS FOR APPROVAL
THE EFFECTS OF YOUR USE/BUSINESS ON THE COMMUNITY

Describe how your business will affect the residents who live close by:
The business will provide multilingual culturally competent mental health care and general practice care to the residents in the area.

Describe how this business/use will affect neighboring businesses:
The business will augment the other health care services in the area.

What site characteristics make this location suitable for your use/ business:
The location is strategically set in a professional condo complex already housing other health care services. It is also located in a designated medically underserved area for mental health.

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How will this use/ business affect the community economically?
The business will patronize other businesses in the area and possibly provide jobs in the community.

ADDITIONAL DEMANDS ON UTILITIES, COMMUNITY FACILITIES, AND PUBLIC SERVICES

Describe any fire hazards associated with your business: None that we are aware of.

Describe what security measures your business will require:
Will use ADT security system & lock facility.

Describe any chemicals, fluids, gases or potentially hazardous substances that your business will use or store on site: None

Describe any activity in your business that will use water other than normal washing and toilet use None

Describe any activity in your business that will utilize City park facilities: None

Describe any activity in your business that will generate noise, light or vibration:
None

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Describe transit, automobile or pedestrian traffic that your business will create in the area:

None.

Describe any activity in your business that will involve alcohol, music or live entertainment:

None.

Describe any other aspects of your business about which you feel that the reviewer should know: None.

ATTACH THESE DOCUMENTS TO THIS APPLICATION

1. Site Plan
2. Floor Plan
3. Inventory of Fixtures and Equipment
4. Legal Description
5. Certified Mailing list with two (2) sets of labels for all property owners within 300 feet of the site.
6. Copy of Lease (For Applicants who are renting)
7. Copy of Deed or Contract to Purchase (For Applicant who own or intends to own)
8. Letter from property owner authorizing you to apply for a special exception.

NOTE: STAFF MAY REQUIRE ADDITIONAL INFORMATION.

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AFFIDAVIT

I, Eglintine Rigaud, DO HEREBY SWEAR OR AFFIRM

1. THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND THE ATTACHMENTS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
2. CONSISTENT WITH THE LAND DEVELOPMENT REGULATIONS OF THE CITY OF LAUDERHILL, FLORIDA, SPECIFICALLY, SCHEDULE E, SUBSECTION 5.(9), PARAGRAPH (B), I WILL CAUSE A SIGN AT LEAST THREE (3) SQUARE FEET IN SIZE TO BE POSTED ON THE SUBJECT PROPERTY FACING AND VISIBLE FROM THE STREET AT LEAST TEN (10) DAYS PRIOR TO THE PUBLIC. MOREOVER, I CERTIFY THE SIGN WILL REMAIN POSTED FOR THE DURATION OF THE TIME REQUIRED FOR THE POSTING OF THE SUBJECT PROPERTY AND A PHOTOGRAPH OF THE SIGN POSTED ON THE SUBJECT PROPERTY WILL BE PROVIDED TO THE CITY OF LAUDERHILL PLANNING AND ZONING DEPARTMENT AT LEAST SEVEN (7) DAYS PRIOR TO THE PUBLIC HEARING.
3. I WILL CAUSE THIS SAME SIGN TO BE REMOVED WITHIN SEVEN (7) CALENDAR DAYS AFTER THE HEARING.

PRINT YOUR NAME: Eglintine Rigaud

SIGN YOUR NAME: Eglintine Rigaud

DATE: 2/5/2019

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 5th DAY OF February, 20 19, BY Eglintine Rigaud, WHO IS PERSONALLY KNOWN TO ME OR WHO HAS PRODUCED FL. Drivers License AS IDENTIFICATION AND WHO DID TAKE AN OATH.

NOTARY PUBLIC

TAMEKA L. DORSETT
MY COMMISSION EXPIRES JANUARY 16, 2022
#GG 149177
Bonded thru Troy Fain Insurance
NOTARY PUBLIC, STATE OF FLORIDA

SIGN: Tameka L. Dorsett

PRINT: Tameka L. Dorsett

STATE OF FLORIDA AT LARGE SEAL

MY COMMISSION EXPIRES: 1/16/22

YOUR SUBMISSION

1. The original application with Attachments 1 -8 .
2. A check made payable to the City of Lauderhill for the appropriate fee amount.

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Fees

Special Exception Use Application Fee.....$600.00

Cost of Mailing (minimum amount or actual cost of mailing, whichever is greater).....90.00

Criminal Background Check(for child/elder care facility, game room or convenience store) PER PERSON.....38.50

Should you have any questions concerning this application, please call Planning and Zoning at 954-730-3050.

SIGN SPECIFICATIONS:

Sign will be three (3) feet by three (3) feet in size and of a durable material. The applicant is required to post the sign on the property for which approval is sought at least ten (10) days before the public hearing. No permit shall be required for such sign. The sign shall be posted upon the property so as to face, and be visible from, the street upon which the property is located.

SIGN must be WHITE background, BLACK letters.

SIGN must be securely attached to two, 2" x 4" posts (with nails or screws), and must be a minimum of 3' above ground level.

POSTS shall be set a minimum of 18" below ground level.

CITY OF LAUDERHILL
NOTICE
OF
PUBLIC HEARING

SPECIAL EXCEPTION

DATE:

TIME:

LOCATION:

COMMISSION CHAMBERS

5581 WEST OAKLAND PK BLVD

LAUDERHILL, FLORIDA

FOR ADDITIONAL INFORMATION PLEASE CALL 954-730-3050

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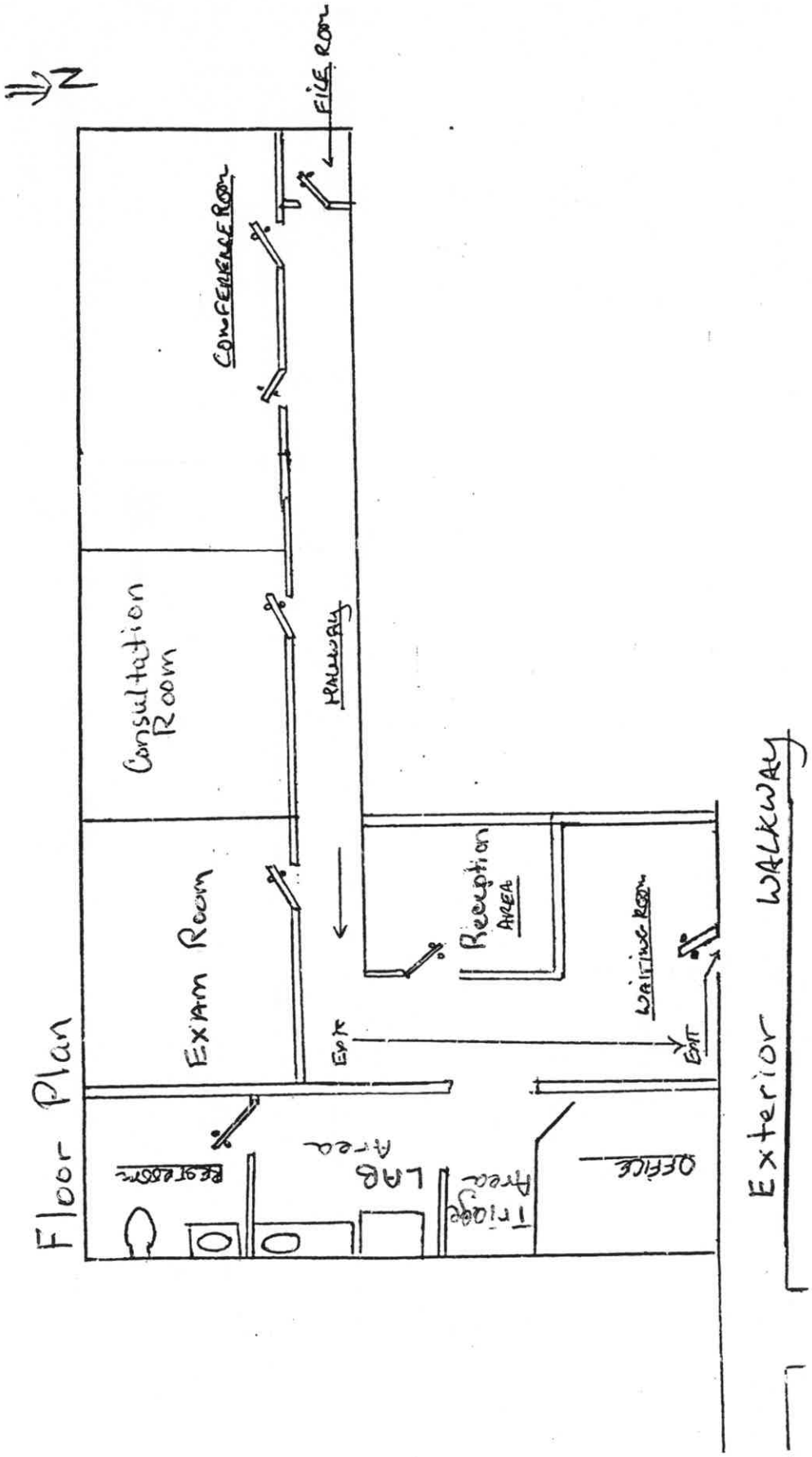
Legal Description: Sunrise Professional Center Condo, Unit #207
2331 N. State Road 7
Lauderhill, Florida 33313



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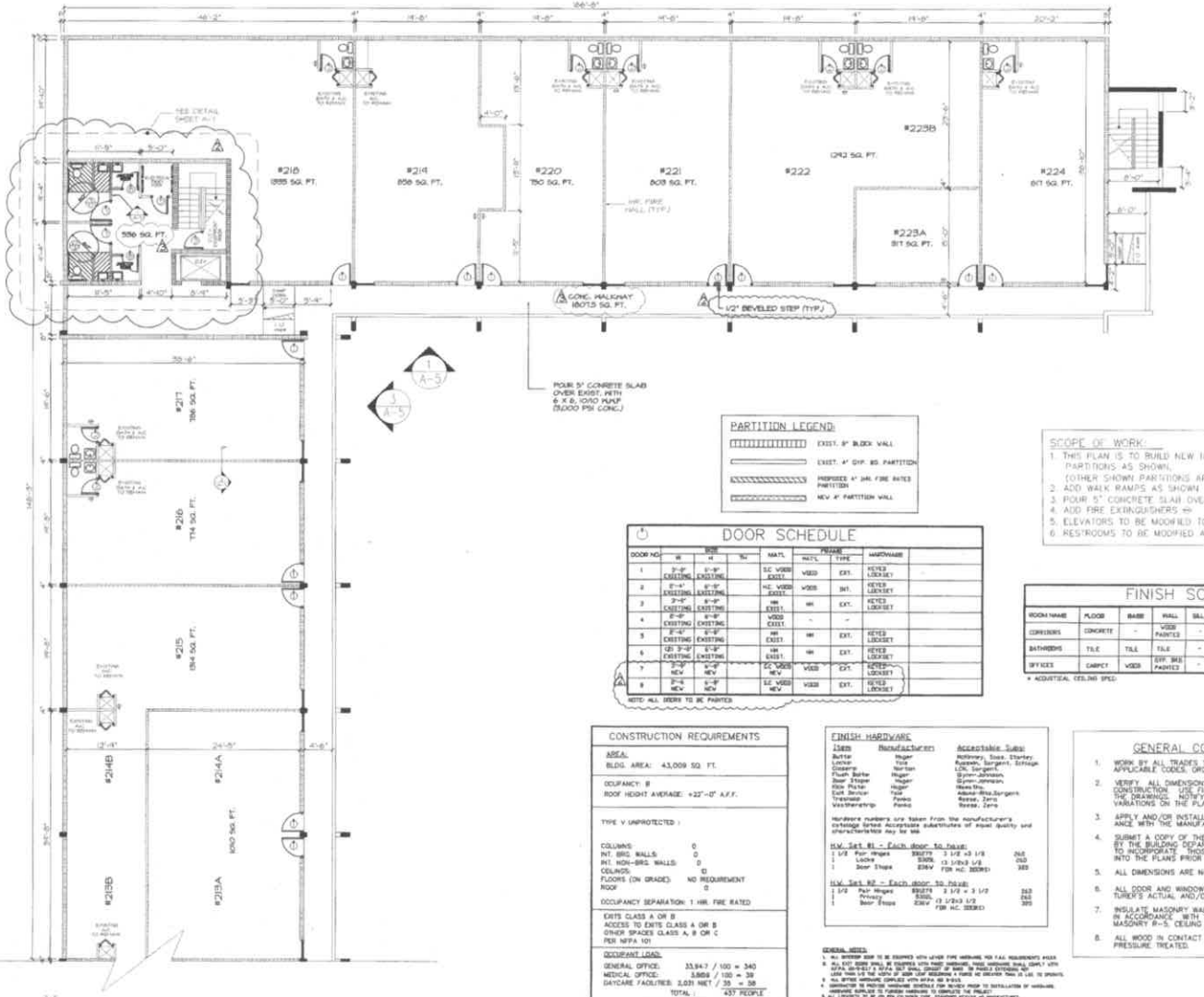

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EXISTING SECOND FLOOR PLAN NORTH SIDE

SCALE: 1/8" = 1'-0"

PARTITION LEGEND:

- EXIST. 8" BLOCK WALL
- EXIST. 4" STF. BS. PARTITION
- PROPOSED 4" 1HR. FIRE RATED PARTITION
- NEW 4" PARTITION WALL

SCOPE OF WORK:

1. THIS PLAN IS TO BUILD NEW 1HR. FIRE RATED PARTITIONS AS SHOWN. (OTHER SHOWN PARTITIONS ARE EXISTING TO REMAIN)
2. ADD WALK RAMPS AS SHOWN
3. POUR 5" CONCRETE SLAB OVER EXIST'G WALKWAY
4. ADD FIRE EXTINGUISHERS
5. ELEVATORS TO BE MODIFIED TO COMPLY W/ADA
6. RESTROOMS TO BE MODIFIED AS SHOWN TO COMPLY W/ADA

DOOR SCHEDULE

DOOR NO.	DOOR W	DOOR H	DOOR TH	DOOR MATL	FRAME MATL	FRAME TYPE	HARDWARE
1	3'-0" EXISTING	7'-0" EXISTING		S.C. WOOD EXIST.	WOOD	EXT.	KEYED LOCKSET
2	2'-4" EXISTING	6'-8" EXISTING		H.C. WOOD EXIST.	WOOD	INT.	KEYED LOCKSET
3	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET
4	2'-8" EXISTING	6'-8" EXISTING		WOOD EXIST.	-	-	-
5	2'-4" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET
6	(2) 3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET
7	3'-0" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET
8	2'-6" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET

NOTE: ALL DOORS TO BE PAINTED

FINISH SCHEDULE

ROOM NAME	FLOOR	BASE	WALL	SILL	CLG *	CLG HT.	REMARKS
CORRIDORS	CONCRETE	-	WOOD PAINTED	-	-	9'-0"	
BATHROOMS	TILE	TILE	TILE	-	2 X 4 ACOUST.	9'-0"	
OFFICES	CARPET	WOOD	EFF. SHEL PAINTED	-	2 X 4 ACOUST.	9'-0"	

* ACOUSTICAL CEILING SPED.

CONSTRUCTION REQUIREMENTS

AREA:
BLDG. AREA: 43,009 SQ. FT.

OCCUPANCY: B
ROOF HEIGHT AVERAGE: +22'-0" A.F.F.

TYPE V UNPROTECTED :

COLUMNS: 0
INT. BRG. WALLS: 0
INT. NON-BRG. WALLS: 0
CEILINGS: 0
FLOORS (ON GRADE): NO REQUIREMENT
ROOF: 0

OCCUPANCY SEPARATION: 1 HR. FIRE RATED

EXITS CLASS A OR B
ACCESS TO EXITS CLASS A OR B
OTHER SPACES CLASS A, B OR C
PER NFPA 101

OCCUPANT LOAD:
GENERAL OFFICE: 33,847 / 100 = 340
MEDICAL OFFICE: 3,868 / 100 = 39
DAYCARE FACILITIES: 2,031 NET / 35 = 58
TOTAL : 437 PEOPLE

FINISH HARDWARE

Item	Manufacturer		Acceptable Subs:	
Butts	Hager		McKinney, Stan. Stanley	
Locks	Yale		Russwin, Sargent, Schlage	
Closers	Norton		LCN, Sargent	
Flush Bolts	Hager		Glynn-Johnson	
Door Stops	Hager		Glynn-Johnson	
Kick Plate	Hager		Ward Mfg.	
Exit Device	Yale		Adams-Rite, Sargent	
Threshold	Pemko		Reese, Zero	
Weatherstrip	Pemko		Reese, Zero	

Hardware numbers are taken from the manufacturer's catalogs listed. Acceptable substitutes of equal quality and characteristics may be used.

H.W. Set #1 - Each door to have:

1 1/2	Pair Hinges	BB1279	3 1/2 x3 1/2	260
1	Locks	S3820	(3 1/2x3 1/2	010
1	Door Stops	836V	FOR H.C. DOORS)	300

H.W. Set #2 - Each door to have:

1 1/2	Pair Hinges	BB1279	3 1/2 x 3 1/2	260
1	Privacy	S3501	(3 1/2x3 1/2	010
1	Door Stops	836V	FOR H.C. DOORS)	300

GENERAL NOTES:

1. ALL EXTERIOR DOOR TO BE EQUIPPED WITH LEVER TYPE HARDWARE PER F.A.C. REQUIREMENTS #4.13.9
2. ALL EXIT DOORS SHALL BE EQUIPPED WITH WINDOW EXPOSED TO PUBLIC VISIBLE SHALL COMPLY WITH 101 NFPA 101 SECTION 7.2.1.5.1 (NOT SHALL CONSIST OF GLASS OR OTHER TRANSPARENT MATERIAL NOT LESS THAN 1/2 THE WIDTH OF DOOR LEAF REQUIRING A PANEL AS DESCRIBED THAN 25 LBS. TO OPERATE.
3. ALL EXTERIOR HARDWARE COMPLIES WITH NFPA 101 5-10.1.
4. CONTRACTOR TO PROVIDE HARDWARE SCHEDULE FOR REVIEW PRIOR TO INSTALLATION OF HARDWARE. HARDWARE SUPPLIER TO FURNISH HARDWARE TO COMPLETE THE PROJECT.
5. ALL LOCKSETS TO BE 10 PIN CYLINDER TYPE, STANDARD REPAIR AS MANUFACTURES SPECIFICATIONS. ALL KEYS TO BE TURNED OVER TO OWNER UPON WORK, NO SUBSTITUTE TO PERMIT.

GENERAL CONSTRUCTION NOTES

1. WORK BY ALL TRADES TO BE COMPLETED IN ACCORDANCE WITH ALL APPLICABLE CODES, ORDINANCES, STANDARDS, OR RESTRICTIONS.
2. VERIFY ALL DIMENSIONS IN THE FIELD PRIOR TO BEGINNING CONSTRUCTION. USE FIGURED DIMENSIONS ONLY. DO NOT SCALE THE DRAWINGS. NOTIFY THE ARCHITECT IMMEDIATELY OF ANY VARIATIONS ON THE PLANS AND/OR THE SPECIFICATIONS.
3. APPLY AND/OR INSTALL ALL PRODUCTS AND MATERIALS IN ACCORDANCE WITH THE MANUFACTURER'S PUBLISHED INSTRUCTIONS.
4. SUBMIT A COPY OF THE CONTRACT DOCUMENTS ISSUED FOR PERMIT BY THE BUILDING DEPARTMENT TO THE ARCHITECT, TO ALLOW HIM TO INCORPORATE THOSE BUILDING DEPARTMENT MODIFICATIONS INTO THE PLANS PRIOR TO CONSTRUCTION.
5. ALL DIMENSIONS ARE NOMINAL TO THE FACE OF STUD.
6. ALL DOOR AND WINDOW OPENINGS ARE NOMINAL. VERIFY MANUFACTURER'S ACTUAL AND/OR ROUGH OPENING DIMENSIONS.
7. INSULATE MASONRY WALLS AND CEILING SPACES IN ACCORDANCE WITH THE ENERGY CODE CALCULATIONS. EXTERIOR MASONRY R-5, CEILING R-19
8. ALL WOOD IN CONTACT WITH MASONRY, CONCRETE OR STEEL SHALL BE PRESSURE TREATED.

PROPOSED INTERIOR REMODELING FOR:
SUNRISE PROFESSIONAL CENTER
2339 N. STATE ROAD 7
LAUDERHILL, FLORIDA

PROJECT ARCHITECT
JOSE RAMOS
FLA. REG. AR11115

tectonics associates
architects and planners
8135 W. OAKLAND PARK BLVD. SUITE 107
SUNRISE, FL. 33351 ■ (954) 572-3550

date
09/17/2004
10/25/2004
1 12/22/2004
2 02/02/2005
3 02/28/2005

project number
04053

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A-3
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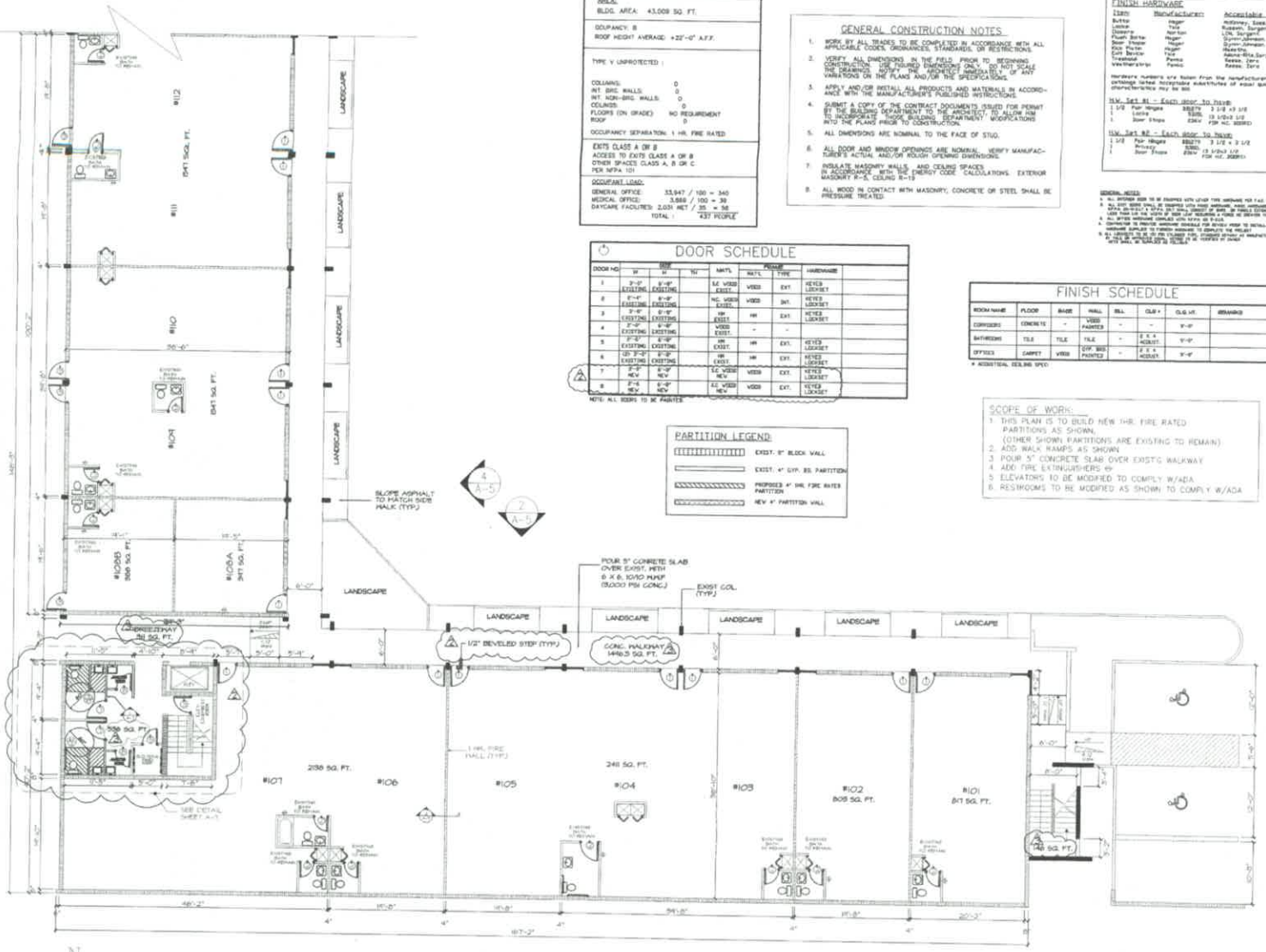

EXISTING FIRST FLOOR PLAN SOUTH SIDE

SCALE: 1/8" = 1'-0"

CONSTRUCTION REQUIREMENTS

AREA:
BLDG. AREA: 43,009 SQ. FT.

OCUPANCY: B
ROOF HEIGHT AVERAGE: +22'-0" A.F.F.

TYPE V UNPROTECTED :

COLUMNS:	0
INT. BRG. WALLS:	0
INT. NON-BRG. WALLS:	0
CEILINGS:	0
FLOORS (ON GRADE):	NO REQUIREMENT
ROOF	0

OCCUPANCY SEPARATION: 1 HR. FIRE RATED

EXITS CLASS A OR B
ACCESS TO EXITS CLASS A OR B
OTHER SPACES CLASS A, B OR C
PER NFPA 101

OCCUPANT LOAD:

GENERAL OFFICE:	33,947 / 100 = 340
MEDICAL OFFICE:	3,888 / 100 = 39
DAYCARE FACILITIES:	2,031 NET / 35 = 58
TOTAL :	437 PEOPLE

GENERAL CONSTRUCTION NOTES

1. WORK BY ALL TRADES TO BE COMPLETED IN ACCORDANCE WITH ALL APPLICABLE CODES, ORDINANCES, STANDARDS, OR RESTRICTIONS.
2. VERIFY ALL DIMENSIONS IN THE FIELD PRIOR TO BEGINNING CONSTRUCTION. USE FIGURED DIMENSIONS ONLY. DO NOT SCALE THE DRAWINGS. NOTIFY THE ARCHITECT IMMEDIATELY OF ANY VARIATIONS ON THE PLANS AND/OR THE SPECIFICATIONS.
3. APPLY AND/OR INSTALL ALL PRODUCTS AND MATERIALS IN ACCORDANCE WITH THE MANUFACTURER'S PUBLISHED INSTRUCTIONS.
4. SUBMIT A COPY OF THE CONTRACT DOCUMENTS ISSUED FOR PERMIT BY THE BUILDING DEPARTMENT TO THE ARCHITECT, TO ALLOW HIM TO INCORPORATE THOSE BUILDING DEPARTMENT MODIFICATIONS INTO THE PLANS PRIOR TO CONSTRUCTION.
5. ALL DIMENSIONS ARE NOMINAL TO THE FACE OF STUD.
6. ALL DOOR AND WINDOW OPENINGS ARE NOMINAL. VERIFY MANUFACTURER'S ACTUAL AND/OR ROUGH OPENING DIMENSIONS.
7. INSULATE MASONRY WALLS, AND CEILING SPACES IN ACCORDANCE WITH THE ENERGY CODE CALCULATIONS. EXTERIOR MASONRY R-5, CEILING R-19
8. ALL WOOD IN CONTACT WITH MASONRY, CONCRETE OR STEEL SHALL BE PRESSURE TREATED.

FINISH HARDWARE

Item:	Manufacturer:	Acceptable Subs:
Butts	Hager	McKinney, Soss, Stanley.
Locks	Yale	Russwin, Sargent, Schlage.
Closers	Norton	LCN, Sargent.
Flush Bolts	Hager	Glynn-Johnson.
Door Stops	Hager	Glynn-Johnson.
Kick Plates	Hager	[illegible]
Exit Device	Yale	Adams-Rite, Sargent.
Treshold	Pemko	Reese, Zero
Weatherstrip	Pemko	Reese, Zero

Hardware numbers are taken from the manufacturer's catalogs listed. Acceptable substitutes of equal quality and characteristics may be [illegible]

H.W. Set #1 - Each door to have:

1 1/2	Pair Hinges	[illegible]	3 1/2 x 3 1/2	[illegible]
1	Locks	[illegible]	(3 1/2x3 1/2	[illegible]
1	Door Stops	[illegible]	FOR H.C. DOORS)	[illegible]

H.W. Set #2 - Each door to have:

1 1/2	Pair Hinges	[illegible]	3 1/2 x 3 1/2	[illegible]
1	Privacy	[illegible]		[illegible]
1	Door Stops	[illegible]	(3 1/2x3 1/2 FOR H.C. DOORS)	[illegible]

GENERAL NOTES:

1. ALL EXTERIOR DOOR TO BE EQUIPPED WITH LEVER TYPE HARDWARE PER F.A.C. REQUIREMENTS [illegible]
2. ALL EXIT DOORS SHALL BE EQUIPPED WITH PANIC HARDWARE. PANIC HARDWARE SHALL COMPLY WITH NFPA [illegible] [illegible]
3. ALL OFFICE HARDWARE COMPLIES WITH NFPA [illegible]
4. CONTRACTOR TO PROVIDE HARDWARE SCHEDULE FOR REVIEW PRIOR TO INSTALLATION OF HARDWARE. [illegible]
5. ALL LOCKSETS TO BE [illegible]

DOOR SCHEDULE

DOOR NO.	SIZE W	SIZE H	SIZE TH	MAT'L	FRAME MAT'L	FRAME TYPE	HARDWARE	
1	3'-0" EXISTING	6'-8" EXISTING		S.C. WOOD EXIST.	WOOD	EXT.	KEYED LOCKSET	
2	2'-4" EXISTING	6'-8" EXISTING		H.C. WOOD EXIST.	WOOD	INT.	KEYED LOCKSET	
3	3'-6" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
4	2'-0" EXISTING	6'-8" EXISTING		WOOD EXIST.	-	-		
5	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
6	(2) 3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
7	3'-0" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	
8	2'-6" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	

NOTE: ALL DOORS TO BE PAINTED

FINISH SCHEDULE

ROOM NAME	FLOOR	BASE	WALL	SILL	CLG.*	CLG. HT.	REMARKS
CORRIDORS	CONCRETE	-	WOOD PAINTED	-	-	9'-0"	
BATHROOMS	TILE	TILE	TILE	-	2 X 4 ACOUST.	9'-0"	
OFFICES	CARPET	WOOD	GYP. BRD. PAINTED	-	2 X 4 ACOUST.	9'-0"	

* ACOUSTICAL CEILING SPEC.

PARTITION LEGEND:

▥	EXIST. 8" BLOCK WALL
▭	EXIST. 4" GYP. BD. PARTITION
▨	PROPOSED 4" 1HR. FIRE RATED PARTITION
▤	NEW 4" PARTITION WALL

SCOPE OF WORK:

1. THIS PLAN IS TO BUILD NEW 1HR. FIRE RATED PARTITIONS AS SHOWN. (OTHER SHOWN PARTITIONS ARE EXISTING TO REMAIN)
2. ADD WALK RAMPS AS SHOWN
3. POUR 5" CONCRETE SLAB OVER EXIST'G WALKWAY
4. ADD FIRE EXTINGUISHERS
5. ELEVATORS TO BE MODIFIED TO COMPLY W/ADA
6. RESTROOMS TO BE MODIFIED AS SHOWN TO COMPLY W/ADA

Jose Ramos
5-4-01

PROPOSED INTERIOR REMODELING FOR:
SUNRISE PROFESSIONAL CENTER
2331 N. STATE ROAD 7
LAUDERHILL, FLORIDA

PROJECT ARCHITECT
JOSE RAMOS
FLA. REG. AR11115

tectonics associates ■ architects and planners
8358 W. OAKLAND PARK BLVD. SUITE 102 SUNRISE, FL 33351 ■ (954) 572-8590

ALL IDEAS, DESIGNS, ARRANGEMENTS, AND PLANS INDICATED OR REPRESENTED BY THIS DRAWING ARE OWNED BY, AND THE PROPERTY OF TECTONICS ASSOCIATES, INC. AND WERE CREATED, EVOLVED AND DEVELOPED FOR USE ON, AND IN CONNECTION WITH THE SPECIFIED PROJECT. NONE OF SUCH IDEAS, DESIGNS, ARRANGEMENTS OR PLANS SHALL BE USED BY OR DISCLOSED TO ANY PERSON, FIRM OR CORPORATION FOR ANY PURPOSE WHATSOEVER WITHOUT THE WRITTEN PERMISSION OF TECTONICS ASSOCIATES, INC.

WRITTEN DIMENSIONS OF THESE DRAWINGS SHALL HAVE PRECEDENCE OVER SCALED DIMENSIONS. CONTRACTORS SHALL VERIFY, AND BE RESPONSIBLE FOR ALL DIMENSIONS AND CONDITIONS ON THE JOB AND THIS OFFICE MUST BE NOTIFIED OF ANY VARIATIONS FROM THE DIMENSIONS AND CONDITIONS SHOWN BY THESE DRAWINGS. SHOP DETAILS MUST BE SUBMITTED TO THIS OFFICE FOR APPROVAL BEFORE PROCEEDING WITH FABRICATION.

date
09/17/2004
10/25/2004
12/22/2004
02/02/2005
02/28/2005

project number
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sheet
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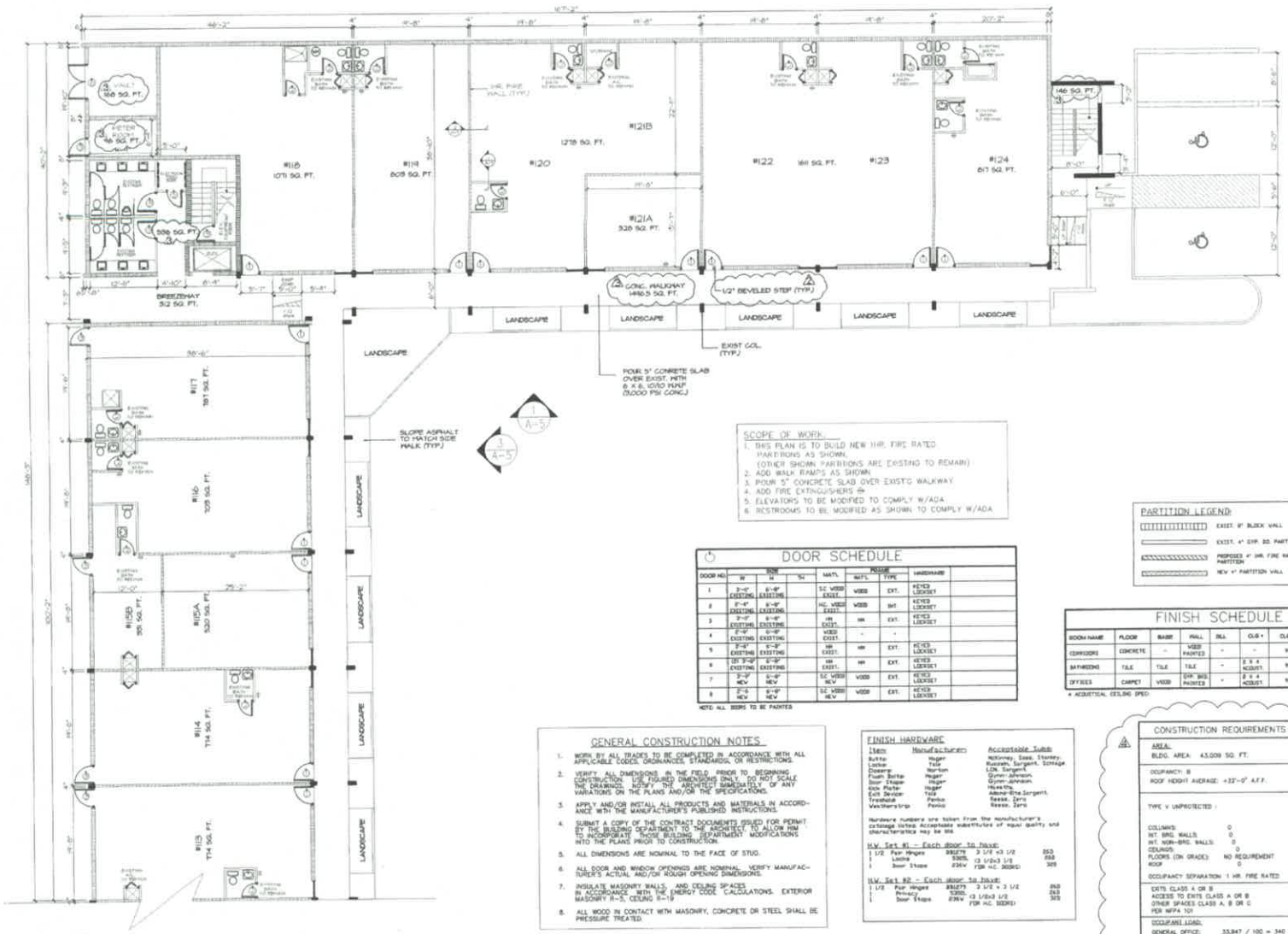

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EXISTING FIRST FLOOR PLAN NORTH SIDE

SCALE: 1/8" = 1'-0"

SCOPE OF WORK:

1. THIS PLAN IS TO BUILD NEW 1HR. FIRE RATED PARTITIONS AS SHOWN. (OTHER SHOWN PARTITIONS ARE EXISTING TO REMAIN)
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PARTITION LEGEND:

- EXIST. 8" BLOCK WALL
- EXIST. 4" STIP. BD. PARTITION
- PROPOSED 4" 1HR. FIRE RATED PARTITION
- NEW 4" PARTITION WALL

DOOR SCHEDULE

DOOR NO.	SIZE W	SIZE H	SIZE Sc	MATL.	FRAME MATL.	FRAME TYPE	HARDWARE	
1	3'-0" EXISTING	6'-8" EXISTING		S.C. WOOD EXIST.	WOOD	EXT.	KEYED LOCKSET	
2	3'-0" EXISTING	6'-8" EXISTING		HC. WOOD EXIST.	WOOD	INT.	KEYED LOCKSET	
3	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
4	2'-0" EXISTING	6'-8" EXISTING		WOOD EXIST.	-	-		
5	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
6	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
7	3'-0" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	
8	3'-0 NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	

NOTE: ALL DOORS TO BE PAINTED

FINISH SCHEDULE

ROOM NAME	FLOOR	BASE	WALL	DEL.	CLG *	CLG HT.	REMARKS
CORRIDORS	CONCRETE	-	WOOD PAINTED	-	-	9'-0"	
BATHROOMS	TILE	TILE	TILE	-	2 X 4 ACOUST.	9'-0"	
OFFICES	CARPET	WOOD	GYP. BRD. PAINTED	-	2 X 4 ACOUST.	9'-0"	

* ACOUSTICAL CEILING (PED)

GENERAL CONSTRUCTION NOTES

1. WORK BY ALL TRADES TO BE COMPLETED IN ACCORDANCE WITH ALL APPLICABLE CODES, ORDINANCES, STANDARDS, OR RESTRICTIONS.
2. VERIFY ALL DIMENSIONS IN THE FIELD PRIOR TO BEGINNING CONSTRUCTION. USE FIGURED DIMENSIONS ONLY. DO NOT SCALE THE DRAWINGS. NOTIFY THE ARCHITECT IMMEDIATELY OF ANY VARIATIONS ON THE PLANS AND/OR THE SPECIFICATIONS.
3. APPLY AND/OR INSTALL ALL PRODUCTS AND MATERIALS IN ACCORDANCE WITH THE MANUFACTURER'S PUBLISHED INSTRUCTIONS.
4. SUBMIT A COPY OF THE CONTRACT DOCUMENTS ISSUED FOR PERMIT BY THE BUILDING DEPARTMENT TO THE ARCHITECT TO ALLOW HIM TO INCORPORATE THOSE BUILDING DEPARTMENT MODIFICATIONS INTO THE PLANS PRIOR TO CONSTRUCTION.
5. ALL DIMENSIONS ARE NOMINAL TO THE FACE OF STUD.
6. ALL DOOR AND WINDOW OPENINGS ARE NOMINAL. VERIFY MANUFACTURER'S ACTUAL AND/OR ROUGH OPENING DIMENSIONS.
7. INSULATE MASONRY WALLS, AND CEILING SPACES IN ACCORDANCE WITH THE ENERGY CODE CALCULATIONS. EXTERIOR MASONRY R-5, CEILING R-19
8. ALL WOOD IN CONTACT WITH MASONRY, CONCRETE OR STEEL SHALL BE PRESSURE TREATED.

FINISH HARDWARE

Item	Manufacturer		Acceptable Subs
Butts	Hager		McKinney, Soss, Stanley,
Locks	Yale		Russwin, Sargent, Schlage
Closers	Norton		LCN, Sargent
Push Bars	Hager		Glynn-Johnson
Door Stops	Hager		Glynn-Johnson
Kick Plates	Hager		Hiawatha
Exit Device	Yale		Adams-Rite, Sargent
Threshold	Pemko		Reese, Zero
Weatherstrip	Pemko		Reese, Zero

Hardware numbers are taken from the manufacturer's catalogs listed. Acceptable substitutes of equal quality and characteristics may be bid.

H.W. Set #1 - Each door to have:

1 1/2	Pair Hinges	992279 3 1/2 x3 1/2	253
1	Latche	5385L (3 1/2x3 1/2	552
1	Door Stops	236V FOR H.C. DOORS)	302

H.W. Set #2 - Each door to have:

1 1/2	Pair Hinges	992279 3 1/2 x 3 1/2	253
1	Privacy	5385L (3 1/2x3 1/2	263
1	Door Stops	236V FOR H.C. DOORS)	302

GENERAL NOTES:

1. ALL INTERIOR DOOR TO BE EQUIPPED WITH LEVER TYPE HARDWARE PER F.A.C. REQUIREMENTS 553.508.
2. ALL EXIT DOORS SHALL BE EQUIPPED WITH PANIC HARDWARE. PANIC HARDWARE SHALL COMPLY WITH NFPA 101-2003 & NFPA 101 7 SHALL CONSIST OF BARS OR PANELS EXTENDING NOT LESS THAN 1/2 THE WIDTH OF DOOR LEAF MEASURED FROM THE HINGE OR GREATER THAN 48 LBS. TO OPERATE.
3. ALL OFFICE HARDWARE COMPLIES WITH NFPA 101 5-10.3.
4. CONTRACTOR TO PROVIDE HARDWARE SCHEDULE FOR REVIEW PRIOR TO INSTALLATION OF HARDWARE. HARDWARE SUPPLIER TO FURNISH HARDWARE TO COMPLETE THE PROJECT.
5. ALL CABINETS TO BE OF FIR PLYWOOD TYPE, STANDARD WITHOUT AS MANUFACTURED PLYWOOD. ALL CABINETS TO BE PAINTED BY OWNER WITH SHALL BE SUPPLIED AS FOLLOWS:

CONSTRUCTION REQUIREMENTS

AREA:
BLDG. AREA: 43,009 SQ. FT.

OCCUPANCY: B
ROOF HEIGHT AVERAGE: +22'-0" A.F.F.

TYPE V UNPROTECTED :

COLUMNS: 0
INT. BRG. WALLS: 0
INT. NON-BRG. WALLS: 0
CEILINGS: 0
FLOORS (ON GRADE): NO REQUIREMENT
ROOF: 0

OCCUPANCY SEPARATION: 1 HR. FIRE RATED

EXITS CLASS A OR B
ACCESS TO EXITS CLASS A OR B
OTHER SPACES CLASS A, B OR C
PER NFPA 101

OCCUPANT LOAD:
GENERAL OFFICE: 33,947 / 100 = 340
MEDICAL OFFICE: 2,869 / 100 = 29
DAYCARE FACILITIES: 2,031 NET / 35 = 58
TOTAL : 437 PEOPLE

5-4-05

PROPOSED INTERIOR REMODELING FOR:
SUNRISE PROFESSIONAL CENTER
233 N. STATE ROAD 7
LAUDERHILL, FLORIDA

PROJECT ARCHITECT
JOSE RAMOS
FLA. REG. AR11115

tectonics associates
architects and planners
8300 W. OAKLAND PARK BLVD., SUITE 102
SUNRISE, FL 33351 (954) 572-1550

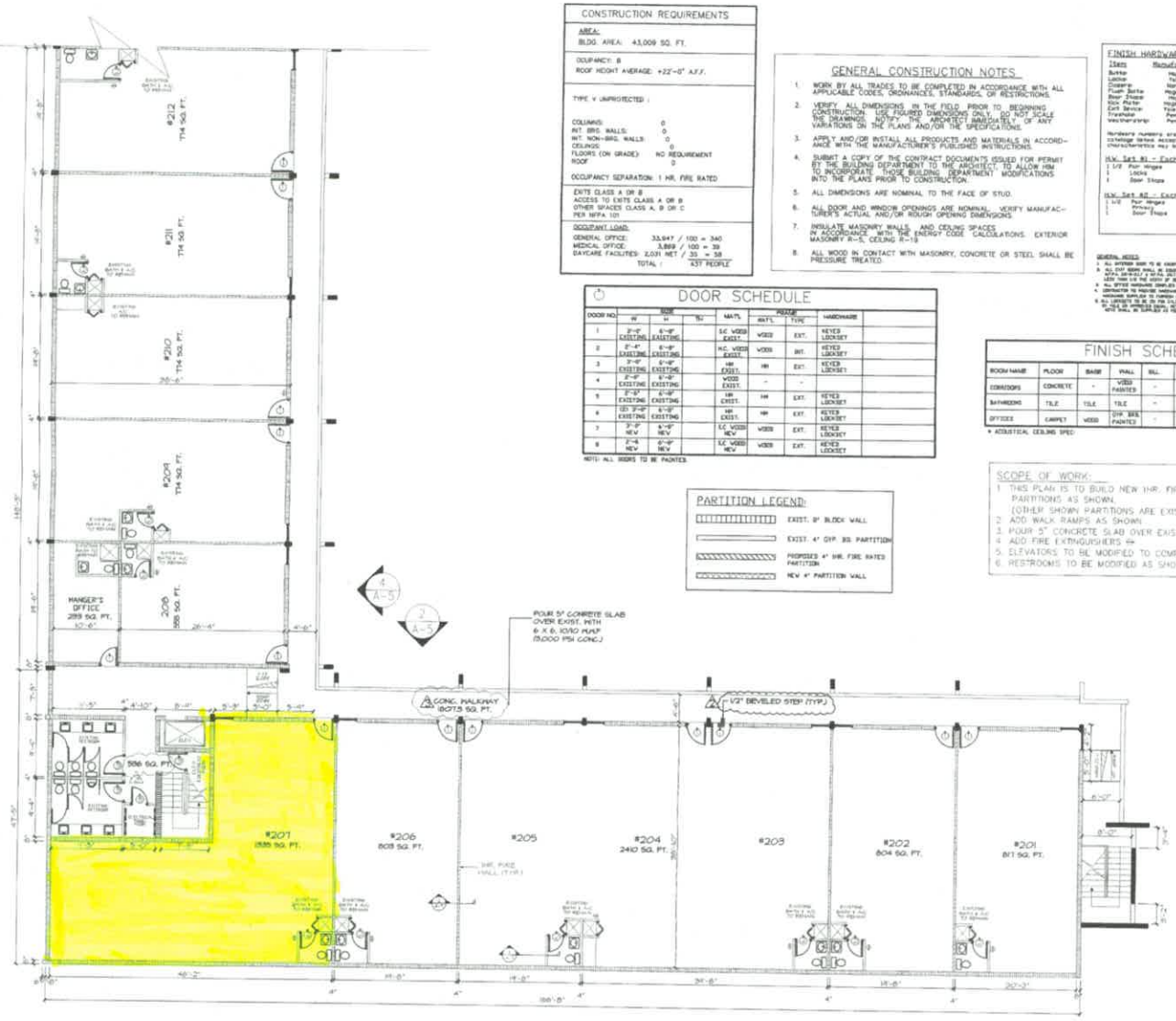
date
09/17/2004
10/25/2004
12/22/2004
02/02/2005
02/28/2005
03/21/2005

project number
04053

sheet
A-1
of

ATTACHMENT A

ATTACHMENT A



N

EXISTING SECOND FLOOR PLAN SOUTH SIDE

SCALE: 1/8" = 1'-0"

CONSTRUCTION REQUIREMENTS

AREA:
BLDG. AREA: 43,009 SQ. FT.

OCCUPANCY: B
ROOF HEIGHT AVERAGE: +22'-0" A.F.F.

TYPE V UNPROTECTED :

COLUMNS: 0
INT. BRG. WALLS: 0
INT. NON-BRG. WALLS: 0
CEILINGS: 0
FLOORS (ON GRADE): NO REQUIREMENT
ROOF: 0

OCCUPANCY SEPARATION: 1 HR. FIRE RATED

EXITS CLASS A OR B
ACCESS TO EXITS CLASS A OR B
OTHER SPACES CLASS A, B OR C
PER NFPA 101

OCCUPANT LOAD:
GENERAL OFFICE: 33,947 / 100 = 340
MEDICAL OFFICE: 3,869 / 100 = 39
DAYCARE FACILITIES: 2,031 NET / 35 = 58
TOTAL : 437 PEOPLE

GENERAL CONSTRUCTION NOTES

1. WORK BY ALL TRADES TO BE COMPLETED IN ACCORDANCE WITH ALL APPLICABLE CODES, ORDINANCES, STANDARDS, OR RESTRICTIONS.
2. VERIFY ALL DIMENSIONS IN THE FIELD PRIOR TO BEGINNING CONSTRUCTION. USE FIGURED DIMENSIONS ONLY. DO NOT SCALE THE DRAWINGS. NOTIFY THE ARCHITECT IMMEDIATELY OF ANY VARIATIONS ON THE PLANS AND/OR THE SPECIFICATIONS.
3. APPLY AND/OR INSTALL ALL PRODUCTS AND MATERIALS IN ACCORDANCE WITH THE MANUFACTURER'S PUBLISHED INSTRUCTIONS.
4. SUBMIT A COPY OF THE CONTRACT DOCUMENTS ISSUED FOR PERMIT BY THE BUILDING DEPARTMENT TO THE ARCHITECT, TO ALLOW HIM TO INCORPORATE THOSE BUILDING DEPARTMENT MODIFICATIONS INTO THE PLANS PRIOR TO CONSTRUCTION.
5. ALL DIMENSIONS ARE NOMINAL TO THE FACE OF STUD.
6. ALL DOOR AND WINDOW OPENINGS ARE NOMINAL. VERIFY MANUFACTURER'S ACTUAL AND/OR ROUGH OPENING DIMENSIONS.
7. INSULATE MASONRY WALLS AND CEILING SPACES IN ACCORDANCE WITH THE ENERGY CODE CALCULATIONS. EXTERIOR MASONRY R-5, CEILING R-19
8. ALL WOOD IN CONTACT WITH MASONRY, CONCRETE OR STEEL SHALL BE PRESSURE TREATED.

FINISH HARDWARE

Item	Manufacturer:	Acceptable Subs:
Butts	Hager	Mathews, Soss, Stanley,
Locks	Yale	Russwin, Sargent, Schlage
Closers	Norton	LCN, Yale
Flush Bolts	Hager	Glynn-Johnson
Door Stops	Hager	Glynn-Johnson
Kick Plates	Hager	Rockwin
Exit Devices	Yale	Adams-Rite, Sargent
Transoms	Pemko	Reese, Zero
Weatherstrip	Pemko	Reese, Zero

Hardware numbers are taken from the manufacturer's catalogue series. Acceptable substitutes of equal quality and characteristics may be used.

H.W. Set #1 - Each door to have:

1 1/2	Pair Hinges	BB1279 3 1/2 x3 1/2	652
1	Locks	5365L	26D
1	Door Stops	236W (3 1/2x3 1/2 FOR H.C. DOORS)	32D

H.W. Set #2 - Each door to have:

1 1/2	Pair Hinges	BB1279 3 1/2 x 3 1/2	652
1	Privacy	5365L	26D
1	Door Stops	236W (3 1/2x3 1/2 FOR H.C. DOORS)	32D

GENERAL NOTES:
1. ALL EXTERIOR DOOR TO BE EQUIPPED WITH LEVER TYPE HARDWARE PER F.A.C. REQUIREMENTS ADA
2. ALL EXIT DOORS SHALL BE EQUIPPED WITH PANIC HARDWARE. PANIC HARDWARE SHALL COMPLY WITH NFPA 101-2012 / NFPA 101 STATE. EXIT DOOR CONSIST OF BARS OR PANELS EXTENDING AT LEAST 1/2 OF THE WIDTH OF DOOR LEAF DEGREES A FORCE NO GREATER THAN 15 LBS TO ORIGINATE.
3. ALL EXTERIOR DOORS TO BE EQUIPPED WITH DEAD BOLTS.
4. CONTRACTOR TO PROVIDE HARDWARE SCHEDULE FOR REVIEW PRIOR TO INSTALLATION OF HARDWARE. HARDWARE SUPPLIER TO FURNISH HARDWARE TO COMPLETE THE PROJECT.
5. ALL LATCHSETS TO BE ON PIN CYLINDER TYPE. STANDARD DETAILS BY MANUFACTURER TO HAVE BE APPROVED PRIOR. NOTIFY TO BE VERIFIED BY OWNER. NOTE SHALL BE SUPPLIED BY VENDOR.

DOOR SCHEDULE

DOOR NO.	DOOR W	DOOR H	TH	MAT'L	FRAME MAT'L	FRAME TYPE	HARDWARE	
1	3'-0" EXISTING	6'-8" EXISTING		S.C. WOOD EXIST.	WOOD	EXT.	KEYED LOCKSET	
2	2'-4" EXISTING	6'-8" EXISTING		H.C. WOOD EXIST.	WOOD	INT.	KEYED LOCKSET	
3	3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
4	2'-8" EXISTING	6'-8" EXISTING		WOOD EXIST.	-	-		
5	2'-10" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
6	(2) 3'-0" EXISTING	6'-8" EXISTING		HM EXIST.	HM	EXT.	KEYED LOCKSET	
7	3'-0" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	
8	2'-4" NEW	6'-8" NEW		S.C. WOOD NEW	WOOD	EXT.	KEYED LOCKSET	

NOTE: ALL DOORS TO BE PAINTED.

FINISH SCHEDULE

ROOM NAME	FLOOR	BASE	WALL	SILL	CLG +	CLG HT.	REMARKS
CORRIDORS	CONCRETE	-	WOOD PAINTED	-	-	9'-0"	
BATHROOMS	TILE	TILE	TILE	-	2 X 4 ACOUST.	9'-0"	
OFFICES	CARPET	WOOD	STP. BRS. PAINTED	-	2 X 4 ACOUST.	9'-0"	

+ ACOUSTICAL CEILING SPEC.

PARTITION LEGEND:

- EXIST. 8" BLOCK WALL
- EXIST. 4" STP. BS. PARTITION
- PROPOSED 4" HR. FIRE RATED PARTITION
- NEW 4" PARTITION WALL

SCOPE OF WORK:

1. THIS PLAN IS TO BUILD NEW 1HR. FIRE RATED PARTITIONS AS SHOWN. (OTHER SHOWN PARTITIONS ARE EXISTING TO REMAIN)
2. ADD WALK RAMPS AS SHOWN
3. POUR 5" CONCRETE SLAB OVER EXIST'G WALKWAY
4. ADD FIRE EXTINGUISHERS
5. ELEVATORS TO BE MODIFIED TO COMPLY W/ADA
6. RESTROOMS TO BE MODIFIED AS SHOWN TO COMPLY W/ADA

PROJECT ARCHITECT
JOSE RAMOS
F.L.A. REG. AR11115

PROPOSED INTERIOR REMODELING FOR:
SUNRISE PROFESSIONAL CENTER
2339 N. STATE ROAD 7
LAUDERHILL, FLORIDA

tectonics associates
architects and planners
2455 W. OAKLAND PARK BLVD. SUITE 102
SUNRISE, FL. 33323
(954) 572-9590

date
09/17/2004
10/25/2004
12/22/2004
02/02/2005
02/28/2005

project number
04053

sheet
A-4
of

5-4-05

ATTACHMENT A

ATTACHMENT A

Inventory of Fixtures and Equipment
Gothrig Healthcare Services, LLC
2331 N. State Road 7, Suite 207, Lauderhill, Fl. 33313

There is not any equipment in the unit at present. The following is a list of proposed equipment items for the office:

A. WAITING AREA
- Chairs
- Water cooler
- TV
- Education Literature Rack
- Small end tables

B. RECEPTION AREA
- Semicircular desk
- Telephones
- Fax machine
- Scanner
- Printer/Copier
- File cabinets
- Computers

C. TRIAGE SPACE
- Weigh scale
- Blood Pressure machine
- Thermometer
- Desk
- Chair
- Pulse oxometer

D. LAB AREA
- Centrifuge
- Refrigerator
- Sink
- Glucometer

ATTACHMENT A

ATTACHMENT A

- Testing strips (Blood & Urine)
- Urine Specimen Cups
- Test tubes
- Blood Drawing items (Vacutainers/Needles/Syringes)
- Used Needle Sharps Container

E. BATHROOM (Located next to the Lab)

- Sink & Cabinet
- Toilet
- Toilet paper dispenser
- Paper Towel Holder or Tissue Holder
- Soap dispenser

F. EXAM ROOMS

- Exam table
- Cabinets
- Sink
- Ophthalmoscope, Autoscope, B/P cuff
- Chairs
- Gooseneck lamp

G. OFFICE

- Chairs
- Desk

H. CONFERENCE ROOM

- Desk
- Chairs
- Refrigerator (small)
- Microwave
- Small table
- Bookshelves

I. MISCELLANEOUS ITEMS

- AED
- Nebulizer

ATTACHMENT A

ATTACHMENT A

- Stethoscopes
- EKG Machine
- Fire extinguishers
- Computers
- Organizer holders for forms/documents
- Biohazard Receptacle
- Trash cans
- File Cabinets
- Shredder

ATTACHMENT A

ATTACHMENT A

After Recording Return to:

Southeast Title Agency, LLC
2918 S Jog Road
Greenacres, FL 33467

This Instrument Prepared by:

Southeast Title Agency, LLC
2918 S Jog Road
Greenacres, FL 33467
as a necessary incident to the fulfillment of conditions
contained in a title insurance commitment issued by it.

Property Appraisers Parcel I.D. (Folio) Number(s):
4941 25 KB 0310
File No.: 18-0301

WARRANTY DEED

This Warranty Deed, Made the 15th day of November, 2018, by **Franklin Asset Group, LP, a Delaware Limited Partnership**, having its place of business at **20807 Biscayne Blvd #203, Aventura, FL 33180**, hereinafter called the "Grantor", to **Seccour Realty, LLC, a Florida Limited Liability Company,** whose post office address is: **2331 N State Road 7, Condominium 207, Lauderhill, FL 33313**, hereinafter called the "Grantee".

WITNESSETH: That said Grantor, for and in consideration of the sum of **One Hundred Twenty Eight Thousand Dollars and No Cents ($128,000.00)** and other valuable considerations, receipt whereof is hereby acknowledged, by these presents grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in **Broward** County, Florida, to wit:

UNIT 207, SUNRISE PROFESSIONAL CENTER CONDOMINIUM, A CONDOMINIUM, ACCORDING TO THE DECLARATION OF CONDOMINIUM THEREOF, RECORDED IN OFFICIAL RECORDS BOOK 40983, PAGE 1208, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA, AND ANY AMENDMENTS THERETO, TOGETHER WITH ITS UNDIVIDED SHARE IN THE COMMON ELEMENTS.

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 12/31/2018, reservations, restrictions and easements of record, if any.

(Wherever used herein the terms "Grantor" and "Grantee" included all the parties to this instrument and the heirs, legal representatives and assigns of the individuals, and the successors and assigns of Limited Partnership)

ATTACHMENT A

ATTACHMENT A

IN WITNESS WHEREOF, Grantor has caused these presents to be executed in its name, and its corporate seal to be hereunto affixed, by its proper officers thereunto duly authorized, the day and year first above written.

SIGNED IN THE PRESENCE OF THE FOLLOWING WITNESSES
TWO SEPARATE DISINTERESTED WITNESSES REQUIRED

ATTEST: _____
Secretary

Witness Signature: _____
Printed Name:

Witness Signature: Angelita Gray
Printed Name:

Witness: Donna Chiapperini

FRANKLIN ASSET GROUP, LP, A DELAWARE LIMITED PARTNERSHIP
By, RE Invest International, LLC , a Florida Limited Liability Company, as General Partner

_____
By, Dmitry Fateev, a/k/a Dmitro Fateev, individually and as Trustee of the Dmitry Fateev a/k/a Dmitro Fateev Revocable Living Trust, as Authorized Member

_____
By, Alex Berkovich as President of Executive Enterprises, Inc., a Florida Profit Corporation, as Authorized Member

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me this 15th day of November, 2018 by, Dmitry Fateev, a/k/a Dmitro Fateev, individually and as Trustee of the Dmitry Fateev a/k/a Dmitro Fateev Revocable Living Trust, as Authorized Member and by, Alex Berkovich as President of Executive Enterprises, Inc., a Florida Profit Corporation, as Authorized Member, of RE Invest International, LLC , a Florida Limited Liability Company, as General Partner of Franklin Asset Group, LP, a Delaware Limited Partnership, on behalf of the Limited PartnershipHe/She is personally known to me or has produced driver license(s) as identification.

_____
Notary Public Signature
Printed Name: Donna Chiapperini

My Commission Expires: _____
(SEAL)

DONNA CHIAPPERINI
Notary Public - State of Florida
Commission # FF 237330
My Comm. Expires Jul 5, 2019
Bonded through National Notary Assn.

ATTACHMENT A

ATTACHMENT A

Electronic Articles of Organization
For
Florida Limited Liability Company

L18000214860
FILED 8:00 AM
September 10, 2018
Sec. Of State
mdsellers

Article I

The name of the Limited Liability Company is:

SECCOUR REALTY LLC

Article II

The street address of the principal office of the Limited Liability Company is:

401 W. ATLANTIC AVENUE
SUITE 09
DELRAY BEACH, FL. 33444

The mailing address of the Limited Liability Company is:

401 W. ATLANTIC AVENUE
SUITE 09
DELRAY BEACH, FL. 33444

Article III

The name and Florida street address of the registered agent is:

GOTHRIG HEALTHCARE SERVICES LLC
401 W ATLANTIC AVENUE
SUITE 09
DELRAY BEACH, FL. 33444

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: EGLINTINE RIGAUD

ATTACHMENT A

ATTACHMENT A

L18000214860
FILED 8:00 AM
September 10, 2018
Sec. Of State
mdsellers

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AP
EGLINTINE RIGAUD
401 W. ATLANTIC AVENUE
DELRAY BEACH, FL. 33444 US

Article V

The effective date for this Limited Liability Company shall be:

09/10/2018

Signature of member or an authorized representative

Electronic Signature: EGLINTINE RIGAUD

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

ATTACHMENT A

ATTACHMENT A

OMB Approval No. 2502-0265

A. Settlement Statement (HUD-1)

B. Type of Loan

1. ☐ FHA 2. ☐ RHS 3. ☐ Conv. Unins. 4. ☐ VA 5. ☐ Conv. Ins. ☐ Other	6. File Number: 18-0301	7. Loan Number:	8. Mortgage Insurance Case Number:

C. Note:	This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(POC)" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.
D. Name & Address of Borrower:	Seccour Realty, LLC, 2862 Bellarosa Cir, Royal Palm Beach, FL 33411
E. Name & Address of Seller:	Franklin Asset Group, LP, a Delaware Limited Partnership, 20807 Biscayne Blvd #203, Aventura, FL 33180
F. Name & Address of Lender:	IBM Southeast Employees CU
G. Property Location:	Property Address 2331 N State Road 7 Condominium 207 Lauderhill, Florida 33313 PIN 4941 25 KB 0310
H. Settlement Agent: **Place of Settlement:**	Southeast Title Agency, LLC, 2918 S Jog Road, Greenacres, FL 33467, (561) 904-6085 2918 S Jog Road, Greenacres, FL 33467

I. Settlement Date: 11/15/2018 **Proration Date:** 11/15/2018 **Disbursement Date:** 11/15/2018

J. Summary of Borrower's Transaction		K. Summary of Seller's Transaction	
100. Gross Amount Due from Borrower		**400. Gross Amount Due to Seller**	
101. Contract sales price	$128,000.00	401. Contract sales price	$128,000.00
102. Personal property		402. Personal property	
103. Settlement charges to borrower (line 1400)	$6,848.82	403.	
104.		404.	
105.		405.	
Adjustments for items paid by seller in advance		**Adjustments for items paid by seller in advance**	
106. City/town taxes		406. City/town taxes	
107. County taxes 11/15/2018 to 1/1/2019	$269.23	407. County taxes 11/15/2018 to 1/1/2019	$269.23
108. Assessments		408. Assessments	
109. Non Adv Taxes 11/15/2018 to 10/1/2019	$432.60	409. Non Adv Taxes 11/15/2018 to 10/1/2019	$432.60
110. Nov HOA Dues 11/15/2018 to 12/1/2018	$207.69	410. Nov HOA Dues 11/15/2018 to 12/1/2018	$207.69
111.		411.	
112.		412.	
120. Gross Amount Due from Borrower	**$135,758.34**	**420. Gross Amount Due to Seller**	**$128,909.52**
200. Amounts Paid by or in Behalf of Borrower		**500. Reductions in Amount Due to Seller**	
201. Deposit or earnest money	$15,000.00	501. Excess deposit (see instructions)	
202. Principal amount of new loan(s)	$102,400.00	502. Settlement charges to seller (line 1400)	$11,384.70
203. Existing loan(s) taken subject to		503. Existing loan(s) taken subject to	
204.		504. Payoff of first mortgage loan	
205.		505. Payoff of second mortgage loan	
206.		506.	
207.		507.	
208.		508.	
209.		509.	
Adjustments for items unpaid by seller		**Adjustments for items unpaid by seller**	
210. City/town taxes		510. City/town taxes	
211. County taxes		511. County taxes	
212. Assessments		512. Assessments	
213.		513.	
214.		514.	
215.		515.	
216.		516.	
217.		517.	
218.		518.	
219.		519.	
220. Total Paid by/for Borrower	**$117,400.00**	**520. Total Reduction Amount Due Seller**	**$11,384.70**
300. Cash at Settlement from/to Borrower		**600. Cash at Settlement to/from Seller**	
301. Gross amount due from borrower (line 120)	$135,758.34	601. Gross amount due to seller (line 420)	$128,909.52
302. Less amounts paid by/for borrower (line 220)	($117,400.00)	602. Less reductions in amount due seller (line 520)	($11,384.70)
303. Cash ☒ From ☐ To Borrower	**$18,358.34**	**603. Cash ☒ To ☐ From Seller**	**$117,524.82**

SUBSTITUTE FORM 1099 SELLER STATEMENT - The information contained in Blocks E, G, H and I and on line 401 (or, if line 401 is asterisked, lines 403 and 404), 406, 407 and 408-412 (applicable part of buyer's real estate tax reportable to the IRS) is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction will be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.

SELLER INSTRUCTION - If this real estate was your principal residence, file form 2119, Sale or Exchange of Principal Residence, for any gain, with your income tax return; for other transactions, complete the applicable parts of form 4797, Form 6252 and/or Schedule D (Form 1040).

You are required to provide the Settlement Agent with your correct taxpayer identification number.
If you do not provide the Settlement Agent with your correct taxpayer identification number, you may be subject to civil or criminal penalties.

ATTACHMENT A

ATTACHMENT A

L. Settlement Charges		Paid From Borrower's Funds at Settlement	Paid From Seller's Funds at Settlement
700. Total Real Estate Broker Fees based on price $128,000.00 @ 5.000% = $6,400.00			
Division of commission (line 700) as follows:			
701. $3,200.00 to Hometrust Real Estate Inc.			
702. $3,200.00 to ERA HOME RUN REAL ESTATE			
703. Commission paid at settlement $6,400.00			$6,400.00
704. Transaction Fee LA Broker to Hometrust Real Estate Inc.			$395.00
705. Transfaction Fee SA Broker to ERA HOME RUN REAL ESTATE		$495.00	
800. Items Payable in Connection with Loan			
801. Our origination charge POC $512 IBM Southeast Employees CU**	(from GFE #1)		
802. Your credit or charge (points) for the specific interest rate chosen	(from GFE #2)		
803. Your adjusted origination charges to IBM Southeast Employees CU	(from GFE A)		
804. Appraisal fee to IBM Southeast Employees CU	(from GFE #3)	$500.00	
805. Credit report	(from GFE #3)		
806. Tax service to IBM Southeast Employees CU	(from GFE #3)	$75.00	
807. Flood certification to IBM Southeast Employees CU	(from GFE #3)	$18.00	
808. Doc Prep Fee to IBM Southeast Employees CU		$500.00	
809. Broker Fee to Mortgage Biz of Florida		$2,200.00	
900. Items Required by Lender to Be Paid in Advance			
901. Daily interest charges from	(from GFE #10)		
902. Mortgage insurance premium for	(from GFE #3)		
903. Homeowner's insurance for	(from GFE #11)		
904.			
905.			
1000. Reserves Deposited with Lender			
1001. Initial deposit for your escrow account	(from GFE #9)		
1002. Homeowner's insurance			
1003. Mortgage insurance			
1004. City property taxes			
1005. County property taxes			
1006. Annual Assessements (maint.)			
1007.			
1008.			
1009. Aggregate Adjustment			
1100. Title Charges			
1101. Title services and lender's title insurance	(from GFE #4)	$506.50	
1102. Settlement or closing fee to Southeast Title Agency, LLC		$550.00	$300.00
1103. Owner's title insurance to Southeast Title Agency, LLC	(from GFE #5)	$715.00	
1104. Lender's title insurance to Southeast Title Agency, LLC 5 1 06 PUD r 10 08 FL ALTA $25.00 8 1 06 EPL FL ALTA $25.00 9 06 REM FL ALTA $106.50	$506.50		
1105. Lender's title policy limit $102,400.00			
1106. Owner's title policy limit $128,000.00			
1107. Agent's portion of the total title insurance premium to Southeast Title Agency, LLC $855.05			
1108. Underwriter's portion of the total title insurance premium to First American Title Insurance Company $366.45			
1109. Title Search Fee to First American Title Insurance Company		$100.00	
1110. FedEx Fee to Southeast Title Agency, LLC		$10.00	
1111. Wire Fees to Southeast Title Agency, LLC		$20.00	$10.00
1112. .			
1113.			
1114.			
1115.			
1200. Government Recording and Transfer Charges			
1201. Government recording charges	(from GFE #7)		
1202. Deed $27.00 Mortgage $171.50 Releases		$198.50	
1203. Transfer taxes	(from GFE #8)		
1204. City/County tax/stamps			
1205. State tax/stamps Deed $896.00 Mortgage $358.40		$358.40	$896.00
1206. Lien Tracking & Release Fee			
1207. E-Recording to Simplifile		$13.50	$18.00
1233.			
1234. Record LLC Affidavit to Simplifile		$19.10	
1235. UCC Recording State and County to Simplifile		$75.00	
1236. LP, LLC, Corp, Trust Affidavits to Simplifile			$76.40
1300. Additional Settlement Charges			
1301. Required services that you can shop for	(from GFE #6)		
1302. Survey to Nexgen Surveying			
1303. Estoppel Fee to On-Call Management to Southeast Title Agency, LLC			$350.00
1304. Municpal Lien Search to Skyline Lien Search			$255.00
1305. Water Utilities Master Meter			
1306. Condo Docs to On Call Management			$100.00
1307. 2018 Property Taxes to Broward County Tax Collector			$2,584.30
1308. Dec HOA Dues to The Sunrise Professional Center Condo Assn		$394.82	
1309. HOA Transfer/Setup Fee to On Call Management		$100.00	
1400. Total Settlement Charges (enter on lines 103, Section J and 502, Section K)		**$6,848.82**	**$11,384.70**

** POC $512 to IBMSEC

Items marked "POC" were paid outside the closing by: Borrower (POCB), Lender (POCL), Mortgage Broker (POCM), Other (POCO), Real Estate Agent (POCR), or Seller (POCS).

ATTACHMENT A

ATTACHMENT A

CERTIFICATION:

I have carefully reviewed the HUD-1 Settlement Statement and to the best of my knowledge and belief, it is true and accurate statement of all receipts and disbursements made on my account or by me in this transaction. . I further certify that I have received a copy of the HUD-1 Settlement Statement.

SELLER'S AND/OR BORROWER'S STATEMENT Seller's and Borrower's signature hereon acknowledges his/their approval of tax prorations and signifies their understanding that prorations were based on taxes for the preceding year, or estimates for the current year, and in the event of any change for the current year, all necessary adjustments must be made between Seller and Borrower; likewise any default in delinquent taxes will be reimbursed to Title Company by the Seller.

Title Company, in its capacity as Escrow Agent, is and has been authorized to deposit all funds it receives in this transaction in any financial institution, whether affiliated or not. Such financial institution may provide Title Company computer accounting and audit services directly or through a separate entity which, if affiliated with Title Company, may charge the financial institution reasonable and proper compensation therefore and retain any profits therefrom. Any escrow fees paid by any party involved in this transaction shall only be for check writing and input to the computers, but not for aforesaid accounting and audit services. Title Company shall not be liable for any interest or other charges on the earnest money and shall be under no duty to invest or reinvest funds held by it at any time. Sellers and Borrowers hereby acknowledge and consent to the deposit of the escrow money in financial institutions with which Title Company has or may have other banking relationships and further consent to the retention by Title Company and/or its affiliates of any and all benefits (including advantageous interest rates on loans) Title Company and/or its affiliates may receive from such financial institutions by reason of their maintenance of said escrow accounts.

The Settlement Agent does not warrant or represent the accuracy of information provided by any party, including information concerning POC items and information supplied by the lender in this transaction appearing on this HUD-1 Settlement Statement pertaining to "Comparison of Good Faith Estimate (GFE) and HUD-1 Charges" and "Loan Terms", and the parties hold harmless the Settlement Agent as to any inaccuracies in such matters.

The parties have read the above sentences, recognize that the recitations herein are material, agree to same, and recognize Title Company is relying on the same.

SECCOUR REALTY, LLC, a Florida Limited Liability Company

Rigaud Eglintine, as Manager

FRANKLIN ASSET GROUP, LP, A DELAWARE LIMITED PARTNERSHIP
By, RE Invest International, LLC, a Florida Limited Liability Company, as General Partner

By, Dmitry Fateev, a/k/a Dmitro Fateev, individually and as Trustee of the Dmitry Fateev a/k/a Dmitro Fateev Revocable Living Trust, as Authorized Member

By, Alex Berkovich as President of Executive Enterprises, Inc., a Florida Profit Corporation, as Authorized Member

To the best of my knowledge, the HUD-1 Settlement Statement which I have prepared is a true and accurate account of the funds which were received and have been or will be disbursed by the undersigned as part of the settlement of this transaction.

Southeast Title Agency, LLC

Date 11/15/18

WARNING: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details see: Title 18: U.S. Code Section 1001 and Section 1010.

ATTACHMENT A