# **City of Fort Lauderdale**

Northwest-Progresso-Flagler Heights Community Redevelopment Agency (NWPF CRA)



### APPLICATION FOR CRA FUNDING ASSISTANCE

1 CRA INCENTIVE APPLICATION Last Updated: September 16, 2016

> CAM #22-0038 Exhibit 5 Page 1 of 24

| Name of Principal Owner in Charge Xavier London |                               | Tcl. No<br>7543        | 3682597                                            | E-Mail A                    | <sup>ddress</sup><br>on@yahoo.com |
|-------------------------------------------------|-------------------------------|------------------------|----------------------------------------------------|-----------------------------|-----------------------------------|
| Primary Contact for this CRA Request            |                               | Tel. No                |                                                    | E-Mail Address              |                                   |
| Valencia London                                 |                               |                        | 838783                                             | mzval                       | ent@att.net                       |
| Name of Business<br>Rhythms 2.0 LLC             | Name of Business Tax I.D. No. |                        |                                                    | Company                     | Website                           |
| Business Address<br>2145 NW 6th Street          |                               | Tel. No<br>9545        | 5856313                                            | Fax No.                     |                                   |
| City                                            |                               | State                  |                                                    | Zip Code                    |                                   |
| Fort Lauderdale                                 |                               | FL                     |                                                    | 33312                       |                                   |
| Commencement Date to Begin Proj                 | ect:                          |                        |                                                    |                             | JOB INFORMATION                   |
| Completion Date for Project:                    |                               |                        |                                                    | Full Time<br>Jobs to be     | e Equivalent (FTE)                |
| Check Appropriate Description                   | Project Type                  | Facility I             | Description                                        | Existing                    | lobs                              |
| †Existing Business 🛛                            | †Expansion                    | Existing               | Spacesq. ft.                                       | L'Aisting.                  |                                   |
| †New Business                                   | †Relocation 🗵                 |                        | ce sq. ft.                                         | Total FT                    | E Jobs                            |
| NAICS Code / Industry Type                      | Date of                       | State who              | ere the business                                   | -                           | TYPE OF BUSINESS                  |
| 722110                                          | Incorporation                 | was inco               |                                                    |                             |                                   |
|                                                 | 07/0010                       | E                      |                                                    | Sole Prop                   | prietor                           |
|                                                 | 07/2018                       | FL                     |                                                    | Partnersh                   | ip                                |
| Proposed Project Location/City                  | Proposed Ad                   | dress                  |                                                    | Joint Ver                   | nture                             |
| Fort Lauderedale                                | <b>e</b>                      |                        |                                                    | Corporati                   | ion                               |
| Property Control Number(s)                      | Pro                           | operty Own             | er                                                 | Cooperat                    |                                   |
|                                                 |                               |                        |                                                    | Limited I                   | Liability Company X               |
|                                                 |                               |                        |                                                    | Non-Prof                    | fit Org.                          |
| Owner Tel. No. (include Area Code               | ) Is there a lien o           | n the prope            | erty?                                              | Other:                      |                                   |
|                                                 | î Yes î No                    |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    |                             |                                   |
| Bank(s) Where Business Accounts                 | for Projects Are Held         |                        |                                                    |                             |                                   |
| 1.                                              |                               |                        | 2.                                                 |                             |                                   |
| Name of Participating Bank/Lender               |                               |                        |                                                    |                             |                                   |
| Amount Contact Person Tel. No. (inclu           |                               | Tel. No. (include Area | a Codc)                                            | Fax No. (include Area Code) |                                   |
| S I                                             |                               |                        |                                                    |                             |                                   |
| Name of Other Financial Source                  | :                             |                        |                                                    |                             |                                   |
|                                                 | Contact Person                |                        | T-L No. Gooded. And                                | . (                         |                                   |
| Amount                                          | Confact Ferson                |                        | Tel. No. (include Area Code) Fax No. (include Area |                             | Fax No. (include Area Code)       |
| S<br>Name of Other Financial Source             |                               |                        | 1                                                  |                             |                                   |
| Trame of Other 1 manetal Source                 |                               |                        |                                                    |                             |                                   |
| Amount                                          | Contact Person                |                        | Tel. No. (include Area Code)                       |                             | Fax No. (include Area Code)       |
| S<br>Name of Other Financial Source             |                               |                        | L                                                  |                             |                                   |
| Name of Other I manetal Source                  |                               |                        |                                                    |                             |                                   |
| Amount                                          | Contact Person                |                        | Tel. No. (include Area                             | a Code)                     | Fax No. (include Area Code)       |
| S                                               |                               |                        |                                                    |                             |                                   |
| Project Purpose and Economic I                  | mpact                         |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    |                             |                                   |
|                                                 |                               |                        |                                                    | _                           |                                   |

NOTE 1: If the project receives funds via another City, County, Federal or State program which also requires job creation/retention, the jobs created/retained for those programs must be in addition to the jobs required under this program.

NOTE 2: If project includes the purchase of equipment using CRA funds, then there must not be another UCC filing for the equipment.

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| Management: | Owners, partners, | officers, all holders of out | standing stock - | 00% of ownership must | be shown (use separate sheet if |
|-------------|-------------------|------------------------------|------------------|-----------------------|---------------------------------|
| necessary). |                   |                              |                  |                       |                                 |

| Name<br>Valencia Londo | Complete Address<br>on 10032 Vestal PI C | % Owned<br>S, FI 33071 50 | From <b>)%</b> | То |
|------------------------|------------------------------------------|---------------------------|----------------|----|
| Name                   | Complete Address                         | % Owned                   | From           | То |
| Name                   | Complete Address                         | % Owned                   | From           | To |
| Name                   | Complete Address                         | % Owned                   | From           | То |
| Name                   | Complete Address                         | % Owned                   | From           | To |

#### PROJECT/ACTIVITY COST SUMMARY

\$\_

1. Please state the overall project cost:

2. Please state the overall project costs related to the CRA's assisted activity?

3. Please indicate the sources and uses of funds for the project on the following table.

\$\_

| Project Source(s) of Funding                            | Amount                          | Rate   | Term |
|---------------------------------------------------------|---------------------------------|--------|------|
| Bank Loan (specify)                                     |                                 |        |      |
| City funds                                              |                                 |        |      |
| CRA funds                                               |                                 |        |      |
| Company's current cash assets                           |                                 |        |      |
| Owner equity (specify)                                  |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Total Sources                                           |                                 |        |      |
| Select the Use(s) of Funds and the Amount Need for Each | Sources of Funds<br>(Yes or No) | Amount |      |
| Land Acquisition                                        |                                 |        |      |
| Real Property Acquisition                               |                                 |        |      |
| Utility and road infrastructure improvements            |                                 | 1      |      |
| New construction of commercial and industrial buildings |                                 |        |      |
| Rehabilitation of commercial and industrial buildings   |                                 |        |      |
| Purchase and installation of equipment and fixtures     |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Other (specify)                                         |                                 |        |      |
| Total Uses                                              |                                 |        |      |

NOTE 3: Other "uses" include Architectural/Engineering Fees, Application Fees, Permit Fees Impact Fees

3 CRA INCENTIVE APPLICATION Last Updated: September 16, 2016 **BUSINESS INDEBTEDNESS:** Furnish the following information on all outstanding installment debts, code and other liens, notes and mortgages payable that relate to this project. The present balances should agree with the latest balance sheet submitted (*use a separate sheet if necessary*).

| To Whom<br>Payable | Original<br>Amount | Original<br>Date | Present<br>Balance | Rate of<br>Interest | Maturity<br>Date | Monthly<br>Payment |
|--------------------|--------------------|------------------|--------------------|---------------------|------------------|--------------------|
| Name:              | \$                 |                  | \$                 | %                   |                  | \$                 |
| Name:              | \$                 |                  | \$                 | %                   |                  | \$                 |
| Name:              | \$                 |                  | \$                 | %                   |                  | \$                 |
| Name:              | \$                 |                  | \$                 | %                   |                  | \$                 |
| Name:              | \$                 |                  | \$                 | %                   |                  | \$                 |

#### THE FOLLOWING ITEMS MUST BE COMPLETED AND SUBMITTED WITH YOUR APPLICATION

- 1. A business plan which describes the company mission, market analysis, applicant capacity, economic analysis and project feasibility, a brief history and description of the company (*including the founding of the company*), overview of operations, product information, customer base, method and areas of distribution, primary competitors and suppliers within the County.
- 2. A list of general and limited partners, officers, directors and shareholders of the company. Please provide a resume for all the principals and key management.
- 3. Corporate income tax returns for the last three years (personal returns may also be requested).
- 4. Two separate lists that detail the existing jobs on your payroll and the new jobs to be created (within the list please provide the job title of each position, a brief description of each position, annual salary for existing and new positions and the industry average salary for those positions).
- 5. If machinery and equipment are being purchased with CRA funds, provide a list of all the items to be purchased, with quotes on vendor's letterhead. Include a statement from the manufacturer, attesting to the economic life of the equipment.
- 6. If business is a franchise, include a copy of the franchise agreement;
- 7. Bank Commitment Letter detailing the conditions of the loan approval.
- 8. Copy of IRS determination letter as a non-profit organization (required for all non-profit organizations only).
- 9. Signed copy of resolution or minutes from the meeting of the governing body authorizing submission of the application (*required for all non-profit organizations only*).
- 10. Articles of Incorporation or Division of Corporations information identifying authorized signatories
- 11. Copy of the Property Deed (if the applicant is the owner)
- 12. Copy of By-Laws (required for all non-profit organizations only).
- 13. Please sign and submit Statement of Personal History and Credit Check Release (as attached).
- 14. If project involves construction, please provide a minimum of two (2) detailed cost estimates prepared by Architect/Engineer and/or General Contractor, preliminary plans and specifications, Architectural Illustration and photos of existing conditions.
- 15. Attach a street map showing the location of the proposed project, Property Folio number and Legal Description.
- 16. Preliminary Project Schedule.

#### The following items are also needed, if your funding request is \$500,000 or more

(not applicable for Commercial Façade, Streetscape Enhancement and Property and Business Improvement Incentive requests)

- 17. CPA audited corporate financial statements for the last three years (*Profit and Loss Statement and a Balance Sheet*).
- 18. If the most recent business return and/or financial statement is more sixty (60) days old, please submit a current Interim Financial Statement.
- 19. Three year financial pro formas which include operating statements, balance sheets, funding sources, and use details.
- 20. Ten year revenue and expense projection for the project
- 21. Copy of sales/purchase agreement when purchasing land or a building (or an executed lease if applicable).
- 22. Provide details regarding any credit issues, bankruptcies and lawsuits by any principal, owning 20% or more of the business.
- 23. The names of all affiliates and/or subsidiary companies, and their previous three (3) years financial statements and Interim Financial Statements if the financial statements are more than sixty (60) days old.
- 24. Letter from the Department of Sustainable Development (DSD) approving the proposed project with zoning and land use designations, and Plan Development Review number and comments.
- 25. Identification and qualifications of project development team (*i.e.*, *attorney*, *engineer*, *architect*, *general* contractor, etc.).

- 26. Current Broward County Assessed Value, new capital investment dollars and total estimated new assessment when completed and placed into service.
- 27. Existing Leases, Lease commitments and tenant makeup (if applicable).
- 28. Copy of Environmental Report showing there are no Environmental issues (if applicable).
- 29. Copy of Appraisal Report (if applicable).

# THE FOLLOWING ITEMS ARE REQUIRED AFTER CRA BOARD APPROVAL AND PRIOR TO EXECUTION OF AN AGREEMENT AND RELEASE OF FUNDS

- 30. Evidence that all funds are in-place to fully fund the project.
- 31. A copy of the City approved project plans, contract with General Contractor and permits (Prior to Release of Funds)
- 32. Scope of work and all project costs
- 33. Copies of Insurance Certificates (Builders Risk/All Risk Policy, Commercial General Liability, Workers
- Compensation with the City of Fort Lauderdale and the Fort Lauderdale CRA listed as Additional Insured.

#### **APPLICANTS CERTIFICATION**

By my signature, I certify that I have read and understand the application, criteria, loan fees and program requirements. I further certify that all the information I (we) supplied is correct and accurate. All of the owners of the company/organization (*regardless of ownership percentage*) are aware of this loan and are in full agreement with the business securing financing for this project. My (our) signature(s) represent my (our) agreement to comply with City of Fort Lauderdale Community Redevelopment Agency, as it relates to this CRA funding request.

Each Proprietor, General Partner, Limited Partner and Business Owner, owning 20% or more must sign below. For all Non-Profit Organizations, all guarantors must be approved by City of Fort Lauderdale Community Redevelopment Agency.

| Business Name: Rhythms 2,0 LLC     |                    |
|------------------------------------|--------------------|
| By: Signature and Title            | <b>2/8/21</b> Date |
| Guarantors:<br>Signature and Title | 2/8/21<br>Date     |
| Signature and Title                | Date               |
|                                    |                    |

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#### PERSONAL HISTORY STATEMENT

|                                                                                                                                             | <i>b</i> ), Limited Partner ( <i>if Partnership</i> ), Officer, Director and Business Owner story Statement. For all Non-Profit Organizations, all guarantors must derdale Community Redevelopment Agency. |
|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Applicant/Business Name:<br>Rhythms 2.0 LLC                                                                                                 | Participating Bank/Lender:                                                                                                                                                                                 |
| City: Fort Lauderdale State: FL Zip: 33311                                                                                                  | City: State: Zip:                                                                                                                                                                                          |
| Personal Statement of (if you do not have a middle name, put NI                                                                             | MN):                                                                                                                                                                                                       |
| First Name: Xavier Middle: K                                                                                                                | Last: London                                                                                                                                                                                               |
| Social Security No.: Date of Birth:                                                                                                         | Place of Birth: Fort Lauderdale, FL                                                                                                                                                                        |
| Present Address: 10032 Vestal PI                                                                                                            | Previous Address: 11018 Glenwood Drive<br>(needed if in present address less than 5 years)                                                                                                                 |
| City: Coral Springs State: FL Zip: 33071                                                                                                    |                                                                                                                                                                                                            |
| From: 08/26/20 To: present                                                                                                                  | City:         Coral Springs         State:         FL         Zip:         33065           From:         03/09/12         To:         08/25/20         1000000000000000000000000000000000000               |
| Loan Requested from CRA:  Loan Request from Bank(s):                                                                                        | Are you a U.S. Citizen:Image: YESNOIf NO, are you a Lawful<br>Permanent Resident Alien:YESNO                                                                                                               |
| It is important that the next three (3) questions be answe                                                                                  | Alien Registration Number:                                                                                                                                                                                 |
|                                                                                                                                             | LL CAUSE YOUR APPLICATION TO BE DENIED.<br>RNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES,<br>OBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED,                          |
| 1. Are you presently under indictment, on parole or probation?                                                                              | YES NO                                                                                                                                                                                                     |
| (If YES, indicate the date parole or probation is to expire)2. Have you ever been charged with and/or arrested for any crimin               |                                                                                                                                                                                                            |
| vehicle violation? Include offenses which have been dismissed<br>3. Have you <u>ever</u> been convicted, placed on pretrial diversion, or p |                                                                                                                                                                                                            |
| adjudication withheld pending probation, for any criminal offer<br>I hereby authorize the City of Fort Lauderdale to request crim           |                                                                                                                                                                                                            |
| agencies for the purpose of determining my eligibility.                                                                                     | mai record mior mation about me from the criminal justice                                                                                                                                                  |
| Signature Title Owner                                                                                                                       | Date<br>02/ <b>%</b> /21                                                                                                                                                                                   |
| *ORIGINAL SIGNATURES REQUIRED                                                                                                               |                                                                                                                                                                                                            |
| 6 CRA INCENTIVE APPLICATION                                                                                                                 |                                                                                                                                                                                                            |

Last Updated: September 16, 2016



#### PERSONAL HISTORY STATEMENT

|                                                                                                                                                                                                                                                                                                   | b), Limited Partner ( <i>if Partnership</i> ), Officer, Director and Business Owner<br>story Statement. For all Non-Profit Organizations, all guarantors must<br>erdale Community Redevelopment Agency. |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Applicant/Business Name:<br>Rhythms 2.0 LLC                                                                                                                                                                                                                                                       | Participating<br>Bank/Lender:                                                                                                                                                                           |
| City: Fort Lauderdale State: FL Zip: 33311                                                                                                                                                                                                                                                        | City: State: Zip:                                                                                                                                                                                       |
| Personal Statement of (if you do not have a middle name, put NA                                                                                                                                                                                                                                   | <i>1N</i> ):                                                                                                                                                                                            |
| First Name: Valencia Middle:                                                                                                                                                                                                                                                                      | Last: London                                                                                                                                                                                            |
| Social Security No.: Date of Birth:                                                                                                                                                                                                                                                               | Place of Birth: Fort Lauderdale, FL                                                                                                                                                                     |
| Present Address: 10032 Vestal PI                                                                                                                                                                                                                                                                  | Previous Address: 11018 Glenwood Drive<br>(needed if in present address less than 5 years)                                                                                                              |
| City: Coral Springs State: FL Zip: 33071                                                                                                                                                                                                                                                          | City: Coral Springs State: FL Zip: 33065                                                                                                                                                                |
| From: 08/26/20 To: present                                                                                                                                                                                                                                                                        | From: 03/09/12 To: 08/25/20                                                                                                                                                                             |
| Loan Requested from CRA:       \$                                                                                                                                                                                                                                                                 | Are you a U.S. Citizen:Image: YESNOIf NO, are you a LawfulYESNOPermanent Resident Alien:YESNOAlien Registration Number:YESNO                                                                            |
| IT IS IMPORTANT THAT THE NEXT THREE (3) QUESTIONS BE ANSWE<br>NECESSARILY DISQUALIFY YOU. HOWEVER, AN UNTRUTHFUL ANSWER WII<br>IF YOU ANSWER "YES" TO ANY OF THE QUESTIONS BELOW, <u>PLEASE FUR</u>                                                                                               | RED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT                                                                                                                                                 |
| 1. Are you presently under indictment, on parole or probation?                                                                                                                                                                                                                                    | YES NO                                                                                                                                                                                                  |
| <ol> <li>(If YES, indicate the date parole or probation is to expire)</li> <li>Have you ever been charged with and/or arrested for any crimin vehicle violation? Include offenses which have been dismissed,</li> <li>Have you ever been convicted, placed on pretrial diversion, or p</li> </ol> | discharged, or not prosecuted.                                                                                                                                                                          |
| adjudication withheld pending probation, for any criminal offen                                                                                                                                                                                                                                   | se other than a minor vehicle violation?                                                                                                                                                                |
| I hereby authorize the City of Fort Lauderdale to request criming agencies for the purpose of determining my eligibility.                                                                                                                                                                         | inal record information about me from the criminal justice                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                         |
| Signature Title Owner                                                                                                                                                                                                                                                                             | Date<br>02/8 /21                                                                                                                                                                                        |
| *ORIGINAL SIGNATURES REQUIRED                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                         |
| 6 CRA INCENTIVE APPLICATION                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                         |

Last Updated: September 16, 2016



#### **CREDIT CHECK RELEASE FORM**

I authorize the City of Fort Lauderdale Community Redevelopment Agency to obtain such information (*from any source necessary*), as the City/CRA may require concerning statements made in the application for the CRA funding (*including but not limited to, obtaining a copy of my credit report, current loan status reports and financial information from the Participating Bank/Lender*).

PLEASE NOTE: Each Proprietor (*if a Sole Proprietorship*), General Partner (*if Partnership*), Limited Partner (*if Partnership*), Officer, Director and Business Owner (*owning 20% or more of the business*), must complete this Credit Check Release Form. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

| First Name:                                          | Middle:    |            | Last: London    |  |
|------------------------------------------------------|------------|------------|-----------------|--|
| Social Security No.:                                 | Date       | of Birth:  |                 |  |
| Driver's License (State and Number):                 |            |            |                 |  |
| Home/Cellular Phone No.: 4 5                         | 10032 Vest | tal Pl     |                 |  |
| Curre Clone Address (PO Boxes not accepted)<br>City: | :          | FL         | Zip Code: 33071 |  |
| Employer: Rhythms 2.0 LLC                            |            |            |                 |  |
| Employer Address: 2145 NW 6th S                      | Street     |            |                 |  |
| City: Fort Lauderdale                                | State:     | _          | Zip Code: 33312 |  |
| Company Phone No.: 9545856313                        |            | Other No.: |                 |  |
| Signature:                                           |            |            |                 |  |
| Date: 2/08/21                                        |            |            |                 |  |

\*ORIGINAL SIGNATURES REQUIRED



#### CREDIT CHECK RELEASE FORM

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PLEASE NOTE: Each Proprietor (*if a Sole Proprietorship*), General Partner (*if Partnership*), Limited Partner (*if Partnership*), Officer, Director and Business Owner (*owning 20% or more of the business*), must complete this Credit Check Release Form. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

| First Name: Valencia                       | Middle:              | Last: London                         |
|--------------------------------------------|----------------------|--------------------------------------|
| Social Security No.:                       | Date of Birth:-      |                                      |
|                                            |                      | Driver's License (State and Number): |
| Home/Cellular Phone No.:                   | Office No.:          |                                      |
| Current Home Address (PO Boxes not accepte | ed): 10032 Vestal Pl |                                      |
| City: Coral Springs                        | State: FL            | Zip Code: 33071                      |
| Employer: AT&T                             |                      |                                      |
| Employer Address: 8650 W Oak               | and Park Blvd        |                                      |
| <sub>City:</sub> Sunrise                   | State: FL            | Zip Code: 33351                      |
| Company Phone No.: 9548581409              | Other No.:           |                                      |
| Signature:                                 |                      |                                      |
| Date: 2/08 /21                             |                      | i,                                   |

#### **\*ORIGINAL SIGNATURES REQUIRED**



#### APPLICATION REQUEST SUPPLEMENTAL INFORMATION

#### **CRA Incentive Programs**

Please select the incentive(s) you are applying for and insert the amount of funding assistance you are seeking:

| Commercial Façade Improvement Program     | \$ <u>125,000.00</u> |
|-------------------------------------------|----------------------|
| PROPERTY AND BUSINESS IMPROVEMENT PROGRAM | \$225,000.00         |
| STREETSCAPE ENHANCEMENT PROGRAM           | \$                   |
| <b>DEVELOPMENT INCENTIVE PROGRAM</b>      | \$                   |
| PROPERTY TAX REIMBURSEMENT PROGRAM        | \$                   |

#### Please provide a supplement sheet responding to the following numbered questions:

- 1. Please describe your project.
- 2. What is the address, folio number and legal description of the property.
- 3. What is the existing and proposed use of the property? Please note that certain uses are not eligible for CRA assistance. This includes convenience stores, pawn shops, check cashing stores, tattoo parlors, massage parlors, liquor stores and other uses as may be determined by the CRA that are inconsistent with the CRA Community Redevelopment Plan. Please note that there will be restrictive covenants placed on the property for minimum of 5 years restricting use of the property to only those uses for which CRA funding was provided.
- 4. Are the proposed improvements to the property being made on behalf of a proposed tenant for the property. If so, please provide a copy of the lease agreement.
- 5. What is the zoning of the property?

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- 6. Are you the property owner? Please provide a copy of the deed of the property. You must be the owner of the property to apply.
- 7. Is your project new construction or is it renovation?
- 8. What is the total capital investment of your project and what is your hard construction and soft cost? (While property acquisition cost is not an eligible CRA expense, it may be included in your total capital investment)
- 9. What is the current Broward County Assessed Value of the property?
- 10. Is there a mortgage on the property? Please provide OR Book and Page. Please note that CRA funding is in the form of a 0% interest forgivable loan, forgiven after 5 year of project completion secured by a first

CRA INCENTIVE APPLICATION Last Updated: September 16, 2016 mortgage or subordinate mortgage on the property. Projects receiving over \$225,000 in CRA assistance will be secured by a forgivable loan forgiven after 7 years to 10 years depending on the level of CRA funding. Other forms of security in lieu of a forgivable mortgage will be considered on a case by case basis.

- 11. Are there any other liens or pending liens on the property? Please provide OR Book and Page.
- 12. Are there any code violations on the property? Identify.
- 13. Is the property listed "For Sale." Please note that properties listed for sale may not apply for CRA program funding.
- 14. How many new permanent jobs will be created by the project? Please describe the jobs to be created and projected salaries.
- 15. What is the estimated construction commencement date of the project? Please note that no work is to commence on the project unless a Program Agreement is approved and fully executed between the CRA and the property owner and that work must commence within 90 days of CRA funding approval.
- 16. What is the estimated completion date of the project? Please note that all approved projects must be completed within a maximum of three (3) years.
- 17. Please provide proof of your matching funds (i.e. bank statement, line of credit, etc.) and identify other proposed forms of financing for your project.
- 18. Do you have general liability and fire and casualty insurance on the property? You will be required to demonstrate proof of insurance and may include bonding requirements as required by the City/CRA prior to commencement of work. The cost of insurance may be included as part of your total project cost funded by the program.
- 19. Have your previously received funding from the CRA? Explain.

# If you are applying for funding from the Commercial Façade Improvement Program, Property & Business Improvement Program and/or Streetscape Enhancement Program, please also complete the following:

- 20. Do you have a detailed scope of work? If so, please include for CRA review and approval.
- 21. Do you have completed architectural drawings for the scope of work to be performed? Please include along with architectural illustration(s) of the proposed work, material specifications, color selections, etc. Please note that architectural cost may be included as part of your total project cost.
- 22. Have your project plans been submitted for City Development Review and/or permitting and if so what are the status of the plans and the plan review number? All work must be permitted and approved by the Building Official.
- 23. Do you have detailed, written contractor cost estimates? If so, please provide.
- 24. Have you selected a contractor from the attached City/CRA Approved Contractor List? Please note if your contractor is not on the City/CRA approved list, it may be possible to have your contractor become an approved CRA Contractor. He/She will need to complete the attached Contractor Application for consideration.
- 25. If you are applying for the Facade Program or Property and Business investment Program, and if you are not using a City /CRA Approved Contractor, you must secure two detailed licensed and insured contractor cost estimates and CRA funding is limited to 60% of the lowest cost estimate not to exceed \$50,000 which can only be funded on a reimbursement basis, rather than a direct payment to the contractor. In addition, all

projects over \$50,000 may be assigned a CRA Construction Review Specialist who will determine the scope of work to be funded and will secure contractor pricing for the project, manage funding request and provide general project oversight.

26. For Streetscape Enhancement Program projects, see additional requirements for projects in excess of \$300,000 as required by Florida Statute 255.20.

### I <u>Xavier London</u> understand that the CRA program benefits are contingent upon funding availability and CRA approval and are not to be construed as an entitlement or right of a property owner/applicant. I further understand that I am responsible for providing all documentation required by The CRA.

Signature of

Property Owner or Business Owner

Xavier London

Print Name

### List of all Jobs to be Created

| Job Title | # | Brief Job Description           | Annual<br>Average Salary | Industry<br>Average Salary | Experience/Education/Skills<br>Required |
|-----------|---|---------------------------------|--------------------------|----------------------------|-----------------------------------------|
| Cook      |   | Prepare & Cook dishes           | 23,040                   |                            | 1-2 years experience                    |
| Cashier   |   | Take orders & handle payments.  | 19,200                   |                            | 1-2 years experience                    |
| Prep Cook |   | Prepare items & set up for cook | 19,200                   |                            | 1-2 years experience                    |
| Janitor   |   | caretaker of the restuarant.    | 19,200                   |                            | 1-2 years experience                    |
|           |   |                                 |                          |                            |                                         |
|           |   |                                 |                          |                            |                                         |
|           |   |                                 |                          |                            |                                         |
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|           |   |                                 |                          |                            |                                         |
|           |   |                                 |                          |                            |                                         |

**\*USE ADDITIONAL SHEETS IF NECESSARY** 



Rhythms 2.0 LLC

2145 NW 6th Street

Fort Lauderdale, FL 33311

954 585-6313

Rhythms2.0@yahoo.com

**OWNERS:** 

XAVIER & VALENCIA LONDON

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# **Executive Summary**

Rhythms 2.0 is a black owned business known for its delicious dishes combined of soul food and seafood at value pricing with detailed presentation. Rhythms 2.0 will capitalize on the projected new millennials into the Sistrunk Boulevard area. Rhythms 2.0 has a very unique menu that is different from any other take-out/dine in restaurant located on Sistrunk Boulevard. The current plans for the Sistrunk area will create numerous opportunities for growth of the business, which then will be passed down to the community by creating more jobs within the community.

# **Mission Statement**

The Soul of Broward County serving delicious soul food and seafood that's comforting to the soul. Using high quality standards to serve our customers, employees, and community at a reasonable cost that generates substantial profits and growth for our employees, community, and business.

1952 62 532 2

# The Company

#### **Company Goals and Objectives**

Rhythms 2.0 is currently thriving and averaging \$15,000 per month in sales at our current smaller location. Our goal is to increase our sales per month by 20% at the new location, provided there is more space to pep and prepare larger quantities of food.

### **Company Ownership Structure**

Rhythms 2.0 operates as a Limited Liability Corporation. The partners are Xavier London and Valencia London. Both partners are equally responsible for the business's debts and liabilities. Therefore, both partners are required for all major actions undertaken.

### **Company Management Structure**

Each partner has equal rights to control and manage the business.

### **Organizational Timeline**

Rhythms 2.0 current lease will expire June 30<sup>th</sup> 2019. Renovations need to be completed by June 2019, so that Rhythms 2.0 can transition to the new location by July 2, 2019.

# **The Product**

- All dishes are made from scratch from family owned recipes.
- The seafood is seasoned to perfection with our own creative blends.
- The Macaroni & Cheese is a top seller on the soul food side of the menu.
- All items are fresh & cooked to order.
- Home-style lemonade and sweet tea are served.

### **The Product**

Rhythms 2.0 sells a variety of seafood which includes blue crabs, snow crabs, lobster, shrimp, fish, and conch. Our soul food side of the menu includes our #1 seller of ox-tails, pork chop, ribs, steaks, collard greens, candied yams, baked beans, and our signature macaroni & cheese. Rhythms 2.0 has two branded homemade dipping sauces that complements our dishes, which are known as "The Big Dude Sauce & The Ooo Weee Sauce". Rhythms 2.0 focus on delicious well portioned dishes to distinguish itself from typical fast food restaurants.

### **Product Patents**

Rhythms 2.0 hold the rights to use the name "Rhythms 2.0".

### **Future Products**

Menus will be revamped periodically to remain updated and competitive.

# **Management and Ownership Background**

#### Xavier London

The owners are Xavier and Valencia London. The London's were born and raised in Fort Lauderdale just blocks from Sistrunk Boulevard.

Xavier London graduated from Dillard High School. He was always known for cooking and feeding the community, rather it be working at the neighborhood corner store or having a cookout inviting the entire block. He has worked for Hertz Corporation while bringing his dream of opening Rhythms 2.0 to existence.

#### Valencia London

Valencia London graduated from Fort Lauderdale High School. She has worked in telecommunications for the past 20 years with AT&T formerly known as Bellsouth. She started with the company as a Customer Service Representative and has since taken several different positions, currently in position of a Business Executive.

# **Marketing Plan**

### The Target Market

The target market will be residents of Northwest Fort Lauderdale, Central Broward, downtown Fort Lauderdale and the Tri-County areas.

### **Location Analysis**

Sistrunk Boulevard is located in the heart of the city surrounded by a fire station, post office, police department, commercial properties, schools, and newly built residential housing which will be a perfect support base for new customers. Rhythms 2.0 will be in close proximity to local college campuses as well as the Broward Performing Arts, The Parker Playhouse, and The Broward County Courthouse. Currently there are five take-out restaurants. None of these restaurants carries the menu which provide a combination of soul food and seafood.

### Pricing

Rhythms 2.0 has competitive pricing that will sustain the costs of staffing requirements, inventory, and rental fees. Rhythms 2.0 will require an average monthly sales of \$17,500 to break even.

### **Advertising**

Rhythms 2.0 currently uses Social Media (Facebook, Instagram, Twitter, Google, and Yelp) for free advertisement. Rhythms 2.0 has over 10K followers. Rhythms 2.0 is known for great presentation, delicious food, and friendly service which creates great experiences and new customers via word of mouth. Rhythms 2.0 also uses delivery service via Uber Eats and Door Dash.

# Market Analysis

Soul food and seafood consumption amongst all groups have grown in the past years according to the U.S. Department of Health and Human Services. The 2015-2020 Dietary Guidelines for Americans recommend consuming two servings of seafood, including fish and shellfish per week. Consuming approximately 8 ounces of a variety of seafood weekly is associated with reduced cardiac deaths. Rhythms 2.0's menu is uniquely designed where seafood and soul food combinations are served. None of our competitors within a 10 mile radius offers a menu that serves a combination of dishes that incorporates both soul food and seafood.

# **Competitor Analysis**

#### **The Competitors**

There are several restaurants in the immediate area serving a variety of specialty items. There is one soul food restaurant with waiter-sit down service, four shops selling take out soul food, one national chain hamburger restaurant, and one national chain chicken restaurant.

Betty's located at 601 NW 22<sup>nd</sup> Road is the historic Soul Food Restaurant on the corridor that provides breakfast, lunch, and dinner with waiter-sit down service. Betty's focuses on soul food and has a small seafood selection.

BG's Take Out located at 2014 NW 6<sup>th</sup> Street provides lunch and dinner. BG's sell soul food, has a small seafood selection, and they're famous for their fried chicken gizzards.

Ivory's Take Out located at 2270 NW 6<sup>th</sup> Street provides breakfast, lunch, and dinner. Ivory's is best known for their breakfast dishes and has a small selection of seafood.

Sister Sara Crab House located at 665 SW 27<sup>th</sup> Avenue provides lunch and dinner. Sister Sara is famous for their garlic fried crabs and does not have a selection for soul food.

# **Operations**

### **Daily Operations**

Rhythms 2.0 opens for lunch and dinner five days per week, closed Sunday & Monday.

## **Operational Facilities**

Rhythms 2.0 has selected a facility that provides over 2000 square feet of working space for take-out only.

### Staffing

Rhythms 2.0 currently has two full-time cooks and one full-time cashier. Once relocated to the bigger location, we anticipate opening two part – time cashiers and two part-time prep cooks.

### **Suppliers**

Rhythms 2.0 has established a relationship with CP Vegetable Oil and Restaurant Depot. We are inquiring other local suppliers to minimize potential shortages.

# Xavier K London

11018 Glenwood Drive Coral Springs, FL 33065

#### (754) 368-2597 Xlondon@yahoo.com

Passionate, high-energy, results-oriented professional with over 10 years of experience. Expertise in corporate goal achievement, strategic planning, marketing, and team development.

#### **PROFESSIONAL EXPERIENCE**

#### Rhythms 2.0 LLC

#### Head Chef

October 2018 - Present

Ft. Lauderdale, FL

- Responsible for leading by example by demonstrating high standards of cooking and customer service at all times.
- In charge of minimizing wastage at all stages of food production and for installing in staff a culture of essential hygiene practices connected with food, cooking, storage and meal preparation.
- Making sure that all food which is presented to clientele is done so in a timely manner.

#### **Hertz Corporation**

#### Utility Technician

February 2017 – September 2018

- Check and fill all necessary fluids under the hood.
- Refuel the vehicles and check tire pressure.
- Assist with customer pick-up and delivery.

#### Ft. Lauderdale, FL

Ft. Lauderdale, FL

Head Chef

June 2012 – January 2017

**Rhythms Take Out** 

- Responsible for leading by example by demonstrating high standards of cooking and customer service at all times.
- Making sure that all food which is presented to clientele is done so in a timely manner.
- Provided appropriate training for all members of staff.

#### **EDUCATION**

#### **DILLARD HIGH SCHOOL**

Ft. Lauderdale, FL

High School Diploma, June 1991

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# Valencia D London

11018 Glenwood Drive Coral Springs, FL 33065

(954) 383-8783 mzvalent@att.net

### Work Experience

#### AT&T

October, 2013 - Present Business Solutions Executive

Provide solutions for NBM strategic accounts as well as writing orders- U-verse and POTS lines. U-verse SME. Mentor team members in understanding U-verse technology and CRM ordering system (specifically VoiP).

October, 2010 - October, 2013

#### Team Lead/Sales Associate

Handling of calls from customers requesting to establish new service and transferring existing service within AT&T. I utilized my skills to recommend and sell a variety of products and services. I was responsible for teaching CRFT improvement strategies and documentation. I also took calls from irate customers that requested to speak with a supervisor.

April, 2008 - October 2010

#### Account Executive

I was responsible for over one hundred mid-market business customers for uncovering their needs and finding a solution with selling AT&T products and services. I was a top performer with a consistent track record of meeting and exceeding my goals.

June, 1999 - April 2008

#### **Sales Associate**

Consulted with customers to recommend and sell variety of telecommunications products and or services to meet the customer's needs, while utilizing appropriate sales techniques to encourage a good customer relationship and enhance their buying experience. I met and exceeded my sales objectives, as well as my customer care commitments.

### Education

**High School Diploma** 

Ft Lauderdale High

1993

Ft Lauderdale, FL

Sunrise, FL.

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FT Lauderdale, FL.

Sunrise, FL.

Sunrise, FL.