



### Supplemental Questions

1. Please describe your project.

*This project is for improvements of the property at 300 W. Sunrise Blvd, Fort Lauderdale, FL to make the building and surrounding areas suitable for new and existing tenants (doctor's offices, dentist offices, pharmacy and possible franchises) as well as the residents of the community. These improvements includes roof repairs, exterior wood and skin repairs, replace flooring, repair bathrooms and provide new signage throughout the building.*

*Dale's Property Retail Plaza represents a significant part in the redevelopment of the Sunrise Corridor as it is in the middle of the development area. By investing funds from the Commercial Façade Improve Program and the Property and Business Improvement Program, the CRA will be able to revitalize the area by bringing more jobs and business to the local residents in the area. The economic growth that would result from this redevelopment will have a positive impact on the community.*

2. What is the address, folio number and legal description of the property.

*Location: 300 W. Sunrise Blvd, Fort Lauderdale*

*a. Folio #: 4942 34 05 5480 – Legal Description: Progresso 2-18 D Lots 5 thru 9 Blk 207*

*b. Folio #: 4942 34 11 0090 – Legal Description: Progresso 1-107 D Lots 1 less N 15 For ST 2, 3, 4 Blk 207*

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.

*Existing use of the property is a store front building with various businesses and offices.*

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.

*No. The property is owned by the applicant.*

5. What is the zoning of the property?

*B-1 Commercial*



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.  
*Yes. See Exhibit 7.*
7. Is your project new construction or is it renovation?  
*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).  
*Estimated \$471,975.00 in Renovation + \$1,100,000.00 in Real Estate purchase.*
9. What is the current Broward County Assessed Value of the Property?  
*Folio #: 4942 34 05 5480 Assessed Value -- \$1,060,040.00*  
*Folio #: 4942 34 11 0090 Assessed Value -- \$555, 510.00*
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 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.  
*No mortgage exists on the property*
11. Are there any other liens or pending liens on the property? Please provide OR Book and Page.  
*No liens or pending liens exist on the property*
12. Are there any code violations on the property? Identify.  
*No known code violations exist on the property*
13. Is the property listed "For Sale." Please note that properties listed for sale may not apply for CRA program funding.  
*The property is not listed for sale*
14. How many new permanent jobs will be created by the project? Please describe the jobs to be created and projected salaries.  
*We expect 50 plus new direct and indirect jobs to be brought to the Sunrise Corridor, as a result of the project.*



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.  
*As soon as the project is approved.*
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.  
*Project will be completed 9-12 months from start date barring any unforeseen delays.*
17. Please provide proof of your matching funds (i.e. bank statements, line of credit etc.) and identify other proposed forms of financing for your project.  
*See Exhibit 11.*
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.  
*Yes. See Exhibit 12.*
19. Have you previously received funding from the CRA? Explain.  
*No.*
20. Do you have a detailed scope of work? If so, please include for CRA review and approval.  
*Yes. See Exhibit 8.*
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.  
*No.*



23. Do you have detailed, written contractor cost estimates? If so, please provide.  
Yes.
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.  
N/A
25. If you are applying for the Façade 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 estimated 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.  
N/A
26. For Streetscape Enhancement Program projects, see additional requirements for projects in excess of \$300,000 as required by Florida Statute 225.20.  
N/A



**Question 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).

*By doing this project we will be able to get more tenants to open store front businesses that will allow 50 plus job. The jobs to be created will depend on the type of businesses that will be opened and the pay rate will vary depending on the position.*



**FACE PAGE**

**This page is the face of the policy referenced by number below and is a part of the policy.**

**Insured's Name:** Sunrise 300 LLC

**Policy Number:** AMR-54196-02

**Policy Dates:** From: 8/27/2017 To: 8/27/2018

**Surplus Lines Agent's Name:**

Marcia Whisman

**Surplus Lines Agent's Address:**

7700 West Camino Real Suite # 201  
Boca Raton, FL 33433

**Surplus Lines Agent's License:**

# P134922

**Producing Agent's Name:**

Henri Wadih Otayek

**Producing Agent's Physical Address:**

1885 Woolbright Road  
Boynton Beach, FL 33426

**"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER."**

**"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY."**

Policy Premium:	\$10,217.00	Policy Fee:	\$35.00
Inspection Fee:		Service Fee:	\$10.25
Tax:	\$512.60	Citizen's Assessment:	
EMPA Surcharge:	\$4.00	FHCF Assessment:	

**Surplus Lines Agent's Countersignature:**

**If this policy is a surplus lines, personal lines residential property policy then the following shall apply:**

**"THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU."**

**If this policy is a surplus lines, personal lines residential property policy which includes the peril of windstorm then the following shall apply:**

**"THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU."**

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L15000068609  
FILED 8:00 AM  
April 20, 2015  
Sec. Of State  
wapainter

**Article I**

The name of the Limited Liability Company is:

DALE'S PROPERTIES - 300 W. SUNRISE, LLC

**Article II**

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

250 W. SUNRISE BLVD.  
FT. LAUDERDALE, FL. US 33311

The mailing address of the Limited Liability Company is:

250 W. SUNRISE BLVD.  
FT. LAUDERDALE, FL. US 33311

**Article III**

Other provisions, if any:

ANY AND ALL LAWFUL PURPOSES

**Article IV**

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

DALE SAUNDERS  
250 W. SUNRISE BLVD.  
FT. LAUDERDALE, FL. 33311

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: DALE SAUNDERS

## Article V

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

Title: MGR  
DALE SAUNDERS  
250 W. SUNRISE BLVD.  
FT. LAUDERDALE, FL. 33311 US

L15000068609  
FILED 8:00 AM  
April 20, 2015  
Sec. Of State  
wapainter

Signature of member or an authorized representative

Electronic Signature: DALE SAUNDERS

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.



PREPARED BY:  
Bruce J. Goldman, Esq.  
Law Offices of Delima Goldman & Goldman  
11042 Paradelia Street  
Coral Gables, Florida 33156

Tax Folio Nos. 494234-11-0090; 494234-05-5970;  
and 494234-05-5480

SPECIAL WARRANTY DEED

THIS SPECIAL WARRANTY DEED made this 15 day of May 2015 by SUNRISE 300, LLC, a Florida limited liability company, hereinafter called the "Grantor" whose address is 244 Madison Avenue, PMB 344, New York, New York 10016, to DALE'S PROPERTIES - 300 W. SUNRISE, LLC, a Florida limited liability company, hereinafter called the "Grantee," whose address is 4351 N.W. 101 Drive, Coral Springs, Florida 33065.

W I T N E S S E T H:

That the Grantor, for and in consideration of the sum of Ten and 00/100 (\$10.00) Dollars and other good and valuable consideration, the receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, that certain land situated in Broward County, Florida, viz:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF.

THIS CONVEYANCE IS SUBJECT TO THE FOLLOWING:

1. Taxes and assessments for 2015 and subsequent years.
2. Zoning restrictions and prohibitions imposed by governmental and quasi-governmental authorities.
3. Conditions, limitations, reservations, restrictions, agreements and easements of record, without intending to reimpose same.

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 it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land; that it hereby warrants the title to said land and will defend the same against the lawful claims of all persons claiming by, through or under the said Grantor.

050415-WD-SUNRISE300

1

IN WITNESS WHEREOF, the undersigned has caused this Special Warranty Deed to be executed the day and year first above written.

Signed, sealed and delivered  
in the presence of:

SUNRISE 300, LLC, a  
Florida limited liability  
company

[Signature]  
[Witness signature]

Booker Jr  
[type or print name]

[Signature]  
[Witness signature]

CAROLYN S GILL  
[type or print name]

By: [Signature]  
Mathieu Goldenberg,  
Manager

STATE OF FLORIDA :  
: ss  
COUNTY OF BROWARD :

The foregoing instrument was acknowledged before me this 15 day of May 2015 by MATHIEU GOLDENBERG, Manager of SUNRISE 300, LLC, a Florida limited liability company, on behalf of the limited liability company. MATHIEU GOLDENBERG is ☐ personally known to me or ☒ produced Fla Drivers License as identification.

[Signature]  
Notary Public  
Print Name: \_\_\_\_\_

My Commission Expires:

[SEAL]



050415-WD-SUNRISE300

EXHIBIT "A"

Lot 1, LESS the North 15 feet thereof, and Lots 2, 3 and 4 in Block 207, of SUPPLEMENTAL MAP OF PROGRESSO, according to the Plat thereof, recorded in Plat Book 1, Page 107, of the Public Records of Miami-Dade County, Florida; said lands now situate, lying and being in Broward County, Florida.

TOGETHER WITH:

Lots 5, 6, 7, 8 and 9 in Block 207 and Lots 43 and 44, in Block 208, of PROGRESSO, according to the Plat thereof, recorded in Plat Book 2, Page 18, of the Public Records of Miami-Dade County, Florida; said lands now situate, lying and being in Broward County, Florida.

050415\_ExhibitA



I hereby certify this document to be a true, correct and complete copy of the record filed in my office.

Dated this 03 day of November, 2017 County Administrator.

By

*Erika Wilson*

Deputy Clerk



# City of Fort Lauderdale, Florida

## Construction Estimate

		Client:			
Construction Items		Quantity/Sq. Ft.		Dollar Amount	
	Landscaping				\$25,000.00
	Replace Wood Soffit				\$23,500.00
	Painting Exterior				\$34,000.00
	Island rework				\$25,000.00
	Overlayment Parking Lot				\$32,000.00
	Storefront Windows				\$216,000.00
	Sign				\$12,000.00
	Exterior Lights				\$17,000.00
	General Contractor Fee				\$ 65,000.00
	Total				\$449,500.00
	Contegency				\$22,475.00
	Grand Total				\$471,975.00

Question 15.

Attach a street map showing the location of the proposed project. Property Folio number and Legal Description.



Location: 300 W. Sunrise Blvd, Fort Lauderdale, FL

Property ID #'s:

- a. Folio #: 4942 34 05 5480 – Legal Description: Progresso 2-18 D Lots 5 thru 9 Blk 207
- b. Folio #: 4942 34 11 0090 – Legal Description: Progresso 1-107 D Lots 1 less N 15 For ST 2, 3, 4 Blk 207

# Wells Fargo Combined Statement of Accounts

Primary account number: [REDACTED] ■ September 1, 2017 - September 30, 2017 ■ Page 1 of 13



035722 2 AV 0.373 891864



DALE'S WHEELS & TIRES DIRECT INC  
MERCHANT ACCOUNT  
250 W SUNRISE BLVD  
FORT LAUDERDALE FL 33311-6207

## Questions?

Available by phone 24 hours a day, 7 days a week:  
Telecommunications Relay Services calls accepted

**1-800-CALL-WELLS** (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: [wellsfargo.com/biz](http://wellsfargo.com/biz)

Write: Wells Fargo Bank, N.A. (287)

P.O. Box 6995

Portland, OR 97228-6995

## Your Business and Wells Fargo

Cash flow is a key indicator of the financial health of your business. Find tips and strategies for effective cash flow management at [wellsfargoworks.com](http://wellsfargoworks.com).

## Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to [wellsfargo.com/biz](http://wellsfargo.com/biz) or call the number above if you have questions or if you would like to add new services.

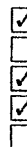
Business Online Banking

Online Statements

Business Bill Pay

Business Spending Report

Overdraft Protection



## Summary of accounts

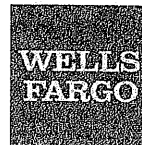
### Checking/Prepaid and Savings

Account	Page	Account number	Ending balance last statement	Ending balance this statement
Wells Fargo Business Choice Checking	2	[REDACTED]	185,214.98	209,935.40
Wells Fargo Business Choice Checking	4	[REDACTED]	17,543.59	17,166.84
Platinum Business Checking	5	[REDACTED]	42,818.70	15,432.96
Total deposit accounts			\$245,577.27	\$242,535.20

DDCL1UTJ 035722 NNNNNNNNN NNN NNN 001 007 287 176627 20568082.4

# Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ September 1, 2017 - September 30, 2017 ■ Page 1 of 4



035465 1 AV 0.373 891864



DALE'S PROPERTIES & INVESTMENTS, INC.

300 W SUNRISE BLVD STE 11

FORT LAUDERDALE FL 33311-6200

## Questions?

Available by phone 24 hours a day, 7 days a week:  
Telecommunications Relay Services calls accepted

**1-800-CALL-WELLS** (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: [wellsfargo.com/biz](http://wellsfargo.com/biz)

Write: Wells Fargo Bank, N.A. (287)

P.O. Box 6995

Portland, OR 97228-6995

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Cash flow is a key indicator of the financial health of your business. Find tips and strategies for effective cash flow management at [wellsfargoworks.com](http://wellsfargoworks.com).

## Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to [wellsfargo.com/biz](http://wellsfargo.com/biz) or call the number above if you have questions or if you would like to add new services.

Business Online Banking

Online Statements

Business Bill Pay

Business Spending Report

Overdraft Protection



## Activity summary

Beginning balance on 9/1	\$32,524.01
Deposits/Credits	8,713.00
Withdrawals/Debits	- 1,966.07
<b>Ending balance on 9/30</b>	<b>\$39,270.94</b>
 Average ledger balance this period	 \$36,118.58

Account number: [REDACTED]

**DALE'S PROPERTIES & INVESTMENTS, INC.**

Florida account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 063107513

For Wire Transfers use

Routing Number (RTN): 121000248

## Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

DDCL1UTZJ 035465 NNNNNNNNNN NNN 001 002 287 175467 20558082.4

# Wells Fargo Business Choice Checking

Account number: [REDACTED] September 1, 2017 - September 30, 2017 ■ Page 1 of 4

WELLS  
FARGO

035637 1 AV 0.373 891864



DALE'S PROPERTIES-300 W SUNRISE, LLC  
300 W SUNRISE BLVD STE 11  
FORT LAUDERDALE FL 33311-6200

## Questions?

Available by phone 24 hours a day, 7 days a week:  
Telecommunications Relay Services calls accepted

**1-800-CALL-WELLS** (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: [wellsfargo.com/biz](http://wellsfargo.com/biz)

Write: Wells Fargo Bank, N.A. (287)

P.O. Box 6995

Portland, OR 97228-6995

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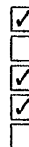
Business Online Banking

Online Statements

Business Bill Pay

Business Spending Report

Overdraft Protection



## Activity summary

Beginning balance on 9/1	\$49,798.92
Deposits/Credits	17,399.14
Withdrawals/Debits	- 13,308.55
<b>Ending balance on 9/30</b>	<b>\$53,889.51</b>
 Average ledger balance this period	 \$47,396.31

Account number: [REDACTED]

**DALE'S PROPERTIES-300 W SUNRISE, LLC**

Florida account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 063107513

For Wire Transfers use

Routing Number (RTN): 121000248

## Overdraft Protection

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DC011UTZJ 035637 NNNNNNNNNN NNN NNN 001 002 287 176155 20568082.4