



City of Hollywood, Florida

2600 HOLLYWOOD BLVD. • P.O. Box 229045 • ZIP 33022-9045

DATE: **February 17, 2016**

RE: **BLANKET ORDER # B002830**

PRODUCT/SERVICE: **Landscape Design and Field Services (Groundcover/Plants, Shrubs and Installation Services)**

Tenusa Inc (V#36087)
Attention: Pedro L. Bofill III
6619 South Dixie Highway, Suite 256
Miami, FL 33143

(PRIMARY VENDOR)
Telephone Contact: 305-970-2829
Fax: 305-663-1123
Email: tenusaplb3@gmail.com

Dear Vendor:

This is to inform you that the City of Hollywood, Florida is entering into a Blanket Order with your Company based on one of the following:

- | | | |
|-------------------------------------|----------------------------------|--------|
| <input checked="" type="checkbox"/> | FORMAL BID # F-4438-16-RD | |
| <input type="checkbox"/> | INFORMAL BID # | DATED: |
| <input type="checkbox"/> | RENEWAL OF FORMAL BID # | DATED: |
| <input type="checkbox"/> | EXTENSION OF FORMAL BID/RFP# | DATED: |
| <input type="checkbox"/> | WRITTEN QUOTATION # | DATED: |
| <input type="checkbox"/> | VERBAL QUOTATION PER | DATED: |
| <input type="checkbox"/> | STATE OF FLORIDA CONTRACT # | DATED: |
| <input type="checkbox"/> | BROWARD COUNTY BID # | |
| <input type="checkbox"/> | OTHER: | |

The term of this order is **2/17/2016** through **2/16/2018**. (Initial Two (2) year term, with two (2) additional two (2) year renewal options approved via Resolution R-2016-XXX on February 17, 2016).

The estimated dollar value is **\$250,000.00 annually (combined total for B002830, B002831 and B002832)**.

The obligations of the City of Hollywood under this order are subject to the availability of funds lawfully appropriated for its purpose by the City Commission and are subject to the terms and conditions contained on the Purchase Order form.

Contingent upon the receipt and approval of all required certificates of Insurance.

The City of Hollywood Departments will issue hard copy orders against this Blanket Order as your authorization to deliver. All invoices must reference each unique document number.

If you have any questions, please contact **Ralph Dierks** at (954) 921-**3223**.

c: **Public Works**
Finance



City of Hollywood, Florida

2600 HOLLYWOOD BLVD. • P.O. Box 229045 • ZIP 33022-9045

DATE: **February 17, 2016**

RE: **BLANKET ORDER # B002831**

PRODUCT/SERVICE: **Landscape Design and Field Services (Groundcover/Plants, Shrubs and Installation Services)**

Abraham Vanegas Landscaping, Inc. (V#36086)
Attention: Abraham Vanegas
11201 SW 188 Terrace
Miami, FL 33157

(ALTERNATE 1 VENDOR)
Telephone Contact: 305-257-0080
Fax: 305-252-4262
Email: avlandscaping@bellsouth.net

Dear Vendor:

This is to inform you that the City of Hollywood, Florida is entering into a Blanket Order with your Company based on one of the following:

- | | | |
|-------------------------------------|----------------------------------|--------|
| <input checked="" type="checkbox"/> | FORMAL BID # F-4438-16-RD | |
| <input type="checkbox"/> | INFORMAL BID # | DATED: |
| <input type="checkbox"/> | RENEWAL OF FORMAL BID # | DATED: |
| <input type="checkbox"/> | EXTENSION OF FORMAL BID/RFP# | DATED: |
| <input type="checkbox"/> | WRITTEN QUOTATION # | DATED: |
| <input type="checkbox"/> | VERBAL QUOTATION PER | DATED: |
| <input type="checkbox"/> | STATE OF FLORIDA CONTRACT # | DATED: |
| <input type="checkbox"/> | BROWARD COUNTY BID # | |
| <input type="checkbox"/> | OTHER: | |

The term of this order is **2/17/2016** through **2/16/2018**. (**Initial Two (2) year term, with two (2) additional two (2) year renewal options approved via Resolution R-2016-XXX on February 17, 2016**).

The estimated dollar value is **\$250,000.00 annually (combined total for B002830, B002831 and B002832)**.

The obligations of the City of Hollywood under this order are subject to the availability of funds lawfully appropriated for its purpose by the City Commission and are subject to the terms and conditions contained on the Purchase Order form.

Contingent upon the receipt and approval of all required certificates of Insurance.

The City of Hollywood Departments will issue hard copy orders against this Blanket Order as your authorization to deliver. All invoices must reference each unique document number.

If you have any questions, please contact **Ralph Dierks** at (954) 921-3223.

c: **Public Works**
Finance



City of Hollywood, Florida

2600 HOLLYWOOD BLVD. • P.O. Box 229045 • ZIP 33022-9045

DATE: **February 17, 2016**

RE: BLANKET ORDER # **B002832**

PRODUCT/SERVICE: **Landscape Design and Field Services (Groundcover/Plants, Shrubs and Installation Services)**

OrchidMan Landscape Artisans, Corp (V#32639)
Attention: Jose G. Perez
7400 SW 232nd Street
Miami, FL 33170

(ALTERNATE 2 VENDOR)
Telephone Contact: 305-245-7111
Fax: 305-246-5545
Email: orchidman@me.com

Dear Vendor:

This is to inform you that the City of Hollywood, Florida is entering into a Blanket Order with your Company based on one of the following:

- | | | |
|-------------------------------------|----------------------------------|--------|
| <input checked="" type="checkbox"/> | FORMAL BID # F-4438-16-RD | |
| <input type="checkbox"/> | INFORMAL BID # | DATED: |
| <input type="checkbox"/> | RENEWAL OF FORMAL BID # | DATED: |
| <input type="checkbox"/> | EXTENSION OF FORMAL BID/RFP# | DATED: |
| <input type="checkbox"/> | WRITTEN QUOTATION # | DATED: |
| <input type="checkbox"/> | VERBAL QUOTATION PER | DATED: |
| <input type="checkbox"/> | STATE OF FLORIDA CONTRACT # | DATED: |
| <input type="checkbox"/> | BROWARD COUNTY BID # | |
| <input type="checkbox"/> | OTHER: | |

The term of this order is **2/17/2016** through **2/16/2018**. (**Initial Two (2) year term, with two (2) additional two (2) year renewal options approved via Resolution R-2016-XXX on February 17, 2016**).

The estimated dollar value is **\$250,000.00 annually (combined total for B002830, B002831 and B002832)**.

The obligations of the City of Hollywood under this order are subject to the availability of funds lawfully appropriated for its purpose by the City Commission and are subject to the terms and conditions contained on the Purchase Order form.

Contingent upon the receipt and approval of all required certificates of Insurance.

The City of Hollywood Departments will issue hard copy orders against this Blanket Order as your authorization to deliver. All invoices must reference each unique document number.


If you have any questions, please contact **Ralph Dierks** at (954) 921-3223.


c: Public Works
Finance

**CITY OF HOLLYWOOD, FLORIDA
DEPARTMENT OF PUBLIC WORKS
INTER-OFFICE MEMORANDUM**

DATE: December 30, 2015

TO: Joel Wasserman, Procurement Director

THRU: Sylvia Glazer, Public Works Director 

FROM: *For* Karen Arndt, Assistant Public Works Director 

SUBJECT: Award Recommendation — Solicitation #F-4438-16-RD Landscape Design and Field Services (groundcover/plant and shrub installation)

ISSUE:

The Public Works Department requires a contract for the installation of new landscape materials.

EXPLANATION:

This contract was bid via solicitation #F-4438-16-RD. We recommend the contract be awarded as follows:

Primary Vendor – Tenusa, Inc.
Secondary Vendor – Abraham Vanegas Landscaping, Inc.
Tertiary Vendor – Orchid Man Landscape

Please note that Abraham Vanegas Landscaping Inc. does not have the Intermediate MOT certification and must obtain this prior to a Purchase Order being issued.

Funding is available in account number 01.5171.00483.541.005224 and 01.5171.00481.541.005229.

RECOMMENDATION:

Recommend award.

Linda Silvey

From: Karen Arndt
Sent: Tuesday, January 05, 2016 3:14 PM
To: Ralph Dierks; Linda Silvey
Cc: Charles Lassiter
Subject: Recommendation for award - landscape design and field services
Attachments: SharpScan@hollywoodfl.org_20160105_151839.pdf

References all checked out. See attached. Thanks!



CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

Solicitation Request Form (Use for bids, RFPs, RLIs, RFQs)

Date 2/5/15

Department/Office Public Works

Division/Area 5171

Contact Person Charles Lassiter

Title Environmental Services
Supervisor

Phone 954-967-4207

Email classiter@hollywoodfl.org

1. Product/Service being requested (be specific.) Landscape Services (Plant and Shrub Supply & Installation)

2. Detailed description of the products/services function and purpose. Landscaping services, plant and shrub supply & installation on an as needed basis at various sites throughout the City.

Are there alternative products/services capable of performing the required function? Yes

3. Has this product/service previously been formally solicited by the City of Hollywood?

Yes No Unsure

If yes, please provide previous solicitation number. F-4145-09-IS

4. Has this product/service previously been formally solicited by another government agency?

Yes No Unsure

If yes, please provide details and copy if available. N/A

5. Total estimated cost of the requested product/service? 250,000.00

Has this cost been approved in your budget? Yes No

Procurement Service Division use only

Requisition # R
BPO _____
(As Applicable)

Purchase Order # P
(As Applicable)

Blanket Purchase Order # _____
(As Applicable)

If yes, provide Account Number (s.) 01.5171.00483.541.005224
01.5171.00481.541.005229

6. Formal Solicitations must be advertised for a minimum of 10 (ten) days and typically not more than 30 (thirty) days. How long is the Department/Office requesting to advertise this solicitation? 15 Days

7. Is a pre-bid meeting required? Yes No

If yes, are you requesting it to be mandatory? Yes No

8. Project location? Various locations

9. Completion Time: Final completion of this project shall be in N/A calendar days once a Notice To Proceed (NTP) is given to the awarded vendor.

10. Are you requesting this formal solicitation require liquidated damages (liquidated damages are not penalties, they should represent the amount of monies the City will incur/lose if the project is not completed in require time?)

Yes No

11. Please list any special licenses or certification require to bid. _____

12. Are there any outside entities assisting with this solicitation (i.e. Architect, Consultant, etc?)

Yes No

If yes, please provide the information:

Entity _____ Contact Person _____

Phone _____ Email _____

13. Are there attachments associated with this request? Yes No

14. Would this purchase(s) result in the potential of future purchases for related products/services being restricted to a particular vendor or create a specific vendor as sole source provider for related items?

Yes No

If yes, please describe the related products/services and estimated cost(s.)

N/A

15. Would this purchase(s) result in any future maintenance costs which are not included in the initial purchase?

Yes No

If yes, please attach a draft maintenance plan which includes cost estimates and funding source(s.)

N/A

16. Is this a grant related purchase? Yes No

Procurement Service Division use only

Requisition # R _____

Purchase Order # P _____

Blanket Purchase Order # _____

BPO _____
(As Applicable)

(As Applicable)

(As Applicable)

Will this require matching funds? Yes No

What is the grant source? N/A

What is the grant (dollar) amount? N/A

17. Does this solicitation for product/service work in conjunction with any other Department/Office or will it impact any other Department/Office? Yes No

If yes, please provide details on Department/Office and how. N/A

Signature(s) below of other Department/Office Director(s) indicates they have reviewed and agree to this Request Form.

Signature

Department/Office

Signature

Department/Office

18. Please provide the names of suggested evaluations committee member:
(NOTE: Committee members should not be direct reports.)

19. Please provide any specific vendor(s) to be included in the notification of these solicitations.

To be completed by Procurement Services Division upon award recommendation

Advanced search of the vendor recommended for award on the Federal Government's Systems for Award Management at www.sam.gov.

Date of Advanced Search _____

Company Name(s) Searched

Search Results

Procurement Service Division use only

Requisition # R _____
BPO _____
(As Applicable)

Purchase Order # P _____
(As Applicable)

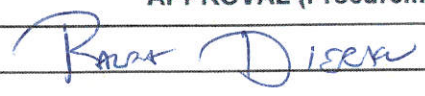
Blanket Purchase Order # _____
(As Applicable)


 Contact Person's Signature

 Supervisor's Signature

 Director's Signature

2/19/15
 Date
 2/19/15
 Date
 2-20-15
 Date

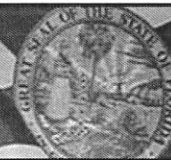
APPROVAL (Procurement Service Division Use Only)			
Verified By:		Date	1/14/16
Approved By:		Date	

Procurement Service Division use only

Requisition # R _____
 BPO _____
 (As Applicable)

Purchase Order # P _____
 (As Applicable)

Blanket Purchase Oder # _____
 (As Applicable)

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Profit Corporation**

TENUSA, INC.

Filing Information

Document Number	P97000040863
FEI/EIN Number	65-0796350
Date Filed	05/05/1997
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	12/03/2010

Principal Address11220 SW 67 AVE
MIAMI, FL 33156

Changed: 04/23/1998

Mailing Address6619 S DIXIE HWY
#256
MIAMI, FL 33143

Changed: 04/23/1998

Registered Agent Name & AddressBOFILL, PEDRO L
11220 SW 67 AVE
MIAMI, FL 33156

Name Changed: 04/18/2002

Address Changed: 04/18/2002

Officer/Director Detail**Name & Address**

Title P

BOFILL, PEDRO L
11220 SW 67 AVE
MIAMI, FL 33156

Title S

BOFILL, PEDRO L
 11220 SW 67 AVE
 MIAMI, FL 33156

Annual Reports

Report Year	Filed Date
2013	04/15/2013
2014	03/05/2014
2015	03/06/2015

Document Images

03/06/2015 -- ANNUAL REPORT	View image in PDF format
03/05/2014 -- ANNUAL REPORT	View image in PDF format
04/15/2013 -- ANNUAL REPORT	View image in PDF format
01/13/2012 -- ANNUAL REPORT	View image in PDF format
01/26/2011 -- ANNUAL REPORT	View image in PDF format
12/03/2010 -- REINSTATEMENT	View image in PDF format
01/14/2009 -- ANNUAL REPORT	View image in PDF format
05/27/2008 -- ANNUAL REPORT	View image in PDF format
01/16/2007 -- ANNUAL REPORT	View image in PDF format
05/01/2006 -- ANNUAL REPORT	View image in PDF format
04/25/2005 -- ANNUAL REPORT	View image in PDF format
05/03/2004 -- ANNUAL REPORT	View image in PDF format
09/10/2003 -- ANNUAL REPORT	View image in PDF format
04/18/2002 -- ANNUAL REPORT	View image in PDF format
02/06/2001 -- ANNUAL REPORT	View image in PDF format
05/31/2000 -- ANNUAL REPORT	View image in PDF format
04/14/1999 -- ANNUAL REPORT	View image in PDF format
04/23/1998 -- ANNUAL REPORT	View image in PDF format
05/05/1997 -- Domestic Profit Articles	View image in PDF format

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State of Florida, Department of State

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Profit Corporation**

ABRAHAM VANEGAS LANDSCAPING, INC

Filing Information

Document Number	P03000036662
FEI/EIN Number	51-0455192
Date Filed	04/01/2003
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	07/29/2005
Event Effective Date	NONE

Principal Address11201 SW 188 TERR
MIAMI, FL 33157

Changed: 07/29/2005

Mailing Address11201 SW 188 TERR
MIAMI, FL 33157

Changed: 07/29/2005

Registered Agent Name & AddressVANEGAS, ABRAHAM P
11201 SW 188TH TERR
MIAMI, FL 33157

Name Changed: 04/27/2010

Address Changed: 07/29/2005

Officer/Director Detail**Name & Address**

Title P

VANEGAS, ABRAHAM
11201 SW 188 TERR
MIAMI, FL 33157

Title VP

FARFAN, REBECCA
11201 SW 188 TERR
MIAMI, FL 33157

Annual Reports

Report Year	Filed Date
2013	01/16/2013
2014	02/26/2014
2015	01/23/2015

Document Images

01/23/2015 -- ANNUAL REPORT	View image in PDF format
02/26/2014 -- ANNUAL REPORT	View image in PDF format
01/16/2013 -- ANNUAL REPORT	View image in PDF format
01/09/2012 -- ANNUAL REPORT	View image in PDF format
03/11/2011 -- ANNUAL REPORT	View image in PDF format
04/27/2010 -- ANNUAL REPORT	View image in PDF format
04/15/2009 -- ANNUAL REPORT	View image in PDF format
04/22/2008 -- ANNUAL REPORT	View image in PDF format
03/26/2007 -- ANNUAL REPORT	View image in PDF format
02/20/2006 -- ANNUAL REPORT	View image in PDF format
07/29/2005 -- REINSTATEMENT	View image in PDF format
04/01/2003 -- Domestic Profit	View image in PDF format

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State of Florida, Department of State

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Profit Corporation**

ORCHIDMAN LANDSCAPE ARTISANS, CORP.

Filing Information

Document Number	P08000081373
FEI/EIN Number	26-3340922
Date Filed	09/03/2008
State	FL
Status	ACTIVE
Last Event	AMENDMENT AND NAME CHANGE
Event Date Filed	08/19/2010
Event Effective Date	NONE

Principal Address17400 SW 232 Street
Miami, FL 33170

Changed: 03/22/2013

Mailing Address17400 SW 232 Street
Miami, FL 33170

Changed: 03/22/2013

Registered Agent Name & AddressPEREZ, ALEJANDRA C
17400 SW 232 Street
Miami, FL 33170

Name Changed: 05/01/2012

Address Changed: 03/22/2013

Officer/Director Detail**Name & Address**

Title D

PEREZ, JOSE G
17400 SW 232 Street
Miami, FL 33170

Title P

PEREZ, ALEJANDRA C
17400 SW 232 Street
Miami, FL 33170

Annual Reports

Report Year	Filed Date
2013	03/22/2013
2014	03/24/2014
2015	04/24/2015

Document Images

04/24/2015 -- ANNUAL REPORT	View image in PDF format
03/24/2014 -- ANNUAL REPORT	View image in PDF format
03/22/2013 -- ANNUAL REPORT	View image in PDF format
05/01/2012 -- ANNUAL REPORT	View image in PDF format
02/17/2011 -- ANNUAL REPORT	View image in PDF format
08/19/2010 -- Amendment and Name Change	View image in PDF format
04/29/2010 -- ANNUAL REPORT	View image in PDF format
01/08/2009 -- ANNUAL REPORT	View image in PDF format
12/08/2008 -- Amendment and Name Change	View image in PDF format
09/03/2008 -- Domestic Profit	View image in PDF format

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State of Florida, Department of State

PO8000081373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

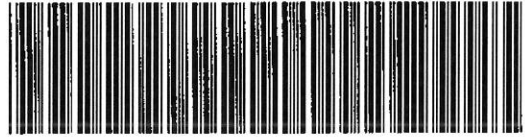
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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09/18/10--01010--009 **35.00

*Name Change
Amend*

2010 AUG 18 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*ADR
8/19/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ORCHID MAN LANDSCAPE ARTISANS, CORP.

DOCUMENT NUMBER: P08000081373

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE G. PEREZ

Name of Contact Person

ORCHIDMAN LANDSCAPE ARTISANS, CORP.

Firm/ Company

2901 PONCE DE LEON BLVD.

Address

CORAL GABLES, FL 33134

City/ State and Zip Code

jose@orchidmanlandscape.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Montalvo

Name of Contact Person

at (305)

446-5225

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 Filing Fee &
Certificate of Status

\$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

\$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

ORCHID MAN LANDSCAPE ARTISANS, CORP.

2010 AUG 18 PM 3:51

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P08000081373

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ORCHIDMAN LANDSCAPE ARTISANS, CORP.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

2901 PONCE DE LEON BLVD.

(Principal office address MUST BE A STREET ADDRESS)

CORAL GABLES, FL 33134

C. Enter new mailing address, if applicable:

2901 PONCE DE LEON BLVD.

(Mailing address MAY BE A POST OFFICE BOX)

CORAL GABLES, FL 33134

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

_____ (Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES</u>	<u>ALEJANDRA C. PEREZ</u>	<u>8525 SW 81 TERR</u> <u>MIAMI, FL 33143</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRES</u>	<u>JOSE G. PEREZ</u>	<u>2901 PONCE DE LEON BLVD.</u> <u>CORAL GABLES, FL 33134</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>ALEJANDRA C. PEREZ</u>	<u>8525 SW 81 TERR</u> <u>MIAMI, FL 33143</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 08/01/2010

(date of adoption is required)

Effective date if applicable: 08/01/2010

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

“The number of votes cast for the amendment(s) was/were sufficient for approval

by _____.”

(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 08/13/2010

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOSE G. PEREZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)