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CLERK OF THE BOARD
OF COUNTY COMMISSIONERS
MIAMI-DADE COUNTY, FLORIDA

MEMORANDUM

Agenda Item No. 11(A)(11)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: November 4, 2010

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution authorizing in-kind services for the December 5, 2010 "Holiday Concert and Celebration"

Resolution No. R-1110-10

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Sally A. Heyman.

R. A. Cuevas, Jr.
County Attorney

RAC/up

MEMORANDUM
(Revised)

TO: Honorable Chairman Dennis C. Moss and Members, Board of County Commissioners

DATE: November 4, 2010

FROM: R. A. Cuevas, Jr. County Attorney

SUBJECT: Agenda Item No. 11(A)(11)

Please note any items checked.

_____ **"3-Day Rule" for committees applicable if raised**

_____ **6 weeks required between first reading and public hearing**

_____ **4 weeks notification to municipal officials required prior to public hearing**

_____ **Decreases revenues or increases expenditures without balancing budget**

_____ **Budget required**

_____ **Statement of fiscal impact required**

_____ **Ordinance creating a new board requires detailed County Manager's report for public hearing**

_____ **No committee review**

_____ **Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous _____) to approve**

✓ **Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required**

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(11)
11-4-10

RESOLUTION NO. R-1110-10

RESOLUTION AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE DECEMBER 5, 2010 "HOLIDAY CONCERT AND CELEBRATION" SPONSORED BY CHABAD-LUBAVITCH RUSSIAN CENTER OF SOUTH FLORIDA, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $790.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 4 FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, Chabad-Lubavitch Russian Center of South Florida, Inc., has requested in-kind services from the Miami-Dade Park and Recreation Department for the December 5, 2010 "Holiday Concert and Celebration" in an amount not to exceed $790.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Holiday Concert and Celebration" is a free event which features music, rides, food and children's programs; and

WHEREAS, Chabad-Lubavitch Russian Center of South Florida, Inc. is a not-for-profit organization; and

WHEREAS, the "Holiday Concert and Celebration" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and $790.00 of the in-kind services shall be funded from the unspent balance of the District 4 FY 2008-09 In-kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes in-kind services from the Miami-Dade Park and Recreation Department for the December 5, 2010

"Holiday Concert and Celebration" in an amount not to exceed $790.00 to be funded from the unspent balance of the District 4 FY 2008-09 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman. It was offered by Commissioner **Joe A. Martinez**, who moved its adoption. The motion was seconded by Commissioner **Dennis C. Moss** and upon being put to a vote, the vote was as follows:

Dennis C. Moss, Chairman **aye**
Jose "Pepe" Diaz, Vice-Chairman **aye**

Bruno A. Barreiro	**aye**	Audrey M. Edmonson	**aye**
Carlos A. Gimenez	**aye**	Sally A. Heyman	**aye**
Barbara J. Jordan	**aye**	Joe A. Martinez	**aye**
Dorrin D. Rolle	**absent**	Natacha Seijas	**aye**
Katy Sorenson	**aye**	Rebeca Sosa	**aye**
Sen. Javier D. Souto	**aye**		

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of November, 2010. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: **DIANE COLLINS**
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency. GKS

Gerald K. Sanchez

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MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
FY 2008-09

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-5143
Fax: (305) 375-5168

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☐ Special Event* - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event* - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

Note: Event budget must be included for "Special" and "Major" event types.

Commissioner sponsoring event Sally Heyman

1. Full legal name of the requesting organization: Chabad Lubavitch Russian Ctr

2. Applicant Status: (Select one of the choices below)
   - ☑ Not-For-Profit or Tax Exempt
   - ☐ For-Profit
   - ☐ Local Government or Public Entity
   - ☐ Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): 151 Sunny Isles Blvd, Sunny Isles Beach, FL, 33160, 305-803-5315 o. f. 305-956-2277, KAYLUS@AOL.com

4. Specify fee waiver or in-kind service requested (quantity, if applicable): in kind large stage 26 x 40

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):
Holiday Concert & Festival, Annual Gathering at Samson Park, co-sponsored by the City of SIB.; Music, Rides, Food, Children's Program.

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☑ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☐ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☑ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)):
17425 Collins Ave, Samson Park, Sunny Isles Beach, FL, 33160

8. Description of regional or local impact:

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): _____

11. Expected number of participants and estimated attendance (per day, if applicable): _____

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): _____

I hereby certify that all the statements made in this application are true and correct.

Signature of Authorized Representative

7/13/10
Date

MIAMI-DADE PARKS

SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION

(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Chabad Russian Ctr of S. Florida

EQUIPMENT REQUESTED: large stage 26 x 40

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Heyman

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): CCCENT010496

BILLING ADDRESS/ZIP CODE: 33128

NAME/TITLE OF THE EVENT: Holiday Concert + celebration

ADDRESS OF EVENT: 17425 Collins Ave, Sunny Isles Beach, FL 33160

TODAY'S DATE: 7/13/10

DATE (S) & TIME OF EVENT: 12/5/10 4 PM

SET-UP TIME & DAY: 12/5/10 3 PM

TAKE-DOWN TIME & DAY: 12/5/10 10 PM

CONTACT PERSON/PHONE: Rabbi Kaller 305-803-5315

AT SITE CONTACT/CELL PHONE#: SAME

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. **We also understand that the total fee is to be remitted (15) fifteen working days before the event.**

*Fee: _____ Signature: _____

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Agency/Group: Chabad RC.

CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED ½ (HALF) OF RENTAL FEE. *There will be no completed reservation on the schedule unless the confirmation Form is filled out completely and signed.

Late equipment arrivals, please call (786) 235-7926

Mankes, Margot (DIST4)

From: Byrnes, Timothy (MDPR)
Sent: Tuesday, July 13, 2010 3:26 PM
To: Mankes, Margot (DIST4)
Cc: Gonzalez, Ana (MDPR); Parrado, George (MDPR)
Subject: RE: Large Stage Request

Margot,
The cost would be $790.00 for the day. I put it on hold for you
Tim

Tim Byrnes, Tropical Park/Trail Glades Range/Showmobile Service Area Manager
Miami-Dade County Park and Recreation Department
Tropical Park 7900 SW 40th Street, Miami, FL 33155
305-226-8315 Phone, 305-553-8511 Fax
www.miamidade.gov/parks
"Delivering Excellence Every Day"

From: Mankes, Margot (DIST4)
Sent: Tuesday, July 13, 2010 1:20 PM
To: Byrnes, Timothy (MDPR)
Cc: Seymour, Kesha (MDPR)
Subject: Large Stage Request

Good afternoon Tim and Kesha,

Could you please send me a cost estimate for the large stage 26 x 40 for Sunday, December 5th for approximately 4-10pm.

Thank you,

Margot Mankes, Aide
Office of Commissioner Sally Heyman
111 NW 1st Street, Suite 220
Miami, FL 33128
(305) 375-5128
(305) 372-6179 fax
mmankes@miamidade.gov

"Delivering Excellence Every Day"

Detail by Entity Name

Florida Non Profit Corporation

CHABAD-LUBAVITCH RUSSIAN CENTER OF SOUTH FLORIDA, INC.

Filing Information

Document Number	N03000001084
FEI/EIN Number	043758388
Date Filed	02/07/2003
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	10/27/2006
Event Effective Date	NONE

Principal Address

403 POINCIANA DRIVE
SUNNY ISLES BEACH FL 33160

Changed 04/02/2008

Mailing Address

403 POINCIANA DRIVE
SUNNY ISLES BEACH FL 33160

Changed 04/02/2008

Registered Agent Name & Address

ROTH, AVROHOM N
1110 NE 170TH STREET
N.MIAMI BEACH FL 33162 US

Name Changed: 04/02/2008

Address Changed: 04/02/2008

Officer/Director Detail

Name & Address

Title P

KALLER, ALEXANDER
403 POINCIANA DRIVE
SUNNY ISLES FL 33160

Title V

KALLER, CHANA
403 POINCIANA DRIVE

SUNNY ISLES FL 33160

Title ST

ALTEIN, YAKOV LEIB
1378 UNION ST
BROOKLYN NY 11213

Title D

AISEMAN, DOLLY DR
503 12TH ST APT 5
MIAMI BEACH FL 33139

Title D

KEIFITZ, MIKHAIL
17500 N BAY RD
SUNNY ISLES BEACH FL

Annual Reports

Report Year	Filed Date
2008	04/02/2008
2009	01/27/2009
2010	05/04/2010

Document Images

05/04/2010 -- ANNUAL REPORT	View image in PDF format
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02/20/2004 -- Amendment	View image in PDF format
10/06/2003 -- Amendment	View image in PDF format
02/07/2003 -- Domestic Non-Profit	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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Memorandum

MIAMI-DADE COUNTY

Date: November 4, 2010

To: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

From: George M. Burgess
County Manager

Subject: District Specific In-Kind Reserve Request Recommendation

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Recommendation

The Office of Strategic Business Management (OSBM) reviewed the attached in-kind request and recommends this item move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for funding of this request.

Background

A waiver for in-kind services has been requested by a not-for-profit organization, Chabad-Lubavitch Russian Center of South Florida, Inc., for their "Holiday Concert and Celebration" event scheduled for December 5, 2010.

In-kind services have been requested in an amount not to exceed $790.00 from the Miami-Dade Park and Recreation Department for the use of a 26' X 40' stage. This event will be funded from the unspent balance of the District 4 FY 2008-09 in-kind reserve fund.

In FY 2009-10, Chabad-Lubavitch Russian Center of South Florida, Inc. received no funding for this event.

Inkind06110