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

MEMORANDUM Agenda Item No. 11(A)(29)

TO: Honorable Chairman Joe A. Martinez and Members, Board of County Commissioners

DATE: July 3, 2012

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

SUBJECT: Resolution retroactively authorizing in-kind services for the May 26, 2012 "Memorial Day" event

Resolution No. R-608-12

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsors Chairman Joe A. Martinez.

R. A. Cuevas, Jr.
County Attorney

RAC/cp

MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: July 3, 2012

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

SUBJECT: Agenda Item No. 11(A)(29)

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)(29)
7-3-12

RESOLUTION NO. R-608-12

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT AND THE POLICE DEPARTMENT FOR THE MAY 26, 2012 "MEMORIAL DAY" EVENT SPONSORED BY THE WINGS OVER MIAMI MUSEUM, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $1,120.20 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 11 FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, Wings Over Miami Museum, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department and the Police Department for the May 26, 2012 "Memorial Day" event in an amount not to exceed $1,120.20 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Memorial Day" event is open to the public and honors those brave Americans who have given their lives while serving in the United States Armed Forces; and

WHEREAS, Wings Over Miami Museum, Inc. is a not-for-profit organization; and

WHEREAS, the "Memorial Day" event is a district event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and $1,120.20 of the in-kind services shall be funded from the unspent balance of the District 11 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 retroactively authorizes in-kind services from the Parks, Recreation and Open Spaces Department and the Police Department for the May 26, 2012 "Memorial Day" event sponsored by Wings over Miami Museum, Inc., in an amount not to exceed $1,120.20 to be funded from the unspent balance of the District 11 FY 2008-09 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Chairman Joe A. Martinez. It was offered by Commissioner **José "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Audrey Edmonson** and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman			**aye**
Audrey M. Edmonson, Vice Chairwoman			**aye**
Bruno A. Barreiro	**aye**	Lynda Bell	**aye**
Esteban L. Bovo, Jr.	**aye**	Jose "Pepe" Diaz	**aye**
Sally A. Heyman	**aye**	Barbara J. Jordan	**aye**
Jean Monestime	**aye**	Dennis C. Moss	**aye**
Rebeca Sosa	**aye**	Sen. Javier D. Souto	**absent**
Xavier L. Suarez	**aye**		

The Chairperson thereupon declared the resolution duly passed and adopted this 3rd day of July, 2012. 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: ***Christopher Agrippa***
Deputy Clerk

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

Gerald K. Sanchez

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

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:

Delores Green
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.

1. Full legal name of the requesting organization: Wings Over Miami Museum, INC

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.): Suzette Rice
   305 323-9995 suze@bellsouth.net

4. Specify fee waiver or in-kind service requested (quantify, if applicable): _____

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): May 26
   Music Event - celebrating Memorial Day for the veterans - Community Events

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 Veterans
   - ☒ 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

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

7. Physical address of event venues (please specify Commission District(s)): Kendall-Tamiami Exec Airport
14710 SW 128 ST
Chairman Martinez District

8. Description of regional or local impact: _____

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

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.

Suzette Rice
Signature of Authorized Representative

May 12, 2012
Date

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 01, 2012
Secretary of State

DOCUMENT# N01000008700

Entity Name: WINGS OVER MIAMI MUSEUM, INC.

Current Principal Place of Business:

14710 SW 128TH ST
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

14710 SW 128TH STREET
MIAMI, FL 33196

New Mailing Address:

FEI Number: 01-0624232 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLOUCHA, L.M.
100 S.E. THIRD AVENUE SUITE 1400
FORT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ Date
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: DT
Name: WALKER, WILLIAM H
Address: 14250 W. 105 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: DVP
Name: SCHLAFLY, FRED E
Address: 13250 SW 97TH AVENUE
City-St-Zip: MIAMI, FL 33186

Title: D
Name: RIVENBARK, WILLIAM G
Address: 3616 HARLANO STREET
City-St-Zip: CORAL GABLES, FL 33314

Title: DS
Name: PLOUCHA, L.M.
Address: 1151 N FT LAUDERDALE BEACH BLVD 5B
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D
Name: BATTLE, TIMOTHY
Address: 10061 SW 57 COURT
City-St-Zip: PINECREST, FL 33156

Title: DP
Name: RICE, SUZETTE
Address: 7860 SW 181 TERRACE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: L.M. PLOUCHA SEC 03/01/2012
Electronic Signature of Signing Officer or Director Date

Memorandum

MIAMI-DADE COUNTY

Date: July 3, 2012

To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by Wings Over Miami Museum, Inc., for their "Memorial Day" event held on May 26, 2012.

In-kind services have been requested in an amount not to exceed $790 from the Parks, Recreation and Open Spaces Department for the use of a 24 x 40 stage; and $330.20 from the Police Department for Police Services. This event will be funded from the unspent balance of the District 11 FY 2008-09 In-Kind Reserve Fund.

Edward Marquez
Deputy Mayor

Inkind012030