



City of Coral Gables
Request to Address City Commission

Order of receipt: _____

PLEASE PRINT

Date: 11-9-21 Time: 12:23

Agenda/Item Number: 2-7

Issue: Mobility Hub

Name: Gordon Sokolski

Mailing address: 225 Alcio Ave.

City: Coral Gables State/Zip: Fl. 33134

Phone: 305 487 7840 E-mail: gordon5360@gmail.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature [Signature]

Pursuant to Article I, Section 24 of the Florida Constitution, this document, and information contained therein, is a public record.



City of Coral Gables
Request to Address City Commission

Order of receipt: _____

PLEASE PRINT

Date: 11/9/21 Time: 12:15

Agenda/Item Number: F7

Issue: Mobility Hub

Name: TOM O'MALLEY

Mailing address: 676 SEEDING DR

City: CS State/Zip: FL

Phone: 3/987-3133 E-mail: TOMALLEY2020@gmail.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature T. O'Malley

Pursuant to Article I, Section 24 of the Florida Constitution, this document, and information contained therein, is a public record.



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 1-9 PLEASE PRINT Time: 12:30

Agenda/Item Number: F-7

Issue: ANNUAL MOBILITY

Name: JR FOLWIS

Mailing address: 35 SW 11th St

City: CR State/zip: 33134

Phone: 538 5220 E-mail: _____

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- I wish to speak Proponent
- I do not wish to speak Opponent
- I have been requested to speak To provide information

Comments regarding this issue:

 Signature _____

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 11/9/21 PLEASE PRINT Time: 12:30

Agenda/Item Number: F-7

Issue: Mobility Hub

Name: AKA Parkview Garage

Mailing address: 1447 NW 11th St

City: Coral Gables State/zip: FL 33146

Phone: 305-323-2154 E-mail: phobeahenry@fcl.com

Are you a registered lobbyist with the City of Coral Gables?
 Yes No

Representing: _____

- I wish to speak Proponent
- I do not wish to speak Opponent
- I have been requested to speak To provide information

Comments regarding this issue:

 Signature _____

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 11/9/2021 **PLEASE PRINT** **Time:** _____

Agenda/Item Number: Parking Garage

Issue: Size

Name: Howard Wynne

Mailing address: 275 Giralda Ave

City: Coral Gables **State/Zip:** FL

Phone: +1305 989 3281 **E-mail:** howard.wynne@nycor.com

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Size, what data is driving the size?

Signature: [Handwritten Signature]

Pursuant to Article I, Section 24 of the Florida Constitution, this document, and information contained therein, is a public record.