

City of Coral Gables Request to Address City Commission

Date: 6:28-22 PLEASE PR	Time: 8'50A4
Agenda/Item Number: 4-7	
Issue: UPSAE + Discussion	ow Bichare Way
Name: PEDAO N. MORI	NE ZIREESO
Mailing address: 600 Licrupke	Way #202
City: CORAL GARLES Sto	nte/Zip:
Phone: 305/898-13(3 E-	mail: Physicales 88 Cont
Are you a registered lobbyist with the Cit	or of Coral Gables?
Representing:	
I wish to speak	Proponent
1 do not wish to speak	Opponent
☐ I have been requested to speak	To provide information
Comments regarding this issue:	
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Signature	

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



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