

Miracle Theater Stucco and Sealant Repairs

IFB No. 2014.03.03

The Sundown Group, Inc

2520 coral way #2091

Miami, Fl 33145

Contact:

Fabio Cardenas

President

786-264-1099

4/9/2014

SECTION 1

Invitation for Bids (IFB) No. 2014.03.13

1.0: INTRODUCTION TO INVITATION FOR BIDS

1.1. Invitation

Thank you for your interest in this Invitation for Bids ("IFB"). The City of Coral Gables (the "City"), through its Procurement Division invites responses ("Responses") which offer to provide the services described in Section 2.0 "Scope of Work".

1.2. Contract Terms and Conditions

The Bidder(s) selected to provide the service(s) requested herein (the "Successful Bidder(s)") shall be required to execute a Contract or a Professional Services Agreement ("Agreement") with the City in substantially the same form as the Agreement included as part of this IFB, if applicable.

The work will be substantially completed within 120 calendar days from the commencement date stated in the Notice to Proceed and final completion 30 calendar days from substantial completion.

Throughout this IFB, the phrases "must" and "shall" will denote mandatory requirements. Any response that does not meet the mandatory requirements is subject to immediate disqualification.

1.3. Submission of Responses

To receive consideration, bids must be submitted on Bid Response Forms as provided by the City. This Invitation for Bids must be resubmitted with all forms executed, each section signed as read and understood, and the response form completely filled out. Bids must be typed or printed in ink. Use of erasable ink is not permitted. Any additional information to be submitted as part of the Invitation for Bids may be attached behind the Bid Response Forms. Upon request, copies may be obtained from the Procurement Division, 2800 S.W. 72nd Avenue, Miami, FL 33155. The Bid shall be signed by a representative who is authorized to contractually bind the Bidder. Bids by corporations must be executed in the corporate name by the President or other corporate officer accompanied by evidence of authority to sign. The corporate address and state of incorporation must be shown below the signature. Bids by partnerships must be executed in the partnership name and signed by a partner, whose title must appear under the signature and the official address of the partnership must be shown below the signature.

The **original Bid, two (2) copies and one (1) digital copy** (*in PDF format*) must be submitted to the Procurement Division, 2800 S.W. 72nd Avenue, Miami, FL 33155 at or prior to the time noted on the solicitation opening date. **Attachment A** - Procurement Forms (*only 1 original required*), **Attachment B** - Construction Forms, **Attachment C** - Sample Contract for reference purposes only. Bids received after that time will not be accepted. It will be the sole responsibility of the Bidder to deliver their bids to the Procurement Office on or before the closing hour and date indicated.

Bids shall be submitted in a sealed envelope clearly marked on the exterior as follows:

IFB No. 2014.03.13

Miracle Theater Stucco and Sealant Repairs

Bidder Name and Address:

The Sundown Group, Inc.

2520 SW 22 Street #2091

Miami, FL 33145

7862641099

Submittal Deadline:

Thursday, April 10, 2014 at 2:00 pm

Addressed to:

City of Coral Gables

Procurement Division

2800 S.W. 72ND Avenue

Miami, FL 33155

SECTION 5

Invitation for Bids (IFB) No. 2014.03.13

5.0: BID RESPONSE FORMS

SUBMITTED TO:

City of Coral Gables
Procurement Division
2800 SW 72 Avenue
Miami, Florida 33155

1. The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter in a Contract with the CITY to perform and furnish all work as specified or indicated in the Bid and Contract Documents for the Contract price and within the Contract time indicated in the Bid and in accordance with the Other terms and conditions of the bid and Contract Documents.
2. Bidder accepts and hereby incorporates by reference in this Bid Response Form all of the terms and conditions of the Invitation for Bid.
3. Bidder proposes to furnish all labor, services and supervision for the work described in this Invitation for Bid.
4. **Acknowledgement is hereby made of the following Addenda, if any (identified by number) received since issuance of the Invitation for Bid.**

Addendum No. <u>1</u>	Date <u>4-9-14</u>
Addendum No. <u>2</u>	Date <u>4-9-14</u>
Addendum No. <u>3</u>	Date <u>4-9-14</u>
Addendum No. <u>4</u>	Date <u>4-9-14</u>

5. Bidder accepts the provisions of the Contract as to penalties in the event of failure to provide services as indicated.
6. Bidders correct legal name: The Sundown Group, Inc.
Address: 2520 SW 22 Street #2091
City/State/Zip: Miami, FL 33145
Telephone No./Fax No.: (786) 264-1099 / (888) 503-0577
E-mail: fabiocardenas@thesundowngroup.com

Signature


(Print Name and Sign)

Title: President

SECTION 6

Invitation for Bids (IFB) No 2014.03.13

6.0: SCHEDULE OF VALUES

Bidder should carefully follow the instructions outlined below, particularly with respect to the format and number of pages allotted to each topic, if applicable. Failure to follow these instructions may be considered grounds for excluding a bid from further consideration.

Bidder shall submit a Bid expressing its interest in providing the services described herein. Bids must be typed or printed in blue ink. Use of erasable ink is not permitted. All corrections to prices made by the Bidder must be initialed. Any additional information to be submitted as part of the Bid may be attached to this form.

BIDDERS NAME: The Sundown Group, Inc.

CONTACT NAME / TITLE: Fabio Cardenas / President

SIGNATURE:  DATE: 4-9-14

ADDRESS: 2520 SW 22 Street #2091, Miami, FL 33145

TELEPHONE (786) 264-1099 FACSIMILE (888) 503-0577 EMAIL: fabiocardenas@thesundowngroup.com

BIDDER: The Sundown Group, Inc.

The Bidder shall provide the following preliminary Schedule of Values for administrative purposes. This information is required with the submission of bid and when approved by the Architect/Engineer, will be used to evaluate Applications for Payment of the successful bidder.

The Bidder may add line items as desired, but must provide those items indicated as a minimum. The total amount shall equal the Total Bid Price.

Item No.	Description	Estimated Quantity	U/M	Unit Price	Estimated Total
1	Contractor staging / access / assessment / report	1	ls	\$ 19,000.00	\$ 19,000.00
2	Remove existing sealant and reseal windows, doors, all penetrations, etc.	1,300	lf	\$ 1.10	\$ 1,430.00
3	Pressure cleaning of all walls in base scope	19,000	sf	\$ 0.30	\$ 5,700.00
4	Sounding and removal of delaminating stucco (assume 30% of total area)	5,700	sf	\$ 1.10	\$ 6,270.00
5	Patching of stucco in areas where removed due to delamination	5,700	sf	\$ 3.20	\$ 18,240.00
6	Repair of fissure and hairline cracks (assume 250lf)	250	lf	\$ 6.00	\$ 1,500.00
7	Repair of small wall cracks up to 1/4" (assume 300lf)	300	lf	\$ 6.00	\$ 1,800.00
8	Cutting and cleaning and repairing of linear stucco/wall cracks above 1/4" (assume 200 lf)	200	lf	\$ 8.00	\$ 1,600.00
9	Painting of walls, doors, louvers etc.	19,000	sf	\$ 0.80	\$ 15,200.00
10	Replace existing wall louvers (NOA etc.)	50	sf	\$ 165.00	\$ 8,250.00
	BASE BID				\$ 78,990.00
	HISTORICAL ART FUND (1% OF BASE BID)				\$ 790.00
	OWNER'S CONTINGENCY ALLOWANCE				\$ 20,000.00
	TOTAL BID				\$ 99,780.00

WRITTEN TOTAL BID:

Ninety nine thousand seven hundred eighty

Dollars

and zero Cents

NOTE: The prices stated in the Bid shall include full compensation for mobilization, maintenance of traffic, overhead and profit, taxes, labor, equipment, materials, home office expenses, insurance, bond and any and all other costs and expenses for performing and completing the work as shown on the plans and specifications.

BID BOND

BOND#3222758

STATE OF FLORIDA }
COUNTY OF MIAMI DADE }
CITY OF CORAL GABLES }

KNOWN ALL MEN BY THESE PRESENTS, That we **
as Principal, and BANKERS INSURANCE COMPANY, as Surety, are
held and firmly bonded unto the City of Coral Gables as Owner in the penal sum of
Dollars (\$ 5% Amt Bid), lawful money of the United States, for the payment of which sum well and
truly to be made, we bind ourselves, our heirs, executors, administrators, and successors, jointly and
severally, firmly by these presents.

** THE SUNDOWN GROUP INC

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal has submitted
to the City of Coral Gables the accompanying Bid, signed
By: Fabio Cardenas, President, and dated April 9,, 20 14, for

**MIRACLE THEATER STUCCO AND SEALANT REPAIRS
IFB 2014.03.13
CORAL GABLES, FLORIDA**

in accordance with the Plans and Specifications therefore, the call for Bids or Proposals, and the
Instructions to Bidders, all of which are made a part hereof by reference as if fully set forth herein.

NOW, THEREFORE,

- (a) If the Principal shall not withdraw said bid within thirty (30) days after date of opening
of the same, and shall within ten (10) days after written notice being given by the City
Manager or his designee, of the award of the contract, enter into a written contract with
the City, in accordance with the bid as accepted, and give bond with good and sufficient
surety or sureties, as may be required for the faithful performance and proper fulfillment
of such contract,
- (b) in the event of the withdrawal of said bid or proposal within the period specified, or
the failure to enter into such contract and give such bond within the time specified, if
the Principal shall pay the City the difference between the amount specified in said bid
or proposal and the amount for which the City may procure the required work and/or
supplies, if the latter amount be in excess of the former, the above obligation shall be
void and of no effect, otherwise to remain in full force and effect.

BID BOND

IN WITNESS WHEREOF, the above bounded parties have executed this instrument under their several seals this
9th day of APRIL, A.D., 20 14, the name and corporate
seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to
authority of its governing body.

WITNESS

(If Sole Ownership or Partnership,
Two (2) Witnesses Required.
If Corporation, Secretary Only
will attest and affix seal):

(1) 

(2) _____

PRINCIPAL

THE SUNDOWN GROUP INC

Name of Firm

 (SEAL)
Signature of Authorized Officer

FABIO CARDENAS, PRESIDENT

Title

2520 SW 22 STREET

Business Address

MIAMI, FLORIDA 33145

City,

State

SURETY:

BANKERS INSURANCE COMPANY

Corporate Surety

 (SEAL)
Attorney-In-Fact GLADYS KEITH

11101 ROOSEVELT BLVD N

Business Address

ST. PETERSBURG, FLORIDA 33176

City,

State

FSB AGENCY INC

Name of Local Agency

WITNESS:

(1) 

(2) _____

Power of Attorney

3222758

Bankers Insurance Company

KNOW ALL MEN BY THESE PRESENTS, that **BANKERS INSURANCE COMPANY**, a corporation duly organized under the laws of the State of Florida, and having its principal office in the City of St. Petersburg, Pinellas County, Florida, does hereby nominate, constitute and appoint:

Gladys Keith

of the City of Pembroke Pines, Broward County, State of Florida, its true and lawful Attorney-in-fact, with full power and authority hereby conferred upon him/her to make, execute, seal and deliver for and on its behalf, as Surety, as its act and deed, any and all bonds, undertakings consent or Agreement not exceeding the sum of Three Million and xx/100 Dollars----- \$3,000,000.00 which this Company may be authorized to write.

This Power of Attorney is granted and is signed and sealed under and by the authority of the following resolutions adopted by the Board of Directors of Bankers Insurance Company, and now in force to-wit:

BE IT RESOLVED, that the Chairman of the Board, President and any Vice President of the Corporation are hereby authorized to execute Powers of Attorney, qualifying the Attorney(s)-in-Fact named in the Powers of Attorney to execute, on behalf of the Corporation, bonds, undertakings and contracts of suretyship; and that the Secretary or any Assistant Secretary of the Corporation are hereby authorized to attest the execution of any such Power of Attorney.

BE IT FURTHER RESOLVED, that the signatures of such officers may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, any and such Power of Attorney or certificate bearing such facsimile signatures shall be valid and binding upon the corporation when so affixed in the future with respect to any bond, undertaking or contract of suretyship to which it is attached.

IN WITNESS WHEREOF, Bankers Insurance Company has caused these presents to be executed by their duly authorized officers as of this 4th day of April, 2013.

ATTEST:

Ian Barber
Ian Barber, Assistant Secretary

BANKERS INSURANCE COMPANY

By: Wilbur L. Martin IV
Wilbur L. Martin IV, President

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me 4th day of April, 2013 by Wilbur L. Martin IV and Ian Barber, as President and Assistant Secretary, respectively, of Bankers Insurance Company, a Florida corporation, on behalf of the corporation.

Personally known ☒ OR Produced Identification - Type of Identification Provided _____



Janet M. Bell
(NOTARY PUBLIC)

I, the undersigned, Assistant Secretary of Bankers Insurance Company do hereby certify that the original Power of Attorney, of which the foregoing is a full, true and correct copy, is in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affix the corporate seal of the Corporation this 9th day of April, 2014

(SEAL)

Ian Barber
Ian Barber, Assistant Secretary

CITY OF CORAL GABLES, FL

2800 SW 72nd Avenue, Miami, FL 33155
Finance Department / Procurement Division
Tel: 305-460-5102/ Fax: 305-261-1601

BIDDER ACKNOWLEDGEMENT

IFB Title: MIRACLE THEATER STUCCO AND SEALANT REPAIRS	Bids must be received prior to 2:00 p.m., Thursday, April 10, 2014 , and may not be withdrawn for a period of up to 90 calendar days after bid opening. Bids received by the date and time specified will be opened in the Procurement Office located at 2800 SW 72 nd Avenue, Miami, FL 33155. All Bids received after the specified date and time will be returned unopened.
IFB No. 2014.03.13 A cone of silence is in effect with respect to this IFB. The Cone of Silence prohibits certain communication between potential vendors and the City. For further information, please refer to the City Code Section 2-1059 of the City of Coral Gables Procurement Code.	Contact: Pamela J. Leja-Katsaris Title: Assistant Chief Procurement Officer Telephone: 305-460-5102 Facsimile: 305-261-1601 Email: contracts@coralgables.com

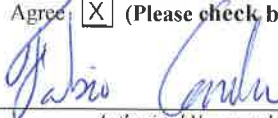

THIS FORM MUST BE COMPLETED AND SUBMITTED ALONG WITH THE COMPLETE BID PRIOR TO THE DATE AND THE TIME OF BID OPENING.

Bidder Name: The Sundown Group, Inc.	FEIN or SS Number: 271695280
Complete Mailing Address: 2520 SW 22 Street #2091 Miami, FL 33145	Telephone No. (786) 264-1099 Cellular No. (786) 356-4340
Indicate type of organization below: Corporation: <input checked="" type="checkbox"/> Partnership: <input type="checkbox"/> Individual: <input type="checkbox"/> Other: <input type="checkbox"/>	Fax No.: (888) 503-0577
Bid Bond/ Security Bond (if applicable) <i>Banque insurance company</i>	Email: fabiocardenas@thesundowngroup.com

ATTENTION: FAILURE TO SIGN (PREFERABLY IN BLUE INK) OR COMPLETE ALL IFB SUBMITTAL FORMS, INSURANCE, ADDENDUM(S) ACKNOWLEDGEMENT AND ALL PAGES OF THE IFB DOCUMENT MAY RENDER YOUR IFB NON-RESPONSIVE.

THE BIDDER CERTIFIES THAT THIS BID IS BASED UPON ALL CONDITIONS AS LISTED IN THE BID DOCUMENTS AND THAT THE BIDDER HAS MADE NO CHANGES IN THE BID DOCUMENT AS RECEIVED. THE BIDDER FURTHER AGREES, IF THE BID IS ACCEPTED, THE BIDDER WILL EXECUTE AN APPROPRIATE AGREEMENT FOR THE PURPOSE OF ESTABLISHING A FORMAL CONTRACTUAL RELATIONSHIP BETWEEN THE BIDDER AND THE CITY OF CORAL GABLES, FOR THE PERFORMANCE OF ALL REQUIREMENTS TO WHICH THIS BID PERTAINS. FURTHER, BY CHECKING THE AGREE BOX LISTED BELOW AND BY SIGNING BELOW **PREFERABLY IN BLUE INK** ALL IFB PAGES ARE ACKNOWLEDGED AND ACCEPTED, AS WELL AS, ANY SPECIAL INSTRUCTION SHEET(S), IF APPLICABLE. I AM AUTHORIZED TO BIND PERFORMANCE OF THIS IFB FOR THE ABOVE BIDDER.

Agree: ☒ (Please check box to acknowledge this solicitation)

 Authorized Name and Signature	 Title	4-9-14 Date
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CITY OF CORAL GABLES

BIDDER STATEMENT

This questionnaire is to be submitted to the City of Coral Gables Procurement Division by the Bidder, along with the solicitation being submitted for the goods, services and/or construction required by the City of Coral Gables. Do not leave any questions unanswered. When the question does not apply, write the word(s) "None" or "Not Applicable", as appropriate. Failure to complete this form as applicable may be deemed non-responsive.

Company Name: The Sundown Group, Inc.

Contact Name: Fabio Cardenas Title President

Address: 2520 SW 22 Street #2091, Miami, FL 33145

Telephone (786) 264-1099 Cellular (786) 356-4340 Facsimile (888) 305-0577

Email: fabiocardenas@thesundowngroup.com

Federal Employer Identification Number (FEIN No.): 271695280

Check One: Corporation ☒ Partnership ☐ Sole Proprietary ☐ LLC / LLP ☐ Other ☐

List all current licenses held and provide copies

(a) State of Florida C6C058429

(b) Miami Dade County

(c) City of Coral Gables Municipal License

(d) Others

1. State the true, exact, correct and complete name of the partnership, corporation, and trade or fictitious name in which business is transacted and the address of the place of business.

Bidder Name: The Sundown Group, Inc.

The address of the principal place of business is: 2520 SW 22 Street #2091, Miami, FL 33145

2. How many years has organization been in business under present business name? 4

a. Under what other former names has organization operated? N/A

3. Are any of the principals of this company employed by the City of Coral Gables? If so, disclose their name(s) below:

No

4. Indicate registration, license numbers or certificate numbers for the business or professions which are the subject of this IFB. Please attach certificate of competency and/or state registration.

Certified General Contractor C6C058429

5. Have you ever failed to complete any work awarded to you or been held in default of a contract? (Y) _____ (N) X if yes, state when, where and why? (Please provide the name and contact information of the entity which was involved).

6. Have you, or a predecessor company or organization, filed bankruptcy in the last three (3) Years? (Y) _____ (N) X if yes, information must be provided pertaining to the proceeding and outcome of the action.

7. State whether you or any officers of your company have been involved in any claims or litigation in the last five (5) years in any way relating to the business being procured in this IFB. Provide details as to the cause and outcome (judgments and settlements) of those claims or litigation, whether it is the present company, a predecessor or related company.

No

8. Has your insurance coverage ever been cancelled for non-payment of insurance premiums or any other reason? (Y) _____ (N) X If yes, what was the reason? _____

9. Have you personally inspected the site of the proposed work? (Y) X (N) _____

10. **References:** List references that may be contacted to ascertain experience and ability of Bidder. Provide a minimum of three (3) references (*Government entities preferred*):

<u>Ormae Investments</u>	<u>Carlos Imery</u>	<u>561-212-8331</u>	<u>cimery@liquidecapitalcorp.com</u>
(Name)	(Contact)	(Phone Number)	(Email)
<u>Safeguard Properties</u>	<u>Jeff Horah</u>	<u>8008528306x3080</u>	<u>jeff.horah@safeguardproperties.com</u>
(Name)	(Contact)	(Phone Number)	(Email)
<u>Calibard Construction</u>	<u>Kirk Torrey</u>	<u>3052663923</u>	<u>k.torrey1020@gmail.com</u>
(Name)	(Contact)	(Phone number)	(Email)

Provide any additional information as to qualifications and/or experience, attach documentation to this form.



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

JENKINS, CEDRIC ORLANDO
THE SUNDOWN GROUP, INC
4294 FOXTAIL LANE
WESTON FL 33331

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CGC058429

ISSUED: 02/19/2014

CERTIFIED GENERAL CONTRACTOR
JENKINS, CEDRIC ORLANDO
THE SUNDOWN GROUP, INC

IS CERTIFIED under the provisions of Ch.489 FS.
Expiration date : AUG 31, 2014 L1402190001626



The Department of State is leading the commemoration of Florida's 500th anniversary in 2013. For more information, please go to www.VivaFlorida.org.

DETACH HERE

RICK SCOTT, GOVERNOR

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

KEN LAWSON, SECRETARY

LICENSE NUMBER

CGC058429

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2014



JENKINS, CEDRIC ORLANDO
THE SUNDOWN GROUP, INC
2520 SW 22 STREET #2091
MIAMI FL 33145



ISSUED: 02/19/2014 SEQ # L1402190001626
DISPLAY AS REQUIRED BY LAW

VALIDATION:

The undersigned certifies the information provided in this questionnaire is correct and accurate.

IF PARTNERSHIP:

Signature

Print Name of Firm

Print Name

Address

Title

IF CORPORATION:


Signature

The Sundown Group, Inc.

Print Name of Corporation

Fabio Cardenas
Print Name

2520 Sw 22 Street #2091, Miami, FL 33145
Address

President
Title

WITNESS:


Signature

Cristina Zeinali
Print Name

Witness
Title

Attest: _____

 (CORPORATE SEAL)

Secretary

**SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a),
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

**THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR
OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.**

1. This sworn statement is submitted to City of Coral Gables
[print name of the public entity]
by Fabio Cardenas / President
[print individual's name and title]
for The Sundown Group, Inc.
[print name of entity submitting sworn statement]

Whose business address is: 2520 SW 22 Street #2091, Miami, FL 33145

and (if applicable) its Federal Employer Identification Number (FEIN) 271695280

If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:
_____.)

2. I understand that a "public entity crime" as define in Paragraph 287.133(1)(g), **Florida Statutes**, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any Proposal or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), **Florida Statutes**, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), **Florida Statutes**, means:
1. A predecessor or successor of a person convicted of a public entity crime; or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
5. I understand that a "person" as defined in Paragraph 287.133(1)(e), **Florida Statutes**, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which Proposals or applies to Proposal on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

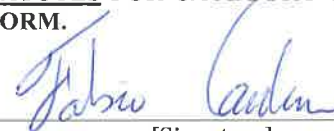
6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **[indicate which statement applies.]**

X Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list.
[attach a copy of the final order]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.



[Signature]

STATE OF FLORIDA

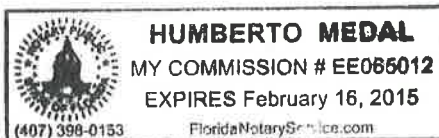
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me
this 10 day of APRIL, 2014,
by FABIO CARDENAS who is personally
known to me or has produced identification.
Type of I.D. FLORIDERS LIC


NOTARY SIGNATURE

SEAL:

Humberto Meda
PRINT, TYPE OR STAMP NAME OF NOTARY



**AMERICANS WITH DISABILITIES ACT (ADA)
DISABILITY NONDISCRIMINATION STATEMENT**

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

This sworn statement is submitted City of Coral Gables
(print name of public entity)

by Fabio Cardenas / President
(print individual's name and title)

for The Sundown Group, Inc.
(print name of entity submitting sworn statement)

whose business address is: 2520 SW 22 Street #2091, Miami, FL 33145

and (if applicable) its Federal Employer Identification Number (FEIN) 271695280
(If the entity has not FEIN, include Social Security Number of the individual signing this sworn statement:

_____.)

I, being duly first sworn state:

That the above named firm, corporation or organization is in compliance with and agreed to continue to comply with, and assure that any sub-contractor, or third party contractor under this project complies with all applicable requirements of the laws listed below including, but not limited to, those provisions pertaining to employment, provision of programs and service, transportation, communications, access to facilities, renovations, and new construction.

The American with Disabilities Act of 1990 (ADA), Pub. L. 101-336, 104 Stat 327, 42 U.S.C. 12101,12213 and 47 U.S.C. Sections 225 and 661 including Title I, Employment; Title 11, Public Services; Title III, Public Accommodations and Services Operated by Private Entities; Title IV, Telecommunications; and Title V, Miscellaneous Provisions.

The Florida Americans with Disabilities Accessibility Implementation Act of 1993, Sections 5553.501-553.513, Florida Statutes

The Rehabilitation Act of 1973, 229 U.S.C. Section 794
The Federal Transit Act, as amended, 49 U.S.C. Section 1612
The Fair Housing Act as amended, 42 U.S.C. Section 3601-3631

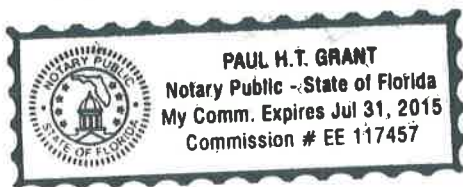
Fabio Cardenas
[Signature]

Sworn to and subscribed before me this 9th day of April, 2014

Personally known

OR Produced identification:

[Type of Identification]



Notary Public-State of Florida
My Commission Expires 7/31/15

Paul H.T. Grant
[Printed, typed or stamped name of Notary Public] PAUL H.T. GRANT

NON-COLLUSION AFFIDAVIT

State of Florida)

)ss.

County of Miami-Dade)

Fabio Cardenas being first duly sworn, deposes
and says that:

(1) Affiant is the President
(Owner, Partner, Officer, Representative or Agent) of
Sundown Group, Inc the Bidder / Proposer that has
submitted the attached Solicitation;

- (2) Affiant is fully informed respecting the preparation and contents of the attached Bid/Proposal and of all pertinent circumstances respecting such Solicitation;
- (3) Such submittal is genuine and is not a collusive or sham Solicitation;
- (4) Neither the said Bidder / Proposer nor and of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Bidder / Proposer or firm, or person to submit a collusive or sham Solicitation in connection with the work for which the attached submittal; or to refrain from bidding in connection with such work; or have in any manner, directly or indirectly, sought by agreement or collusion, or communication, or conference with any Bidder, firm, or person to fix any overhead, profit, or cost elements of the Solicitation price or the Solicitation price of any other Bidder / Proposer, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed work;
- (5) The price or prices quoted in the attached submittal are fair and proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Bidder or any other of its agents, representatives, owners, employees or parties in interest, including this affiant.

Fabio Cardenas

[Signature]

Sworn to and subscribed before me this 9th day of April, 2014

Personally known _____

OR Produced identification: _____

[Type of Identification]

Notary Public-State of Florida

My Commission Expires 7/31/15

[Printed, typed or stamped Commissioned
name of Notary Public]

Paul H.T. Grant



DRUG-FREE WORK PLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that The Sundown Group, Inc. does:
(Name of Business)

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the work place, the business's policy of maintaining a drug-free workplace, any available drug counseling, Employee Assistance Programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee a copy of the statement specified in subsection (1) that are engaged in providing the commodities or contractual services that are proposed.
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are proposed, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.



Bidder Signature

4-9-14

Date

CERTIFICATION OF BIDDER STATEMENT

I Fabio Cardenas, President certify that I am authorized to act on behalf
(Name) (Title)
of The Sundown Group, Inc. pursuant to the IFB and further
(Name of Business)

acknowledge and understand the information contained in response to this Bidder Statement shall be relied upon by Owner awarding the contract and such information is warranted by Bidder to be true and correct. The discovery of any omission or misstatement that materially affects the Bidder Statement to perform under the contract shall cause the City to reject the bid or proposal, and if necessary, terminate the award and/or contract. I further certify that the following are the names, titles and official signatures of those persons authorized to act by the foregoing statement.

NAME	TITLE	SIGNATURE
<u>Fabio Cardenas</u>	<u>President</u>	<u>[Signature]</u>
		<u>[Signature]</u> Signature

State of Florida

County of Miami-Dade

On this the 9 day of April, 2014, before me, the undersigned Notary Public of the State of Florida, personally appeared Fabio Cardenas and whose name(s) is/are subscribes to
(Name(s) of individual(s) who appeared before notary)

the within instrument, and acknowledge it's execution.

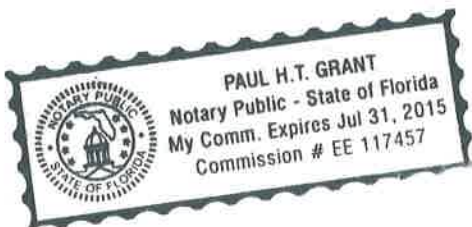
[Signature]
NOTARY PUBLIC, STATE OF FLORIDA

NOTARY PUBLIC
SEAL OF OFFICE:

PAUL H - T - GRANT
(Name of Notary Public: Print, Stamp or Type as Commissioned.)

Personally known to me, or
Produced identification:
FLDL C635-241-80-322-0
Ex 4/2/21

(Type of Identification Produced)



Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY



7159759

BUSINESS NAME/LOCATION
SUNDOWN GROUP INC THE
5201 BLUE LAGOON DR #8
MIAMI, FL 33126

RECEIPT NO.
NEW BUSINESS
7437107

EXPIRES
SEPTEMBER 30, 2014

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER
SUNDOWN GROUP INC THE

SEC. TYPE OF BUSINESS
196 GENERAL BUILDING
CONTRACTOR

**PAYMENT RECEIVED
BY TAX COLLECTOR**

Worker(s)

1

CGC058429

82.50 02/25/2014
0228-14-005032

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector

