CLORIUM

City of Coral Gables

Order	of	receipt
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Request	to A	ddress	City	Commi	ission

Request to Addre	ess City Commission
Date: PLEASE PR	INT _ Time:
Issue: Name: MRIA	Q. CAUZ
Phone: E-r Are you a registered lobbyist with the Cit	mail: y of Capel Gables?
Representing: I wish to speak I do not wish to speak	Proponent Opponent
I have been requested to speak Comments regarding this issue:	To provide information
	19/7

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



OR THIS
City of Coral Gables

Request to Address City Commission

DI EACE DOINT
Date: Oct 12,2323 F- Time: 10:45
Agenda/Item Number:
Issue: Update on Granada Dinor (Buyes Bb)
Name: Wells
Mailing address: 1310 Coral Way
City: Cora Cables State/Zip: FL 33134
Phone: 305-588-3584 E-mail: tometwellslaw. Co.
Are you a registered lobbyist with the City of Coral Gables?
□ Yes No.
Representing: CeSidents
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:
schedule with updates and touchell meeting
as to lease with dinerio perator

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