



BROWARD SHERIFF'S OFFICE TRESPASS AFFIDAVIT

Sworn deputies of the Broward Sheriff's Office are authorized representatives to enforce FS 810.08 and/or 810.09 (Trespass) and warn/direct any person to leave the premise of

(Legal Business Name) Joefran Investments LLC

D.B.A. _____

Address/Telephone: (954)979 0707

Broward County, Florida. Authority is granted by (Name) David Sexton

_____ in the position of (Manager/Owner) Owner

- ☒ I hereby request and authorize sworn deputies of the Broward Sheriff's Office to act as my agent to enforce FS 810.08 and/or 810.09 (Trespass) on property and surrounding curtilage (including parking areas) of the above business or residence.
- ☒ I hereby request and authorize sworn deputies of the Broward Sheriff's Office to act as my agent to enforce FS 810.08 and/or 810.09 (Trespass) as long as the property is posted pursuant to FS 810.011 (Vacant land or property without a structure or conveyance).

I also acknowledge I will assist with the prosecution of persons arrested by authorized agents of the above business.

[Signature]
Authorized Signature/Title

08/19/2025

Date

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me this 19th day of August, 2025 by David Sexton III, who is personally known to me or who has produced _____ as identification.

[Signature]
NOTARY PUBLIC

Print, Type, or Stamp Commission _____ of Notary Public

