

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) ALLIANCE SW 27th Avenue LLC,

D.B.A. _____
Address/Telephone: ~~4000 SW 27th Avenue, Pompano Beach FL~~ (914) 450-4199
Broward County, Florida. Authority is granted by (Name) IRA BERGSTEIN
_____ in the position of (Manager/Owner) Manager.

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.

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

[Signature] 9/29/22
Authorized Signature/Title Date

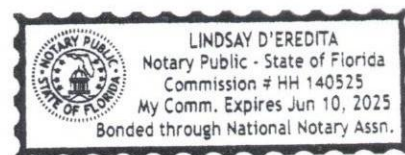
STATE OF FLORIDA
COUNTY OF ~~BROWARD~~ PALM BEACH

The foregoing instrument was acknowledged before me this 29 day of September, 2022 by IRA BERGSTEIN, who is personally known to me or who has produced

ID
as identification. [Signature]

NOTARY PUBLIC

Print, Type, or Stamp Commissioned Name of Notary Public
BSO RP-87 (Revised 6/04)



P&Z