



City of Pompano Beach  
 Department of Development Services  
 Planning & Zoning Division

P&Z#: 24-17000009

100 W. Atlantic Blvd Pompano Beach, FL 33060  
 Phone: 954.786.4679 Fax: 954.786.4666

**Development Application**

**Project Type:** Special Exceptions

**Submission #:** SPEX-2024-19

Site Data			
Project Name:	Special Exception - Community Residence	Size of property:	4601.0
Street Address:	1520 NE 43rd Ct	Number of units (Residential):	
Folio Number(s):	4842 13 05 1880	Total square feet of the building* (Non-Residential):	
Project Narrative:	Special Exception for distance (Family Community Residence)		

Applicant		Landowner (Owner of Record)	
Name:	Jordan Cairns	Business Name (if applicable):	CLAT Holdings LLC
Title:	Certified Recovery Residence Administrator	Print Name:	Chris LiVolsi
Street Address:	121 SW 14th Ct., Apt. B	Street Address:	2777 Summer Street, Suite 603
Mailing Address City/ State/ Zip:	Pompano Beach FL 33060	Mailing Address City/ State/ Zip:	Stamford CT 06905
Phone Number:	609-713-6775	Phone Number:	954-804-9655
Email:	mccarthy.jordan@yahoo.com	Email:	chris@mercuryng.com
ePlan agent (if different):			
Name of ePlan agent:			
Email of ePlan agent:			
Phone Number of ePlan agent:			



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**Owner's Certificate**  
**Special Exceptions**

**OWNER'S CERTIFICATE**

SPEX-2024-19

This is to certify that:

- I am the owner of the property, or
- I am authorized by the owner of the property to submit this application on their behalf and (if I am not the owner of the property) I will submit documentation that confirms my authority.

This is to certify that I am the owner of the subject lands described in this application and that I have authorized the filing of the aforesaid application.

By signing below, I agree that if the proposed development is found not in compliance with the applicable standards and minimum requirements of this Code then no building permit will be issued until those conditions the Development Services Director finds reasonably necessary to ensure compliance are met.

By signing below, I acknowledge that development applications must have a determination by the governing municipality of approved, approved with conditions, or denied within 120 days from a complete submittal for projects that do not require final action through a quasi-judicial hearing or a public meeting and within 180 days from a complete submittal for projects that do require final action through a quasi-judicial hearing or a public meeting per FL Stat § 166.033 and the Pompano Beach Code Section 155.2303.F.3. It is the responsibility of the applicant to receive all final Development Orders and receive this determination within the allotted timeframe. If the applicant fails to resubmit an application within 30 calendar days after being first notified of deficiencies of the submittal, the application shall be considered withdrawn and a \$100 non-refundable administrative fee will apply (155.2303.F.2.b). Additionally, if all required approvals are not received within the allotted timeframe the application will automatically be denied unless both the City and the applicant agree to an extension of time (155.2303.I).

By signing below, I acknowledge that lying or misrepresentation in the application can lead to revocation. (155.8402. B. *Revocation of Approval*).

Name: Lyndsey Norwood 09/17/2024

Signature: *Lyndsey Norwood*

Date: September 9, 2024

RE: Notarized Letter of Authorization by Property Owner

To whom it may concern,

I am composing this letter to formally notify the relevant parties that I am aware of, and hereby grant permission for, my property to be utilized as a Recovery Residence.

If you have additional questions, you may contact me at (954) 804-9655 or livolsicv@gmail.com.

 9/9/24

Chris LiVolsi

CLAT Holdings LLC



Notary Public 

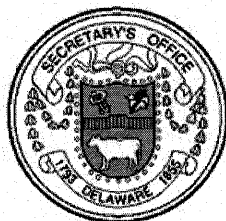
My commission expires: July 22, 2026

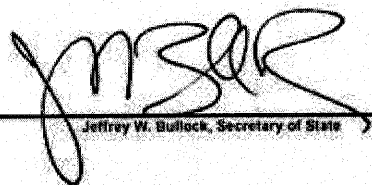
# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "CLAT HOLDINGS, LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF MAY, A.D. 2023, AT 3:13 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

7462958 8100  
SR# 20232056972

Authentication: 203351985  
Date: 05-15-23

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

**CERTIFICATE OF FORMATION  
OF  
CLAT HOLDINGS, LLC**

**FIRST:** The name of the limited liability company is CLAT HOLDINGS, LLC.

**SECOND:** Its registered office is to be located at 501 Silverside Road, Suite 105, Wilmington, DE 19809, County of New Castle. The name of the registered agent at such address is VALIS Group Inc.

**THIRD:** The purpose of the limited liability company shall be to engage in any lawful act or activity for which a limited liability company may be formed under the Limited Liability Company law of the State of Delaware.

**FOURTH:** The limited liability company shall have perpetual existence.

**FIFTH:** Management of the limited liability company is vested in the member(s) in accordance with their membership interests, unless this is varied by the operating agreement. A limited liability company member may not assign, either wholly or partially, the right to participate in management without the written consent of all limited liability company member(s). From this day hence, the undersigned has fulfilled the duties of Organizer and relinquishes all further duties to the initial Member(s) of CLAT HOLDINGS, LLC. The initial member(s) of the limited liability company shall be:

LIVOLSI FAMILY LLLP  
1250 S. PINE ISLAND ROAD, STE 200  
PLANTATION, FLORIDA 33324  
United States of America

TROISI FAMILY INVESTMENT HOLDINGS LLC  
898 SWEETGRASS STREET  
LOXAHATCHEE, FLORIDA 33470  
United States of America

**SIXTH:** The initial managers of the limited liability of company shall be:

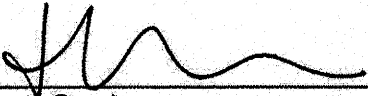
CHRISTOPHER LIVOLSI  
1250 S. PINE ISLAND ROAD, STE 200  
PLANTATION, FLORIDA 33324  
United States of America

ANTONIO TROISI  
898 SWEETGRASS STREET  
LOXAHATCHEE, FLORIDA 33470  
United States of America

**SEVENTH:** The name and mailing address of the person forming this limited liability company at the instruction of its member(s) is as follows:

Tracey Gendron  
501 Silverside Road, Suite 105  
Wilmington, DE 19809

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate of Formation of CLAT HOLDINGS, LLC on this fifteenth day of May, 2023.

  
\_\_\_\_\_  
Tracey Gendron  
Organizer

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M23000006497

**Entity Name:** CLAT HOLDINGS, LLC

**Current Principal Place of Business:**

715 E HILLSBORO BLVD 2ND FLOOR  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

715 E HILLSBORO BLVD 2ND FLOOR  
DEERFIELD BEACH, FL 33441 US

**FEI Number:** 93-1398680

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DANIEL P. SOKOLOFF, CPA PA  
715 E HILLSBORO BLVD 2ND FLOOR  
DEERFIELD BEACH, FL 33441 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title AUTH  
Name SOKOLOFF, DANIEL  
Address 715 E HILLSBORO BLVD 2ND FLOOR  
City-State-Zip: DEERFIELD BEACH FL 33441

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DANIEL SOKOLOFF

**AUTHORIZED MEMBER**

**04/26/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

Date of this notice: 05-17-2023

Employer Identification Number:  
93-1398680

Form: SS-4

Number of this notice: CP 575 G

CLAT HOLDINGS LLC  
CHRISTOPHER LIVOLSI SOLE MBR  
715 E HILLSBORO BLVD FL 2ND  
DEERFIELD BCH, FL 33441

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 93-1398680. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

