



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

P&Z#: 22-15000021

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

Development Application

Temporary Use Permits
Project Type: (Interim Use Permit)

Submission #: TEMP-2022-16

Site Data

Project Name:	Flamingo Seafood	Size of property:	17294.0
Street Address:	2798 E Atlantic Blvd	Number of units (Residential):	
Folio Number(s):	494306010040	Total square feet of the building*	
Project Narrative:	New 5,675 square foot deck built over existing asphalt and concrete to provide patrons an outdoor dining area as well as prevent vehicular traffic from being able to use the current "lot" to make illegal u-turns at the corner of NE 28th Ave and East Atlantic Blvd.		

Applicant	Landowner (Owner of Record)
Name:	Business Name (if applicable):
Will Parker	Amkin Atlantic Square
Title:	Print Name:
President	AMKIN ATLANTIC SQUARE LLC
Street Address:	Street Address:
2798 East Atlantic Blvd	2728 East Atlantic Blvd
Mailing Address City/ State/ Zip:	Mailing Address City/ State/ Zip:
Pompano Beach FL 33062	Pompano Beach FL 33062
Phone Number:	Phone Number:
954-822-4386	561-400-7635
Email:	Email:
willparkerftl@gmail.com	bbeaulieu@amkinre.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
Temporary Use Permits
(Interim Use Permit)
TEMP-2022-16

OWNER'S CERTIFICATE

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.l).

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

Name: Will Parker 12/19/2022

Signature: 

January 9, 2023

City of Pompano Beach
100 West Atlantic Blvd.
Pompano Beach, Fl 33060

To whom it may concern.

Please allow this letter to serve as confirmation that Will Parker with Mattarke LLC d/ba Flamingo See Food, has the authorization to apply for a Major Temporary Use Permit for the property located at 2798 E Atlantic Blvd, Pompano Beach, FL 33062.

Should you have any questions or concerns, you may reach out to Brian Beaulieu our property manager of Amkin Atlantic Square LLC, at his cell at 561-400-7635 or to his email bbeaulieu@amkinre.com

Sincerely,

A handwritten signature in blue ink, appearing to read "Ramon Llorens".

Ramon Llorens

Amkin Management LLC
1450 Brickell avenue, Suite 1450
Miami Fl 33131

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000029760

Entity Name: AMKIN ATLANTIC SQUARE LLC**Current Principal Place of Business:**1450 BRICKELL AVE
SUITE 1450
MIAMI, FL 33131**Current Mailing Address:**1450 BRICKELL AVE
SUITE 1450
MIAMI, FL 33131 US**FEI Number:** 81-1438048**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INTERAMERICAN CORPORATE SERVICES LLC
2525 PONCE DE LEON BLVD.
PH 12TH FLOOR
CORAL GABLES, FL 33134 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:** RENE MURAI

04/26/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	AMKIN MANAGEMENT LLC
Address	1450 BRICKELL AVE SUITE 1450
City-State-Zip:	MIAMI FL 33131

*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:** AMKIN MANAGEMENT LLC

MANAGER

04/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000108425

Entity Name: AMKIN MANAGEMENT LLC**Current Principal Place of Business:**1450 BRICKELL AVE
SUITE 1450
MIAMI, FL 33131**Current Mailing Address:**1450 BRICKELL AVE
SUITE 1450
MIAMI, FL 33131 US**FEI Number:** 47-1654281**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INTERAMERICAN CORPORATE SERVICES LLC
2525 PONCE DE LEON BLVD.
PH 12TH FLOOR
CORAL GABLES, FL 33134 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:** RENE MURAI

04/27/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	LLORENS, RAMON
Address	1450 BRICKELL AVE SUITE 1450
City-State-Zip:	MIAMI FL 33131

*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:** RAMON LLORENS

MANAGER

04/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date