



888 SE 3rd Ave., Suite 400
Fort Lauderdale, FL 33316
Office: 954.332.2358
Email: rabrams@abrams-law.com
Website: www.abrams-law.com

July 7, 2021

Zoning Board of Appeals (“Board”)
100 West Atlantic Blvd.
Pompano Beach, FL. 33060

**RE: Special Exception Narrative
Second Chance Recover Housing, Inc. (the “Applicant”)
2781 NE 2nd Ave, Pompano Beach, FL. 33064 (the “Property”)**

Dear Board Members,

Please accept this document as a justification letter and narrative in support of the Applicant’s application for Special Exception pursuant to Section 155.2406 of the City’s Zoning Code.¹ The Applicant respectfully seeks to use the Property as a “Family Community Residence,” (the “Intended Use”) as that term is defined under 155.4202(H)(2). The Intended Use is consistent with single family use in the area and will fulfill a need for long term (1+ year) living arrangement for people with disabilities. The supportive interrelationship between residents will be an essential component and is intended to emulate a single functional family.

INTENDED USE AND COMPATIBILITY

A Family Community Residence is defined in the Code as a “*community residence that provides a relatively permanent living arrangement for people with disabilities where, in practice and under its rules...does not limit how long a residence may live there. The intent is for residents to live in a family community residence on a long-term basis.*” The Applicant seeks to use the Property for permanent housing for a small group of individuals (nine or less) who are recovering from substance abuse. The individuals will live as a single functional family and will support each other in recovery. The use will strictly be residential, and no services will be provided. It will emulate and be the same in all relevant respects as neighboring single-family residences.²

¹ This narrative replaces the previous version submitted on April 28, 2021.

² The FHA's reasonable accommodation requirement requires cities to ensure that zoning restrictions of residential uses do not discriminate against persons based solely on a handicap, such as drug or alcohol addiction and provides a reasonable accommodation if needed to ensure equal treatment. *Schwarz v. City of Treasure Island*, 544 F. 3d 1201 (11th Cir. 2008) (holding that accommodation of zoning is required if it did not take out an essential component of the zoning scheme, and the city could not disallow halfway house when the zoning allowed multi-family apartments).

The future land use map designation for this location is Residential Low. The Future Land Use Element of the City's Comprehensive Plan recognizes a need for "Special Residential Facilities" for individuals requiring treatment, care, rehabilitation or education. Such facilities provide a "family living environment including supervision and care necessary to meeting the physical, emotional and social needs of the individuals." (Future Land Use Element, p 131). The Comprehensive Plan expressly permits these uses "within the residential land use category." (p. 131). Second Chance Recovery Housing meets this recognized need by providing long term, permanent housing for individuals who are rehabilitating from drug and/or alcohol addiction.

The Property complies with all applicable zoning standards. Pursuant to Section 155.4202(H)(3), with the Property's RS-3 Zoning, a family community residence is allowed **by right** when:

- (i) it is at least 660 linear feet from the closest existing community residence housing four or more individuals or recovery community as measured from the nearest property line of the proposed community residence to the nearest property line of the closest existing community residence; and
- (ii) The operator or applicant is licensed or certified by the State of Florida to operate the proposed community residence, has certification from an appropriate national accrediting agency, or has been recognized or sanctioned by Congress to operate the proposed residence such as Oxford Home.

SPECIAL EXCEPTION CRITERIA

The City has informed the Applicant that the Property is located approximately 467 feet from an existing Community Residence located at 2701 NE 1st Terrace ("2701"). **See Exhibits A and B.** If true, the Property will require a special exception approval pursuant to 155.4202(H)(3)(i), above.

It is important to note that 2701 is categorized on the owner's business tax receipt and zoning use certificate application as an "assisted living facility" by the City. **See Exhibit C.** The Applicant respectfully disputes Staff's determination that the other use at the 2701 is a community residence. Under the Definitions section of the Code, "Assisted Living Facilities...are not community residences."

In any event, the Applicant's use of the Property satisfies the criteria applicable when only distance is at issue. There are two (2) applicable criteria set forth in Sec. 155.2406 E. I, each addressed separately below.

- a. The applicant demonstrates that the proposed community residence will not interfere with the normalization and community integration of the residents of any existing community residence or recovery community and that the presence of other community residences or recovery communities will not interfere with the normalization and community integration of the residents of the proposed community residence, and*

The proposed use is generally no different in appearance than other single-family homes in the community. **See Exhibit D.** Individuals reside there long term as their primary home. The only relevant distinction is the status of persons living there – recovering from substance abuse disorders. Recovering substance abusers are persons with disabilities and are protected under the Fair Housing Act and the ADA. They are required to be treated the same as any other single-family use in the RS-3 zoning district.

The use of this Property as a Family Community Residence will not interfere with the other residence at 2701. The other residence is on a different block and street. Even if they were right next to each other, the respective uses are not incompatible or conflicting. Mona's Group Home is a group home for mentally and physically disabled persons (**See Exhibit C**) whereas the Intended Use of the Property is for individuals recovering from substance abuse. There is no apparent conflict here. These uses could not have any conceivable negative impact on each other.

- b. The applicant demonstrates that the proposed community residence in combination with any existing community residences and/or recovery communities will not alter the residential character of the surrounding neighborhood by creating an institutional atmosphere or by creating or intensifying an institutional atmosphere or de facto social service district by concentrating or clustering community residences and/or recovery communities on a block face or in a neighborhood.*

The Property will continue to function in a manner which is consistent and compatible with the general character of the surrounding lands and permitted uses. As a family community residence, the Property houses persons needing treatment and/or rehabilitation services in a manner consistent with familial residential living.

The Property is located in an RS-3 Zone, which explicitly allows for family community residences. The Property as currently used is virtually indistinguishable from the surrounding residences. The character of the home will remain consistent and will in no way negatively impact the general character of the neighborhood. The Intended Use will not alter the residential character of the surrounding neighborhood because a community residence is a residential use, as expressly stated in the Code. The Property will continue to maintain safe ingress and egress, as well as traffic flow. The safety of the community's streets will be maintained at its current level.

Because the Property caters to the long-term residential living, it has the look and feel of a single-family home and does not stand out of its surroundings. The residents are respectful of their home and the neighborhood, and do not congregate in sight of the neighbors and do not create an institutional feel. There have been no incidents with the neighbors, there is no litter or refuse in or around the Property and the Property, generally, conforms with the surrounding community.

The other alleged community residence within 660 feet, Mona's Group Home, similarly looks just like a normal single-family home. **See Exhibit E.** There is no risk of creating an institutional atmosphere when the use appears just like any other single-family home. Given the familial living environment with these uses, there will not be any appearance of clustering of community residences.

CONCLUSION

As noted, the Property currently houses residents in need of the rehabilitation in a supportive setting. There have been no issues with the Property or the residents – the Property as currently used blends into the community at large. For the duration of the time the Property has been used as a family community residence it has functioned similarly to a residential home in both character and appearance. The intensity and density of the Property will not change and will have the same impact as all other residences within the community.

The Property is well-maintained and well kept, and the granting of a special exception will have no negative impact on the neighboring lands. The neighboring lands will see no reduction in either property value or use if the special exception is granted.

At the time of this writing, the Applicant has submitted an application to the Florida Association of Recovery Residences (“FARR”) for certification. The application for FARR certification is expected to be granted very soon. As such, the Applicant expects to become compliant with 155.4202(H)(3)(ii) by the time this matter is heard by the Board or very soon thereafter. The applicant would consent to make FARR certification a condition of approval by the Board.

For the above reasons, is respectfully requested that the Board grant the Applicant’s application for Special Exception.

Sincerely,

/s/ Ryan Abrams
Ryan Abrams, Esq.
FOR THE FIRM

EXHIBIT A

From: [Daniel Keester](#)
To: [Ryan Abrams](#); [Scott Reale](#)
Cc: [Martha Lawson](#); [Tania LaFrance](#)
Subject: RE: Special Exception Application for Second Chance Recover Housing, Inc.
Date: Thursday, May 20, 2021 4:08:49 PM
Attachments: [image006.png](#)

Ryan, the Single-family home that is less than 660 feet away is "Mona's Group Home." Although, the BTR classification is an "Assisted Living Facility," that is not an "assisted living facility" as defined in the City's Zoning code. There are some single-family homes that have been issued BTR's as "Assisted Living Facilities," but the BTR Categories do not always align with the zoning use definition. The "community residential homes" that are fewer than 14 residences identified in the state statute, licensed by the various state agencies of Florida, fall under the category of the "Community Residence."

I hope this helps. If you'd like to discuss, or have any additional questions, please let us know.



Please be advised the hours of operation for City Hall is: Monday – Thursday, 7 AM – 6 PM.

From: Ryan Abrams <rabrams@abrams-law.com>
Sent: Thursday, May 20, 2021 3:39 PM
To: Scott Reale <Scott.Reale@copbfl.com>; Daniel Keester <Daniel.Keester@copbfl.com>
Cc: Martha Lawson <Martha.Lawson@copbfl.com>; Tania LaFrance <tania@abrams-law.com>
Subject: RE: Special Exception Application for Second Chance Recover Housing, Inc.

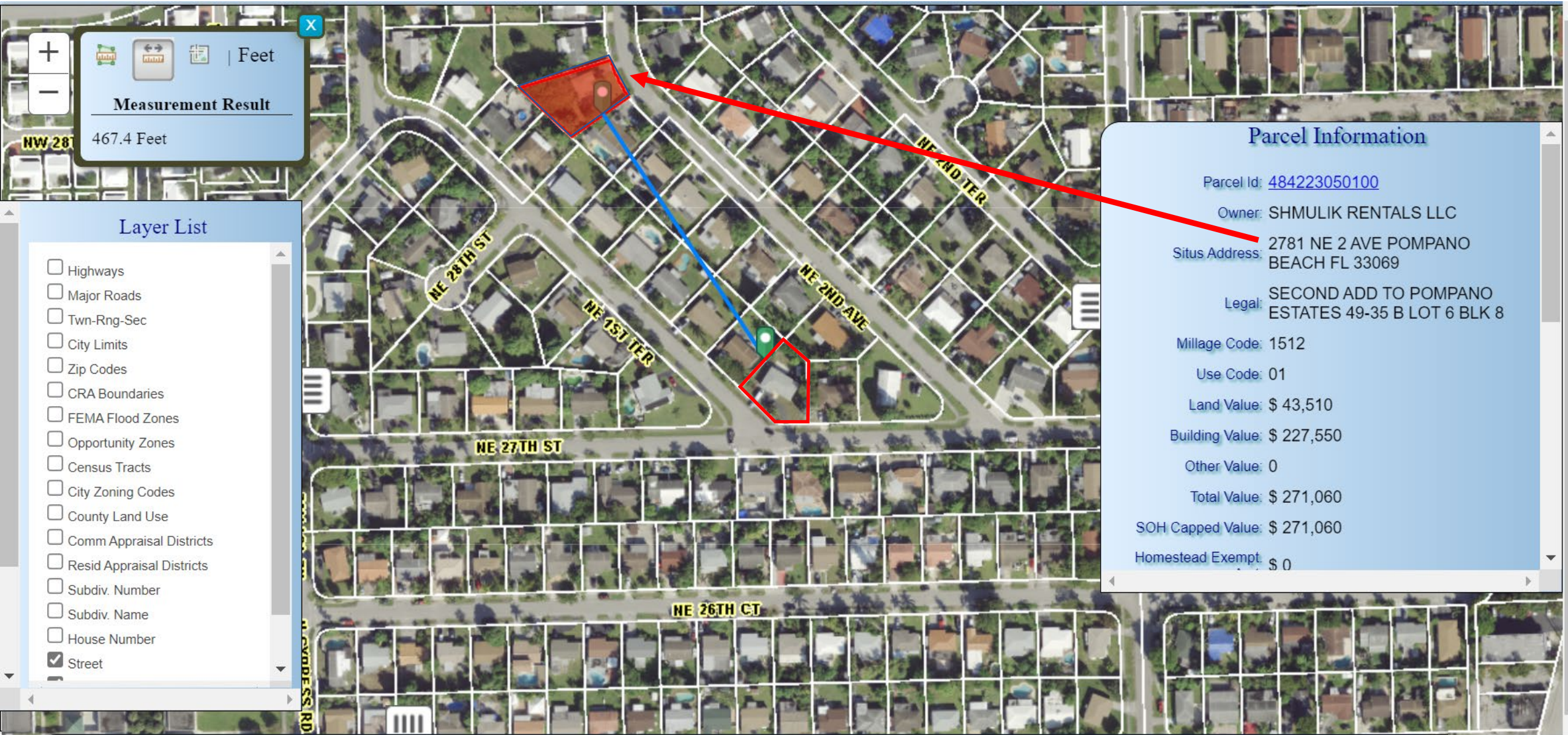
Hi Scott and Daniel,

I wanted to follow up regarding this special exception application. I recall hearing that the other property that is within 650 FT of the 2781 property is an ALF. Is that accurate?

Sincerely,

Ryan A. Abrams, Esq.
Founder and Managing Attorney
Abrams Law Firm, P.A.
888 SE 3rd Ave., Suite 400
Fort Lauderdale, FL 33316
Office: 954-332-2358
Direct: 954-406-0280
Cell: 305-775-5958
Email: rabrams@abrams-law.com

EXHIBIT B



Feet

Measurement Result

467.4 Feet

Layer List

- ☐ Highways
- ☐ Major Roads
- ☐ Twn-Rng-Sec
- ☐ City Limits
- ☐ Zip Codes
- ☐ CRA Boundaries
- ☐ FEMA Flood Zones
- ☐ Opportunity Zones
- ☐ Census Tracts
- ☐ City Zoning Codes
- ☐ County Land Use
- ☐ Comm Appraisal Districts
- ☐ Resid Appraisal Districts
- ☐ Subdiv. Number
- ☐ Subdiv. Name
- ☐ House Number
- ☒ Street

Parcel Information

Parcel Id: [484223050100](#)

Owner: SHMULIK RENTALS LLC

Situs Address: 2781 NE 2 AVE POMPANO
BEACH FL 33069

Legal: SECOND ADD TO POMPANO
ESTATES 49-35 B LOT 6 BLK 8

Millage Code: 1512

Use Code: 01

Land Value: \$ 43,510

Building Value: \$ 227,550

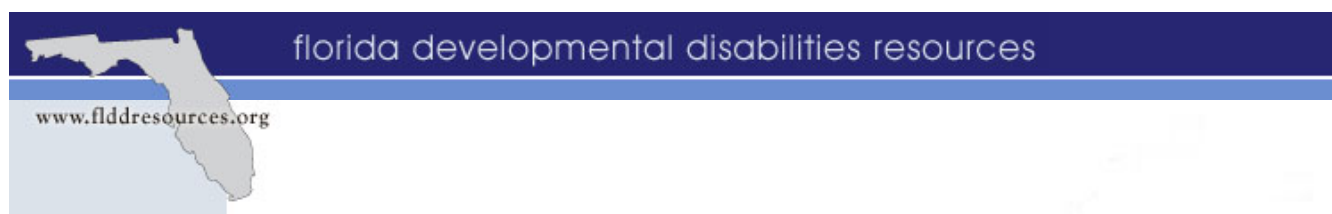
Other Value: 0

Total Value: \$ 271,060

SOH Capped Value: \$ 271,060

Homestead Exempt: \$ 0

EXHIBIT C



Home
Contact Us
About This Site
Medicaid Waivers
Provider Search
User Guide
Acronyms and Terms
Service Descriptions
Source of Information
Supporting Organizations
Related Links

Provider Information

Provider: METTHEN, INC
MONA'S GROUP HOME, JONADAV
GROUP HOME

Address: 5031 HERON CT
COCONUT CREEK FL 33073

County: Broward

APD Region: Southeast

Review Date: 12/14/2020

Overall Performance Score: 88.6 %

Life Skills Development 1
(Companion): Not reviewed

Residential Habilitation
Standard: 91.8 %

Background Screening: 7/7

Staff Training : 42/45

Health and Safety: 7/9

New Search

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the State of Florida Agency for Health Care Administration
in cooperation with Agency for Persons with Disabilities



City of Pompano Beach
Department of Development Services
Business Tax Receipt Division

License Year 2010/11



100 W. Atlantic Blvd Pompano Beach, FL 33060
 Phone: 954.786.4633/ 954.786.4668 Fax: 954.786.4666

Application for Business Tax Receipt

Name of Business Monas's Group Home Date 6/27/11
 Address of Business 2701 NE 1st Ter Pompano Beach FL Zip 33064
 Date business opened at this location 6/27/11 Number of Employees (2) Square Feet Occupied 15000
 Mailing Address SAME AS ABOVE City _____ State _____ Zip _____
 Federal ID # 20-1612258 Bus. Phone # 954-781-9958 Emergency Phone # 954-609-8479
 Bus. Fax # 954-781-9949 Sales Tax # _____ Web Address _____
 Owner's Name METTHEN INC Date of Birth 6/6/61 Social Security Number 591-54-4186
 Owner's Address 6031 Heron Ct City Pompano Beach FL Zip 33073
 E-Mail Address monasgrouphomes@yahoo.com
 Corp. Name METTHEN INC Address 225 NW 79 Ave City Nargate FL Zip 33063
 Type of Ownership Corporation ☐ LLC ☐ Partnership ☐ Sole Proprietor ☐

****ATTENTION**** If the business involves outdoor sales or storage, a site plan is required. If the business involves a use **other than** retail, wholesale or manufacturing, a floor plan and site plan are required.

Describe any and all conduct or activity of the business Group Home Housing in- dividuals with mental and or physical challenged

The undersigned does hereby request that a Business Tax Receipt be issued to him on the basis of and subject to the herein set forth information with the understanding that all City of Pompano Beach Ordinances shall be complied with whether specified or not and all information supplied on this application (other than social security number) shall become public record. Giving false information on this application is unlawful and may result in prosecution, suspension or revocation of your Business Tax Receipt.

ELSIE HENRY (Print) X Elsie H. Henry
 Owner, Partner, or Corporate Officer's Name Owner, Partner, or Corporate Officer's Signature

RETURN TO:
Office of Business Tax Receipt, 100 West Atlantic Boulevard
Pompano Beach, Florida 33060

For Office Use Only

Transfer: Name ☐ Ownership ☐ Address ☐ New ☒ Inventory Increase ☐ Category change ☐
 Transferred Account No. _____ Transferred Business Tax Receipt No. _____
 Receipt No. 119292 Paid by: Cash ☐ Check No. 1247 Date Paid 7/1/11
 Zoning District: 1233 The above described business has been determined to be:
☒ in compliance with the use requirements of the district in which the activity is proposed to be located.
☐ not in conformance with the use requirements of the district in which the activity is proposed to be located.

Category: _____
 Ord. No.: _____
 Bus. Tax Fee: 005.500
 Transfer Fee: _____
 Penalty Fee: _____
 Zoning Fee: 25.00
 Admin Fee: _____
 Sub Total _____

[Signature] Zoning Official

11-68549

Total \$ 82.88

Business Tax Receipt Official

Account No. 4444010

Date Issued 7/13/11

G:\Zoning 2009\Forms&Sample docs\Website Docs\BTR\PDF

Date Modified: 12/7/2010



ADS



City of Pompano Beach
Department of Development Services
Business Tax Receipt Division

100 W. Atlantic Blvd Pompano Beach, FL 33060
 Phone: 954.786.4633/ 954.786.4668 Fax: 954.786.4666



Zoning Certificate

Approval of this certificate does not give you permission to open for business. You must complete a Business Tax Receipt application and pay the appropriate fees before opening for business.
 Approval of this certificate is only good for 60 days after which you must re-apply and pay a new fee.

Name of Business MONA'S Group Home #4
 Address of Business 2701 NE 1st Ter Business Telephone 954-609-8479
 Name of Applicant ELSIE HENRY
 Home Address 5031 Heron Ct Home Telephone 954-609-8479
Coconut Creek FL 33073

Please describe the operation of your business IN SUFFICIENT DETAIL to enable the City to determine whether the proposed activity is permitted by zoning regulations. Depending on the type of business additional documentation and/or a more detailed description of the business could be required prior to or at time of filing for the Business Tax Receipt.

Group Home for individual with mental and or physical challenged -

Square feet occupied 1500 SF Number of employees 1 or 2 employees

I certify that the foregoing information is true and correct.

Applicant's signature: Elsie H. Henry RD Date 4/19/11

PLEASE NOTE

Prior to installing any sign you must obtain a sign permit. For specific details regarding the City's Sign Code regulations please contact the Zoning Department at 954-545-7792.

*****For Office Use Only*****

Receipt # 86654 for \$25.00 ☒ Cash ☐ Check (non-refundable) 4/19/11

Zoning District 1253 The above described business has been determined

☒ to comply with the use requirements of the zoning district in which it is proposed to be operated.
☐ not in conformance with the zoning use requirement and is therefore not approved.

Additional comments: Must provide state license for BTR

Chris [Signature] 4/20/11 4/21/11 Elsie HW 9/19

Zoning Official

Date

Date Applicant Notified



City of Pompano Beach
Business Tax Receipt Office



Outdoor Activity and/or Outdoor Storage Restriction

State of Florida}
County of Broward}

Owners Name: METTHEN INC - ELSIE HENRY

Business Name: MONA'S Group Home #4

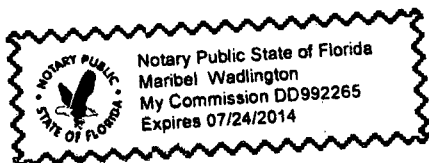
Business Address: 2701 NE 1st Ter. Pompano Beach FL 33064

There will be NO outside business activities or outdoor storage at the above referenced property.

Signature: Elsie H. Henry

Sworn to and subscribed before me this 19 day of April 20 11,
at Pompano Beach, Broward County, Florida.

NOTARY PUBLIC
SEAL OF OFFICE



Maribel Wadlington
Notary Public State of Florida

(Printed name of Notary)

 Personally Known
✓ Produced identification
Type of identification:

F1 DL H560-213-61-706-D



City of Pompano Beach
Department of Development Services
Business Tax Receipt Division

100 W. Atlantic Blvd Pompano Beach, FL 33060
 Phone: 954.786.4633/ 954.786.4668 Fax: 954.786.4666



Zoning Certificate

Approval of this certificate does not give you permission to open for business. You must complete a Business Tax Receipt application and pay the appropriate fees before opening for business.
 Approval of this certificate is only good for 60 days after which you must re-apply and pay a new fee.

Name of Business MONA'S Group Home
 Address of Business 2701 NE 1st Ter Business Telephone 954-609-8479
 Name of Applicant ELSIE HENRY
 Home Address 5031 Heron Ct Coconut Creek Home Telephone 954-609-8479
FL 33073

Please describe the operation of your business IN SUFFICIENT DETAIL to enable the City to determine whether the proposed activity is permitted by zoning regulations. Depending on the type of business additional documentation and/or a more detailed description of the business could be required prior to or at time of filing for the Business Tax Receipt.

Group Home for individuals with mental and or physical challenged

Square feet occupied 1500 SF Number of employees 1 or 2 employees

I certify that the foregoing information is true and correct.

Applicant's signature: Elsie H. Henry Date 2/8/11

*****PLEASE NOTE*****

Prior to installing any sign you must obtain a sign permit. For specific details regarding the City's Sign Code regulations please contact the Zoning Department at 954-545-7792.

*****For Office Use Only*****

Receipt # 56085 for \$25.00 ☒ Cash ☐ Check (non-refundable)

Zoning District RS3 The above described business has been determined

☒ to comply with the use requirements of the zoning district in which it is proposed to be operated.
☐ not in conformance with the zoning use requirement and is therefore not approved.

Additional comments: Must provide state license for BTR.

Chris Camp 2/9/11 2/9/11 ELSIE HENRY

Zoning Official

Date

Date Applicant Notified



City of Pompano Beach
Business Tax Receipt Office



Outdoor Activity and/or Outdoor Storage Restriction

State of Florida}
County of Broward}

Owners Name: METTHEN INC

Business Name: MONA'S GROUP HOME

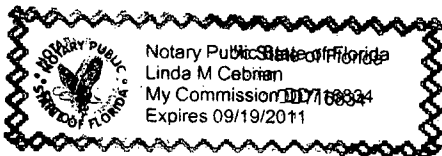
Business Address: 2701 NE 1ST TER

There will be **NO** outside business activities or outdoor storage at the above referenced property.

Signature: *Robbie M. Henry*

Sworn to and subscribed before me this 8 day of February 20 11,
at Pompano Beach, Broward County, Florida.

NOTARY PUBLIC
SEAL OF OFFICE



Linda M. Cebrian
Notary Public State of Florida

Linda M. Cebrian
(Printed name of Notary)

 Personally Known
✓ Produced identification
Type of identification:

FL. DES. H560-213.61-706.0

97971-1943



ZONING CERTIFICATE

Business Tax Receipt Office

City of Pompano Beach

100 West Atlantic Blvd.

Pompano Beach, FL 33060

(954) 786-4668 or (954) 786-4633

Approval of this certificate does not give you permission to open for business. You must complete a Business Tax Receipt application and pay the appropriate fees before opening for business.

Approval of this certificate is only good for 60 days after which you must re-apply and pay a new fee.

Name of Business MONA'S Group Home
 Address of Business 2701 NE 1st Ter Business Telephone 954-609-8479
 Name of Applicant ELSIE HENRY
 Home Address 5031 Heron Ct Coconut Creek FL 33073 Home Telephone 954-609-8479

Please describe the operation of your business IN SUFFICIENT DETAIL to enable the City to determine whether the proposed activity is permitted by zoning regulations. **Depending on the type of business additional documentation and/or a more detailed description of the business could be required prior to or at time of filing for the Business Tax Receipt.**

Group Home for individual with mental and/or physical challenges

Square feet occupied 1600 SF Number of employees 1 or 2 employees

I certify that the foregoing information is true and correct.

Applicant's signature: Elsie H. Henry Date 6/7/10

PLEASE NOTE

Prior to installing any sign you must obtain a sign permit. For specific details regarding the City's Sign Code regulations please contact the Zoning Department at 954-545-7792.

*****For Office Use Only*****

Receipt # 100616 for \$25.00 ☒ Cash ☐ Check (non-refundable) 6-7-10 RMC

Zoning District RS3 The above described business has been determined

☒ to comply with the use requirements of the zoning district in which it is proposed to be operated.

☐ not in conformance with the zoning use requirement and is therefore not approved.

Additional comments:

Needs state license, remove Home Business affidavit, not a home business.

[Signature] 6-17-10
 Zoning Official Date Date Applicant Notified



City of Pompano Beach
Business Tax Receipt Office



Outdoor Activity and/or Outdoor Storage Restriction

Owners Name: ELSIE HENRY

Business Name: MONA'S Group Home

Business Address: 2701 NE 1st Ter Pompano Beach FL 33064

There will be **NO** outside business activities or outdoor storage at the above referenced property.

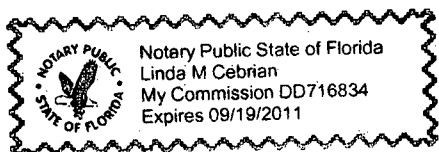
Signature: Elsie H. Henry

Sworn to and subscribed before me this 7 day of June 2010,
at Pompano Beach, Broward County, Florida.

NOTARY PUBLIC
SEAL OF OFFICE

Linda M. Cebrian

Notary Public State of Florida



Linda M. Cebrian

(Printed name of Notary)

 Personally Known

✓ Produced identification

Type of identification:

FL DES. H 560-213-61-706.0

City of Pompano Beach
*** CUSTOMER RECEIPT ***

Oper: RAMANG Type: OC Drawer: 1
Date: 6/07/10 01 Receipt no: 100616

Description	Quantity	Amount
ZC ZONING CERTIFICATE		
	1.00	\$25.00

Tender detail

CA CASH	\$25.00
Total tendered	\$25.00
Total payment	\$25.00

Trans date: 6/07/10 Time: 12:53:15

*****THANK YOU-&-HAVE A NICE DAY*****



**CITY OF POMPANO BEACH, FLORIDA
TRANSMITTAL FORM/RECEIPT
BUSINESS TAX RECEIPT**

No 79539

Received of Mma's Group Home Date 6.7.10

Tax Year _____ Paid by check # _____ Cash 25 -

Business Tax Receipt No. _____ Initial SMC

Customer Waiting Y ☒ N ☐

CODES:

____ OL Business Tax, New, Transfer\$ _____
____ OR Business Tax Renewal/Penalty\$ _____
☒ ZC Zoning Certificate Fee\$ 25.00
____ UM Unapplied Money*\$ _____
Type: _____

TOTAL.....\$ 25.00

*The UM code is only to be used when a customer pays another revenue item on the same check as a Business Tax Receipt.

PAID
JUN - 6 2010



June 11, 2010

From: Elsie Mona Henry
6108 NW 20th court
Margate, Fl 33063

To: City of Pompano
Pompano Beach Florida

To Whom It May Concern:

This letter is to respectfully request the authorization to open a family based group home at 2701 NE 1st terrace 33064 in Pompano Beach. This group home will serve the developmentally disabled population and it will be licensed for six people by the agency for person with disability. The group home will serve individuals in the Medicaid waiver program. This site will be operated by METTHEN INC. who's doing business as Mona's Group Home.

Their disabilities may be physical where they would need a wheel chair to get around with or without someone else's help, or mental where their mental capacities would be less than your average individual. In either case, they would require supervision twenty four hours a day and assistance with their basic needs.

If you have any question please feel free to call me at 954-609-8479.


Elsie Mona Henry
Owner-Administrator

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129251

Entity Name: METTHEN INC.

FILED
Feb 17, 2011
Secretary of State

Current Principal Place of Business:

225 NW 79 AVENUE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

225 NW 79 AVENUE
MARGATE, FL 33063

New Mailing Address:

FEI Number: 20-1612258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HENRY, ELSIE
5031 HERON COURT
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: HENRY, ELSIE M
Address: 5031 HERON COURT
City-St-Zip: COCONUT CREEK, FL 33073

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELSIE MONA HENRY

ADM.

02/17/2011

Electronic Signature of Signing Officer or Director

Date



agency for persons with disabilities
State of Florida

Certificate No. 10-2630GH
Date of Issue: June 24, 2011

CERTIFICATE OF LICENSE

Type of License: TEMPORARY

Client Capacity: SIX (6)

The Agency for Persons With Disabilities certifies that the facility,

MONA'S GROUP HOME #4 operated by

METTHEN, INC. located at

2701 NE 1 TERRACE in the City of

POMPANO BEACH County of BROWARD, STATE OF FLORIDA,

has complied with the Rules set by the Agency for the aforesated license.

The license shall continue in force UNTIL 9/30/11 unless withdrawn or revoked for cause.

Martha L. Martinez
Area Administrator
Agency for Persons with Disabilities, Area10



EXHIBIT D















Sent from my iPhone

VIEW ACCROSS THE STREET FROM 2781 NE 2 ST



EXHIBIT E

2701 NE 1ST TERR

