VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2016	000013666

Customer No	Payment Due Date
00008623	09/30/2016

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000013666

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2016 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2016 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2016 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2017 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:

☑ I am no longer conducting business in the Village as of 6/18/16.
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: _____ Date: _____

RETURN THIS FORM WITH YOUR PAYMENT

Morelia Rodriguez

From: Morelia Rodriguez
Sent: Friday, June 03, 2016 9:50 AM
To: 'Simone'
Cc: Gladys Bilbraut
Subject: RE: Business Closure (Folio Number 33-5028-000-0700)

Good morning Simone,

It was a pleasure dealing with you as well. Please considered this email as confirmation to close your business.

Best luck to you, and hope to see you again in our municipality.

Sincerely,

Morelia Rodriguez
Zoning Administrator
Village of Palmetto Bay
Department of Building & Capital Projects
9705 East Hibiscus Street
Palmetto Bay, Florida 33157
P: 305-259-1252
F: 866-927-5576
mrodriguez@palmettobay-fl.gov

From: Simone [mailto:simone@simoneimages.com]
Sent: Friday, June 03, 2016 9:44 AM
To: Morelia Rodriguez
Subject: Business Closure (Folio Number 33-5028-000-0700)

Good morning Morelia,

I will no longer be conducting business in Palmetto Bay as of June 18, 2016. Please close the following account.

Simone Images LLC
Folio Number 33-5028-000-0700
16455 SW 91st Ave
Palmetto Bay, Fl 33157

Thanks again for all your kindness in the past and may God bless you and your family.

Simone

www.simoneimages.com
305.322.7106

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2015
Expiration Date: 9/30/2016

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 10/8/15 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot **Block** **Subdivision**

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2016. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By

Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Attn:

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2015	000011851

Customer No	Payment Due Date
00008623	09/30/2015

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000011851

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2015 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2015 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2015 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2016 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:
SIMONE REID	OWNER	16455 SW 91 AVE PALMETTO BAY 33157	305-322-71

☐ I am no longer conducting business in the Village as of _____ Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: OWNER Date: 9/28/15

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157
PH: 305-259-1271 FAX: 786-338-7432
mrodriguez@palmettobay-fl.gov

Invoice No.
13025

INVOICE

Customer

Name SIMONE IMAGES LLC
Address 16455 SW 91 AVE
City PALMETTO BAY State FL ZIP 33157
Phone

Misc

Date 7/15/2015
Order No.
Due Date 9/30/2015

Qty	Description	Unit Price	TOTAL
1	Certificate of Use Renewal for fiscal year 2015-2016 A Home Office Certificate of Use is required to be renewed annually as per Village of Palmetto Bay Zoning Code section 30-60.25. If the Certificate has been obtained, please forward a copy for our record. Failure to comply with this section of the code may result in a fine in the amount of $ 250.00.	$ 32.50	$ 32.50
		SubTotal	$ 32.50
		Shipping	
	Tax Rate(s)		
		TOTAL	$ 32.50

Payment Select One...

Comments Any questions, please contact Morelia
Name SIMONE REID
CC #
Expires

Office Use Only

THANK YOU

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/7/2014
Expiration Date: 9/30/2015

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY
9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2014	000010064

Customer No	Payment Due Date
00008623	09/30/2014

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000010064

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2014 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2014 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2014 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2015 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

Simone Reid / Simone Images
cc# 4741 6590 0109 3250
Exp: 7/15
Please charge 30.00 to the credit card # above

CONTACTS

Name:	Role / Title:	Address:	Phone:
SIMONE REID	OWNER /		305-322-7106

☐ I am no longer conducting business in the Village as of _____
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: [signature] Officer / Title: SIMONE REID OWNER Date: 9/30/14

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 12/2/2013
Expiration Date: 9/30/2014

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2012
Expiration Date: 9/30/2013

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

7417

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2012	000006500

Customer No	Payment Due Date
00008623	09/30/2012

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000006500
Business Tax Fee $30.00
Total Tax Receipt Amt Due $30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2012 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2012 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2012 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2013 - 25%	$0.00	$30.00	$7.50	$37.50

CHAY A PUZEY REID
SIMONE A REID
16455 SW 91 AVE.
PALMETTO BAY, FL 33157

323
63-751/631 10948
1010115634237

9/25/12
Date

Pay to the Order of VILLAGE OF PALMETTO BAY $ 62.50

SIXTY TWO AND FIFTY 50/100 Dollars

Security Features Details on Back.

WELLS FARGO Wells Fargo Bank, N.A. Florida wellsfargo.com

For SIMONE IMAGES LLC CERT. USE / BUSINESS TAX

Simone Reid MP

⑆063107513⑆1010115634237⑈00323

and Clarke

ISLAND BREEZES®

Phone Number: (305) 322-7106

Phone Number: (305) 322-7106

Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:

☐ I am no longer conducting business in the Village as of _____
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: _____ Date: _____

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2011
Expiration Date: 9/30/2012

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2016	000013666

Customer No	Payment Due Date
00008623	09/30/2016

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000013666

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2016 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2016 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2016 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2017 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:

☑ I am no longer conducting business in the Village as of 6/18/14.
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: _____ Date: _____

RETURN THIS FORM WITH YOUR PAYMENT

Morelia Rodriguez

From: Morelia Rodriguez
Sent: Friday, June 03, 2016 9:50 AM
To: 'Simone'
Cc: Gladys Bilbraut
Subject: RE: Business Closure (Folio Number 33-5028-000-0700)

Good morning Simone,

It was a pleasure dealing with you as well. Please considered this email as confirmation to close your business.

Best luck to you, and hope to see you again in our municipality.

Sincerely,

Morelia Rodriguez
Zoning Administrator
Village of Palmetto Bay
Department of Building & Capital Projects
9705 East Hibiscus Street
Palmetto Bay, Florida 33157
P: 305-259-1252
F: 866-927-5576
mrodriguez@palmettobay-fl.gov

From: Simone [mailto:simone@simoneimages.com]
Sent: Friday, June 03, 2016 9:44 AM
To: Morelia Rodriguez
Subject: Business Closure (Folio Number 33-5028-000-0700)

Good morning Morelia,

I will no longer be conducting business in Palmetto Bay as of June 18, 2016. Please close the following account.

Simone Images LLC
Folio Number 33-5028-000-0700
16455 SW 91st Ave
Palmetto Bay, Fl 33157

Thanks again for all your kindness in the past and may God bless you and your family.

Simone

www.simoneimages.com
305.322.7106

SIMONE

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2015
Expiration Date: 9/30/2016

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 10/8/15 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot **Block** **Subdivision**

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2016. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By

Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Attn:

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2015	000011851

Customer No	Payment Due Date
00008623	09/30/2015

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000011851

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2015 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2015 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2015 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2016 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:
SIMONE REID	OWNER	16455 SW 91 AVE PALMETTO BAY 33157	305-322-71

☐ I am no longer conducting business in the Village as of _____
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: OWNER Date: 9/28/15

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/7/2014
Expiration Date: 9/30/2015

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157
PH: 305-259-1271 FAX: 786-338-7432
mrodriguez@palmettobay-fl.gov

Invoice No.
13025

INVOICE

Customer

Name: SIMONE IMAGES LLC
Address: 16455 SW 91 AVE
City: PALMETTO BAY State FL ZIP 33157
Phone:

Misc

Date: 7/15/2015
Order No.:
Due Date: 9/30/2015

Qty	Description	Unit Price	TOTAL
1	Certificate of Use Renewal for fiscal year 2015-2016	$ 32.50	$ 32.50
	A Home Office Certificate of Use is required to be renewed annually as per Village of Palmetto Bay Zoning Code section 30-60.25. If the Certificate has been obtained, please forward a copy for our record. Failure to comply with this section of the code may result in a fine in the amount of $ 250.00.		
		SubTotal	$ 32.50
		Shipping	
	Tax Rate(s)		
		TOTAL	$ 32.50

Payment Select One...

Comments: Any questions, please contact Morelia
Name: SIMONE REID
CC #:
Expires:

Office Use Only

THANK YOU

VILLAGE OF PALMETTO BAY
9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2014	000010064

Customer No	Payment Due Date
00008623	09/30/2014

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000010064

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2014 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2014 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2014 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2015 - 25%	$0.00	$30.00	$7.50	$37.50

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Simone Reid / Simone Images
cc# 4741 6590 0109 3250
Exp: 7/15
Please change [illegible]

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**
Employees : 1
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees:

CONTACTS

Name:	Role / Title:	Address:	Phone:
SIMONE REID	OWNER / [illegible]		305-322-7106

☐ I am no longer conducting business in the Village as of _____ Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: [signature] Officer / Title: SIMONE REID OWNER Date: 9/30/14

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 12/2/2013
Expiration Date: 9/30/2014

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2012
Expiration Date: 9/30/2013

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2012	000006500

Customer No	Payment Due Date
00008623	09/30/2012

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000006500

Business Tax Fee	$30.00
Total Tax Receipt Amt Due	$30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2012 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2012 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2012 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2013 - 25%	$0.00	$30.00	$7.50	$37.50

CHAY A PUZEY REID
SIMONE A REID
16455 SW 91 AVE.
PALMETTO BAY, FL 33157

323
63-751/631 10948
1010115634237

9/25/12
Date

Pay to the Order of VILLAGE OF PALMETTO BAY $ 62.50

SIXTY TWO AND FIFTY 50/100 Dollars

Security Features Details on Back.

WELLS FARGO Wells Fargo Bank, N.A. Florida wellsfargo.com

For SIMONE IMAGES LLC CERT. USE / BUSINESS TAX

Simone Reid

⑆063107513⑆1010115634237⑈00323

and Clarke

ISLAND BREEZES®

Phone Number: (305) 322-7106

Phone Number: (305) 322-7106

Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:

☐ I am no longer conducting business in the Village as of _____
Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: _____ Date: _____

RETURN THIS FORM WITH YOUR PAYMENT

VILLAGE OF PALMETTO BAY

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 10/1/2011
Expiration Date: 9/30/2012

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16455 SW 91 AVE

FINANCE DIRECTOR

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

VILLAGE OF PALMETTO BAY
9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234
license@palmettobay-fl.gov

Business Tax Renewal Notice

License No.	License Description	Expiration Date	Activity No.
B-001984	Business Tax Receipt	09/30/2011	000003329

00008623

Payment Due Date : 09/30/2011

SIMONE IMAGES LLC
16455 SW 91 AVE
PALMETTO BAY, FL 33157

Activity No 000003329
Business Tax Fee $30.00
Total Tax Receipt Amt Due $30.00

PAYMENTS AFTER DUE DATE ARE AS FOLLOWS

	Previous	Current	Penalty	Amt Due
After Oct 01, 2011 - 10%	$0.00	$30.00	$3.00	$33.00
After Nov 01, 2011 - 15%	$0.00	$30.00	$4.50	$34.50
After Dec 01, 2011 - 20%	$0.00	$30.00	$6.00	$36.00
After Jan 01, 2012 - 25%	$0.00	$30.00	$7.50	$37.50

CU #4575

Please update information that has changed

Primary Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

Mailing Address: 16455 SW 91 AVE, PALMETTO BAY, FL 33157 Phone Number: (305) 322-7106

SUPPLEMENTAL INFORMATION:

Bsiness Type: **ADMINISTRATIVE OFFICE(1-10 Emp**

Employees :
Units :
Returned Check Amt :
Returned Check Amt :
Returned Check Amt :
Number of Employees: _____

CONTACTS

Name:	Role / Title:	Address:	Phone:
SIMONE REID	OWNER	16455 SW 91 AVE PALMETTO BAY 33157	305.322.7106

☐ I am no longer conducting business in the Village as of _____ Date

IMPORTANT - PLEASE READ AND SIGN BELOW

I certify the above information is correct:

Signature: _____ Officer / Title: OWNER/ MANAGING MEMBER Date: _____

RETURN THIS FORM WITH YOUR PAYMENT

Village of Palmetto Bay, Florida
Finance Department
9705 East Hibiscus Street
Palmetto Bay, FL 33157
305-259-1234
Welcome

000625-0007 Wanner F. 09/30/2011 10:30AM

LICENSING
SIMONE IMAGES LLC
000003329
B-001984
Business Tax Receipt
Renewal
pendng
2011 Item: 000003329
Balance due: 0.00

Business Tax Fee	30.00
Business Tax Penalty Fee	0.00

SIMONE IMAGES LLC
000004575
Certificate of Use
Application
pendng
2011 Item: 000004575
Balance due: 0.00

Certificate of Use - One Time Fee	32.50
	62.50

Subtotal	62.50
Total	62.50
VISA	62.50
Visa **********0024	
Ref=589463095	
Auth=530148	
Change due	0.00

Paid by: SIMONE A REID

Signature: _____

Thank you for your payment

CUSTOMER COPY

Village of Palmetto Bay

9705 E. HIBISCUS STREET • PALMETTO BAY, FL 33157 • (305) 259-1234

Business Tax Receipt

Issued Date: 2/10/2011
Expiration Date: 9/30/2011

SIMONE IMAGES LLC
16456 SW 91 AVE
PALMETTO BAY, FL 33157

Receipt #: B-001984
Business Type:
ADMINISTRATIVE OFFICE(1-10 Emp
Business Name:
SIMONE IMAGES LLC
Business Address:
16456 SW 91 AVE

Meighan Alexander
VILLAGE CLERK

SUBJECT TO ALL APPLICABLE LAWS • POST IN A CONSPICUOUS PLACE

APPLICATION

Instructions: Please print or type to allow for a more accurate processing of your application.

Name of Business: SIMONE IMAGES LLC DBA SIMONE

Commence Date: 9/8/08

Business Address: 16455 SW 91 AVE

PALMETTO BAY FL 33157

Business Telephone: 305-322-7106 Business Fax: N/A

Please indicate what products will be sold or services rendered:
PHOTOGRAPHIC PRINTS AND PRODUCTS

Please indicate below if this is a new or existing business:

☐ NEW If new, ***please provide a Certificate of Use and/or Certificate of Occupancy issued by the Village of Palmetto Bay.***

☑ EXISTING If existing, ***please provide a copy of the Certificate of Use and/or Certificate of Occupancy issued by Miami-Dade County.***

Name of Business Owner:

SIMONE REID

Social Security #: 593-51-9461 FL Driver's License #: R300-781-75-964-0

Business Owner's Mailing Address:

16455 SW 91 AVE PALMETTO BAY FL 33157

Business Owner's Home Telephone: 305-322-7106

If this business is a proprietorship, please provide the name of the proprietor:

N/A

If this business is a partnership, please provide the names of the partners:

N/A

If this business is a corporation, please provide the names of the officers and their titles in the space provided below:

LLC SIMONE REID MANAGING MEMBER/OWNER

Please submit the corporate documents showing the Federal Identification Number and/or registration as a Corporation/Fictitious name. Please provide proof of approved sanitation services, if applicable.

WILL THIS BUSINESS...

1. Be a professional association?	☐ Yes	☑ No
2. Join an existing office?	☐ Yes	☑ No
3. Have door-to-door service?	☐ Yes	☑ No
4. Operate from a home?	☑ Yes	☐ No
5. Require state licensing?	☐ Yes	☑ No
7. Be licensing fee exempt?	☐ Yes	☐ No
8. Serve liquor?	☐ Yes	☑ No
9. Serve food?	☐ Yes	☑ No
10. Sell tobacco products?	☐ Yes	☑ No
11. Have day or adult care services?	☐ Yes	☑ No
12. Deal with hazardous materials?	☐ Yes	☑ No

If Yes, ***describe the work below.***

PHOTOGRAPHIC PRINTS AND PRODUCTS

GENERAL INFORMATION

Instructions: Please write N/A if the question is not applicable to the type of business you are applying for.

1. What is the gross floor area of the business facility? 192 square feet

Please provide a copy of your lease agreement to verify square footage.

2. What is the number of parking spaces exclusively for this use? N/A regular spaces N/A handicap N/A stroller
3. What is the number of employees including owners and management? Self (1) employees
4. What is the number of coin operated machines at location? (i.e. cigarette, soda, washer, drier, etc..) N/A machines
5. What is the number of units? _____ units

All information provided by the taxpayer will become part of the public records except the SSN, which is protected by the confidentiality law of the State of Florida. If you claim exemption under F.S. 119 for another reason, please indicate in writing and attach to this application.

AFFIDAVIT

State of Florida)

County of Miami-Dade

Simone A. Reid being first duly sworn, deposes and says that: He/she is the (Owner, Partner, Officer, Representative or Agent) Owner of (name of business/applicant) Simone Images, and that matters and facts stated in this application are true to his/her knowledge, and that he/she, in the aforementioned position is authorized to execute this application for the purposes of obtaining an Occupational Licenses from the Village of Palmetto Bay.

Signature

Sworn to and subscribed before me this 8 day of February, 20 11.

Notary Public State of Florida
Ana I Gomez
My Commission DD684431
Expires 06/11/2011

Ana I. Gomez

Print Name and Title Notary Public, State of Florida

My Commission Expires:

6/11/2011

Any questions concerning this application should be referred to the Office of the Village Clerk, 8950 S.W. 152 Street, Palmetto Bay, FL 33157. Hours of operation are 8:30 a.m. through 5:00 p.m. You may also call (305) 259-1234 or fax your questions to (305) 259-1290.

CHECKLIST OF ATTACHMENTS

The following is a checklist of attachments which your application ***may need to have*** in order to be processed. Please attach the required documentation to the application.

- ☐ If new business, attach a Certificate of Use and/or Certificate of Occupancy issued by the Village of Palmetto Bay.
- ☐ If existing business, attach a copy of the Certificate of Use and/or Certificate of Occupancy issued by Miami-Dade County.
- ☐ Proof of approved sanitation services if an eating establishment.
- ☐ Corporate documents showing the Federal Identification Number and registration as a Corporation/Fictitious name.
- ☐ Lease Agreement for Square Footage figures

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
BUILDING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 T 55 R 40

CUC# 2011-0001 Date 2/8/11 Issued by: Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot Block Subdivision

Approved Occupancy Use HOME OFFICE

Inspection Approved : YES Denied:

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2011. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By

Morelia Rodriguez

Title Zoning Officer

Electronic Articles of Organization For Florida Limited Liability Company

L08000085755
FILED 8:00 AM
September 09, 2008
Sec. Of State
lsellers

Article I

The name of the Limited Liability Company is:

SIMONE IMAGES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

8307 SW 142 AVE
MIAMI, FL. US 33183

The mailing address of the Limited Liability Company is:

P.O. BOX 961207
MIAMI, . US 33296

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

LEILA M FEANNY
9874 HAMMOCKS BLVD.
#105
MIAMI, FL. 33196

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: LEILA FEANNY

L08000085755
FILED 8:00 AM
September 09, 2008
Sec. Of State
lsellers

Article V

The name and address of managing members/managers are:

Title: MGRM
SIMONE A REID
8307 SW 142 AVE
MIAMI, FL. 33183 US

Signature of member or an authorized representative of a member

Signature: SIMONE REID

Certificate of Status

I certify from the records of this office that SIMONE IMAGES, LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on September 09, 2008.

The document number of this company is L08000085755.

I further certify that said company has paid all fees due this office through December 31, 2008, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 080910090654-000135505040#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Tenth day of September, 2008

GREAT SEAL OF THE STATE OF FLORIDA
IN GOD WE TRUST

Kurt S. Browning
Secretary of State

Certified Copy

I certify the attached is a true and correct copy of the Articles of Organization of SIMONE IMAGES, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on September 09, 2008, as shown by the records of this office

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L08000085755.

Authentication Code: 080910090654-000135505040#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Tenth day of September, 2008

GREAT SEAL OF THE STATE OF FLORIDA
IN GOD WE TRUST

Kurt S. Browning
Secretary of State

State of Florida

Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of SIMONE, registered with the Department of State on September 10, 2008, as shown by the records of this office.

The Registration Number of this Fictitious Name is G08254900162.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Twenty-fourth day of September, 2008

Kurt S. Browning
Secretary of State

CR2EO22 (01-07)

State of Florida

Department of State

I certify from the records of this office that SIMONE is a Fictitious Name registered with the Department of State on September 10, 2008.

The Registration Number of this Fictitious Name is G08254900162.

I further certify that said Fictitious Name Registration is active.

I further certify that this office began filing Fictitious Name Registrations on January 1, 1991, pursuant to Section 865.09, Florida Statutes.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Twenty-fourth day of September, 2008

Kurt S. Browning
Secretary of State

CR2EO22 (01-07)

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 24, 2008

SIMONE
c/o SIMONE REID
P.O. BOX 961207
MIAMI, FL 33296

Subject: **SIMONE**

REGISTRATION NUMBER: **G08254900162**

This will acknowledge the filing of the above fictitious name registration which was registered on September 10, 2008. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

Reinstatement Section
Division of Corporations

Letter No. 008A00051363

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

DOCUMENT# G08254900162

Fictitious Name to be Registered: SIMONE

Mailing Address of Business: 8307 SW 142 AVE
MIAMI, FL 33183

Florida County of principal place of business: DADE

FEI Number: 26-3328531

FILED
Sep 10, 2008
Secretary of State

Owner(s) of Fictitious Name:

SIMONE IMAGES, LLC
8307 SW 142 AVE
MIAMI, FL 33183 US
Florida Registration Number: L08000085755
FEI Number: 26-3328531

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. I (we) understand that the electronic signature(s) below shall have the same legal effect as if made under oath.

SIMONE REID — 09/10/2008

Electronic Signature(s) — Date

Certificate of Status Requested (X) **Certified Copy Requested (X)**

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 09-10-2008

Employer Identification Number:
26-3328531

Form: SS-4

Number of this notice: CP 575 G

SIMONE IMAGES LLC
SIMONE A REID SOLE MBR
PO BOX 961207
MIAMI, FL 33296

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 26-3328531. 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.

When filing tax documents, payments, and 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. 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.

IMPORTANT REMINDERS:

* Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.**
* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.

(IRS USE ONLY) 575G 09-10-2008 SIMO O 9999999999 SS-4

Keep this part for your records. CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

9999999999

Your Telephone Number
( ) -

Best Time to Call

DATE OF THIS NOTICE: 09-10-2008
EMPLOYER IDENTIFICATION NUMBER: 26-3328531
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

SIMONE IMAGES LLC
SIMONE A REID SOLE MBR
PO BOX 961207
MIAMI, FL 33296

VILLAGE OF PALMETTO BAY
9705 E HIBISCUS ST
PALMETTO BAY, FL. 33157

TERMINAL I.D.: 00021507316430006310 01

MERCHANT #: 731643000631

MASTERCARD
XXXXXXXXXXXX8594
SALE

RECORD #: 13 INV: 000013
DATE: FEB 08, 11 TIME: 16:03
BATCH: 862
AUTH: 757022

TOTAL $30.00

SIMONE A REID

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

MERCHANT COPY

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 10/7/14 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot _____ **Block** _____ **Subdivision** _____

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2015. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By _____

Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157
PH: 305-259-1271 FAX: 786-338-7432
mrodriguez@palmettobay-fl.gov

Invoice No.
11218

INVOICE

Customer

Name SIMONE IMAGES LLC
Address 16455 SW 91 AVE
City PALMETTO BAY State FL ZIP 33157
Phone

Misc

Date 7/15/2014
Order No.
Due Date 9/30/2014

Qty	Description	Unit Price	TOTAL
1	Certificate of Use Renewal for fiscal year 2014-2015 A Home Office Certificate of Use is required to be renewed annually as per Village of Palmetto Bay Zoning Code section 30-60.25. If the Certificate has been obtained, please forward a copy for our record. Failure to comply with this section of the code may result in a fine in the amount of $ 250.00.	$ 32.50	$ 32.50
		SubTotal	$ 32.50
		Shipping	
	Tax Rate(s)		
		TOTAL	$ 32.50

Payment Select One...

Comments Any questions, please contact Morelia
Name SIMONE REID / SIMONE IMAGES
CC # 4741 6590 0109 3250
Expires 7/15

Office Use Only

THANK YOU

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 12/10/13 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot _____ **Block** _____ **Subdivision** _____

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2014. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By _____

Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
PLANNING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 10/2/12 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot _____ **Block** _____ **Subdivision** _____

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2013. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By _____
Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
BUILDING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 10/4/11 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot _____ **Block** _____ **Subdivision** _____

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2012. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By _____

Morelia Rodriguez

Title Zoning Officer

VILLAGE OF PALMETTO BAY
CERTIFICATE OF USE
BUILDING & ZONING DEPARTMENT
9705 EAST HIBISCUS STREET
PALMETTO BAY, FL 33157

Folio No: 33-5028-000-0700

S 28 **T** 55 **R** 40

CUC# 2011-0001 **Date** 2/8/11 **Issued by:** Morelia Rodriguez

Zoning: E-M

Name of Business/DBA SIMONE IMAGES DBA SIMONE

Corporate Officer/Owner SIMONE REID

Business Address 16455 SW 91 AVE

Lot _____ **Block** _____ **Subdivision** _____

Approved Occupancy Use HOME OFFICE

Inspection **Approved :** YES **Denied:**

Remarks

APPROVED FOR ADMINISTRATIVE OFFICE ONLY. THIS CERTIFICATE OF USE IS VALID UNTIL SEPTEMBER 30, 2011. RENEWABLE ANNUALLY. NO EMPLOYEES, NO CUSTOMERS, NO STORAGE, NO SIGNS, NO COMMERCIAL CARS.

The Certificate of Use is issued to the above named Applicant for building at above-named location only upon the express condition that the applicant will abide by and comply with all provision of the Zoning Ordinance and all other applicable Ordinances of Village of Palmetto Bay and the Florida Building Codes pertaining to the erection, construction, alteration, remodeling or use or building or structures.

By _____

Morelia Rodriguez

Title Zoning Officer

Monday 10-12 pm

VILLAGE OF PALMETTO BAY
APPLICATION FOR CERTIFICATE OF USE

Date 2/3/11

Folio No. 33.5028-000.0700
S 28 T 55 R 40.

BUSINESS INFORMATION

Name of Business / DBA SIMONE IMAGES DBA SIMONE
Address 16455 SW 91 AVE
City PALMETTO BAY State FL Zip Code 33157
Telephone 305 322-7106 Fax NONE
Type of Business (describe in detail) PHOTOGRAPHER (IMAGE RETOUCHING)
Home Office ✓ Office ___ Retail ___ Restaurant ___ Apartment ___ Other ___
Previous type of business in location in which you will conduct your business ___

Are you sharing a space with another business ___ Yes X No
If the answer is Yes, please provide the business name and use of the primary business ___

PERSONAL INFORMATION

Corporate Officer/Owner SIMONE REID Title OWNER MANAGING MEMBER
Address 16455 SW 91 AVE
City PALMETTO BAY State FL Zip Code 33157
Phone 305 322-7106 Fax NONE

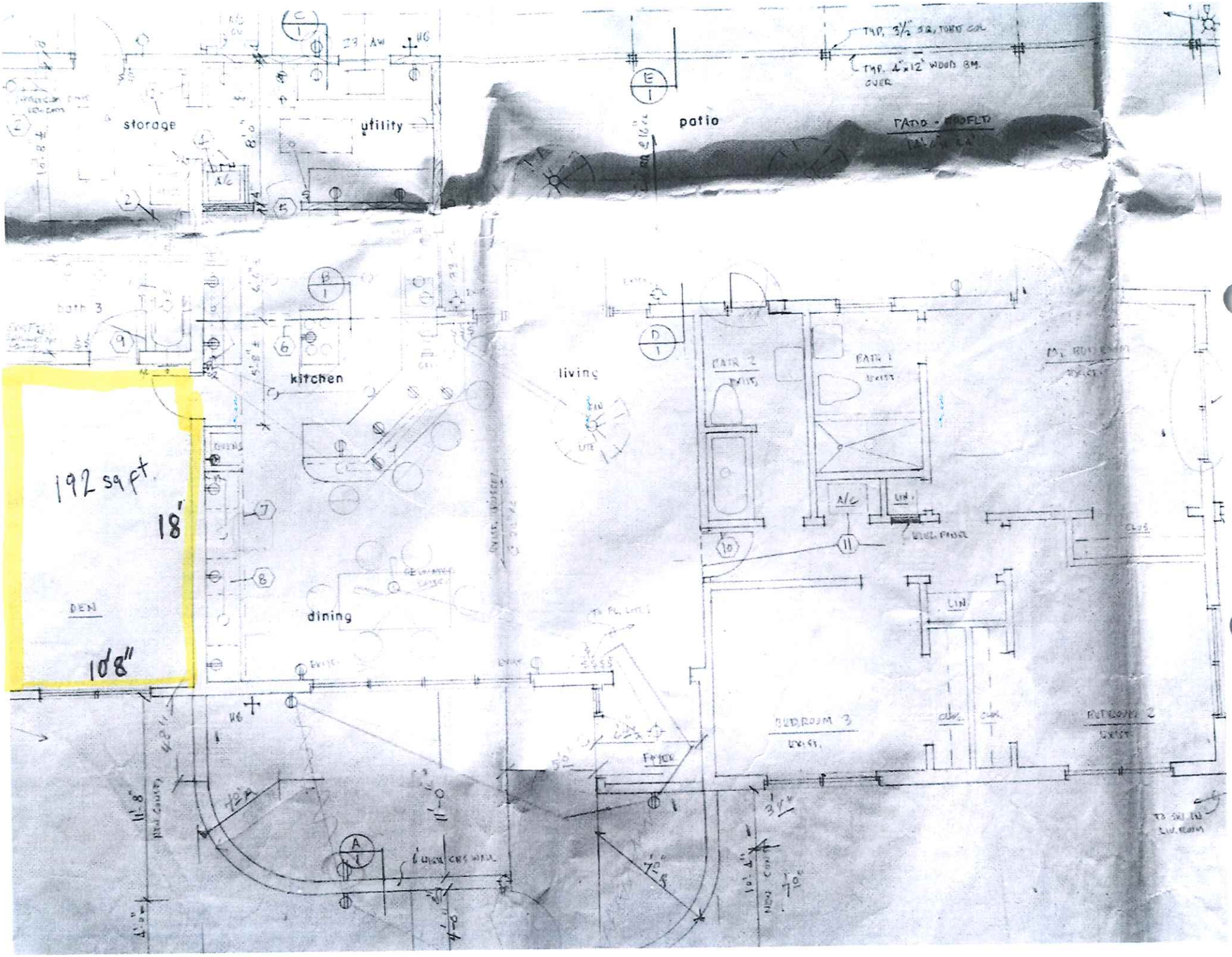
Signature of the applicant verifies the above information is true and correct. I understand the conditions under which the Certificate of Use is being approved and accept that no charges or refunds can be made once issued. I am authorized to sign for the business and understand that any misrepresentation of information on this application may result in the revocation of the CU and / or possible enforcement action being initiated against the business and/or its authorized representative. I further understand that a separate Certificate of Occupancy (if applicable) and Occupational License is also required.

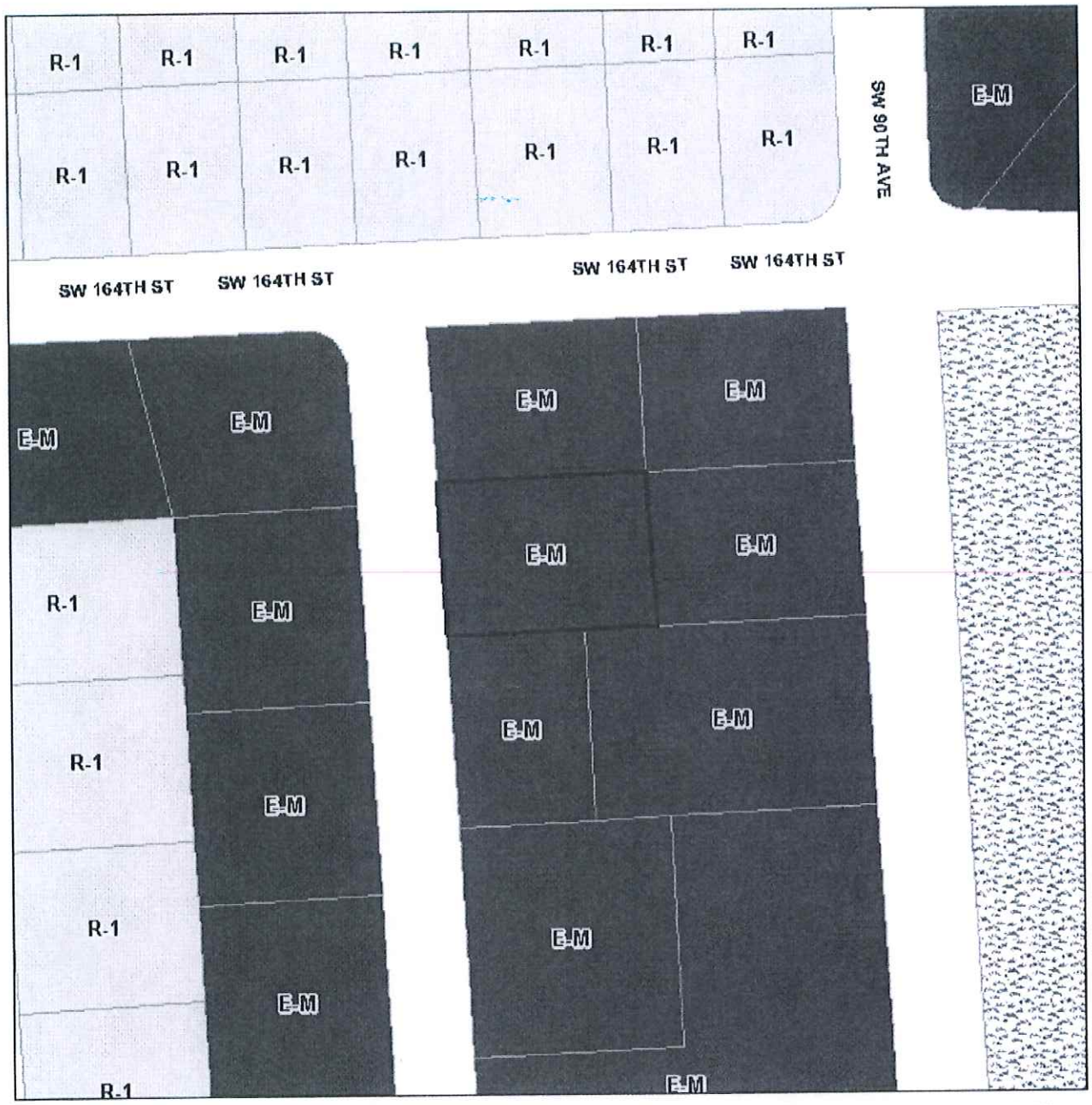
SIMONE REID
Print name

Signature

Department Use Only

Processor ___ Zoning E-M Resolution No. ___
Approved ✓ Denied ___
Conditions under which approved ___
Process No. CUH.2011.0001 Certificate No. ___


storage
utility
patio
bath 3
kitchen
living
dining
BATH 2
BATH 1
BEDROOM 3
192 sq ft.
18'
DEN
10'8"



Summary Details:	
Folio:	3350280000700
Site Address:	16455 SW 91 AVE Bing Maps Street View County Permits by Folio County Permits by Address Property Appraiser Zillow
Mailing Address:	CHAY PUZEY REID SIMONE REID 16455 SW 91 AVE PALMETTO BAY FL 33157

Property Information:	
Beds/Baths:	3 /2
Floors:	1
Living Units:	1
Adj Sq Footage:	1,804
Lot Size:	20,473 SQ FT
Year Built:	1959
Legal Description:	28 55 40 .465 AC W1/2 OF S1/2 OF N2/5 OF E1/2 OF NW1/4 OF SW1/4 OF SE1/4 LESS W25FT FOR R/W OR 10283-1745 0179 F/A/U 30-5028-000-0700 Deed:10283-1745

Sale Information:			
Sale Date:	2 /2010	0 /0	0 /0
Sale Amount:	$300,000	$0	$0
Sale O/R:	27224-4168		

Assessment Information:		
Year:	2010	2009
Land Value:	$108,193	$136,571
Building Value:	$95,155	$102,786
Market Value:	$203,348	$239,357
Assessed Value:	$109,389	$106,514
Homestead Exemption:	$25,000	$25,000
Senior Exemption:	$0	$0
Agricultural Exemption:	$0	$0
Widow Exemption:	$500	$500
Disabled Exemption:	$0	$0
Veteran Exemption:	$0	$0

This instrument was prepared by:
Name:
Address:

(Space reserved for Clerk)

DECLARATION OF USE

In consideration of the issuance of a Certificate of Use, as hereinafter described, the undersigned, as Owner(s) of the property herein legally described, hereby agree and bind myself, or ourselves, and my, or our, heirs, successors and assigns as follows:

The property herein described shall be used for Home Office

On Lot____ Block____ of____
P.B. ____ Pg____ of the public Records of Miami-Dade County, Florida.

Also Known as (Address): 16455 SW 91 AVE PALMETTO BAY FL 33157

This agreement is hereby made and accepted as a condition of the issuance of a Certificate of Use for home office

HOME OFFICES FOR RESIDENTIAL ZONES

REQUIREMENTS:
A home office is permitted as an ancillary use to all lawful residential uses subject to the following limitations:

- The area of the dwelling unit devoted to a home office shall not exceed 200 square feet of the house, including the garage area. (A garage cannot be used as a home office without going through the building permit process to convert the garage into a habitable room)
- The home office cannot be from an accessory building or other structure detached from the residence.
- The home office use must be conducted by a member of the household residing in the dwelling unit, and no person shall be employed at any time in connection with the home office use who is not a member of the household residing in the dwelling unit. (A disabled individual may employ a personal care attendant as necessary to accommodate a home office on the site for the disabled person).
- No sign relating to the home office may be posted or displayed on the site. No vehicle may display any sign that might serve to indicate that the dwelling unit is being used for a home office.
- No customers, venders, clients suppliers or other patrons shall be served in person on the site.
- There shall be no display, manufacturing, distribution, repair or storage of any type of materials, merchandise or other products on the premises.
- There shall be no change in the outside residential character of the building or premises as a result of the home office use, or any visible evidence of business activity.
- More than one (1) home office may be permitted in a dwelling unit if each home office complies with all of the above requirements, and that the combined total square footage of all home office area in the house does not exceed two hundred (200) square feet.

Covenant Running with the Land. It is further understood and agreed that this agreement shall be deemed a covenant running with the land and shall remain in full force and effect and be binding upon the owner, their heirs, successors and assigns until such time as the same bay be released in writing by the Director of the Village of Palmetto Bay and Zoning Department, or the executive officer of the successor of such department or, in the absence of such director or executive officer, by his assistant in charge of the office in his absence.

City Inspection. As further part of this agreement, it is hereby understood and agreed that any official inspector of the Village of Palmetto Bay or its agents duly authorized, may have the privilege at any time during normal working hours of entering and investigating the use of the premises, to determine whether or not the requirements of the Building and Zoning Regulations and the conditions herein agreed to are being complied with.

Enforcement. Enforcement shall be by action again & any parties or person violating, or attempting to violate, any covenants. The prevailing party in any action or suit, pertaining to or arising out of this declaration, shall be entitled to recover, in addition to costs and disbursements allowed by law, such sum as the Court may adjudge to be reasonable for the services of his attorney. This enforcement provision shall be in addition to any other remedies available at law or in equity or both.

Recording This Declaration may be filed of record in the public records of Miami-Dade County Florida.

Witnesses:

Signature

Print Name

Signature

Print Name

Affiant's signature

Print Name Husband

Affiant's signature

Print Name (Wife)

Sworn to and subscribed before me on the 3 day of February 2011
Affiant is personal know to me or has produced FDL. R300-781-75-964-0 as identification.

Notary Public-State Of Florida

My Commission Expires: August 17, 2011

Notary Public State of Florida
Morelia Rodriguez
My Commission DD698833
Expires 08/17/2011

Village of Palmetto Bay
Permit Receipt
RECEIPT NUMBER 00004560

Account number: 00012422

Date: 2/3/2011

Applicant: FRANKLIN HARRY &W SCHOLES

Type: charge # 82666Z

Description: SIMONE REID

Notes:

Permit Number	Fee Description	Amount
CUH-2011-0001	CERTIFICATE OF USE MINIMUM FEE	175.00
	Total:	$175.00

VILLAGE OF PALMETTO BAY
9705 E HIBISCUS ST
PALMETTO BAY, FL. 33157

TERMINAL I.D.: 00021507316430008631001

MERCHANT #: 731643000631

MASTERCARD
**********8594
SALE

RECORD #: 5 INV: 000005
DATE: FEB 03, 11 TIME: 12:47
BATCH: 859 AUTH: 826662

TOTAL $175.00

SIMONE A REID

X

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

MERCHANT COPY

Inspection Schedule for mrodriguez
Scheduled for February 07, 2011

Permit#	Address	Folio	Contractor
CUH-2011-0001	16455 SW 91 AVE	3350280000700	

Owner
FRANKLIN HARRY &W SCHOLES

Description
SIMONE IMAGES DBA SIMONE

Type: 117 CERTIFICATE OF USE (INITIAL INSPECTION) **Time:** 00:00

Notes:

Comments:

Date: 2/7/11 **Signature:**