



## SCHOOL CROSSING GUARD SERVICES

Request for Proposals:  
City of Coconut Creek  
Number: 06-10-20-09



June 10, 2020

Buffy A. Butler  
NEXTAFF  
3810 Inverrary Boulevard  
Suite 205  
Lauderhill, Florida 33319  
954.733.0777 Office  
954.733.0444 Fax  
[www.nextaff.com](http://www.nextaff.com)



## COMPANY PROFILE

**Proposer:** The Butler Group of South Florida, LLC  
d/b/a NEXTAFF

*A Florida Limited Liability Company*

**Proposal:** City of Coconut Creek  
School Crossing Guard Services

**Certifications:** County Business Enterprise  
Minority/Woman-Owned Business

**Headquarters:** 3810 Inverrary Boulevard  
Suite 205  
Lauderhill, Florida 33319  
954.733.0777 Office  
954.733.0444 Fax  
[www.nextaff.com](http://www.nextaff.com)

**Authorized Personnel:** Buffy A. Butler  
954.733.0777  
[bbutler@nextaff.com](mailto:bbutler@nextaff.com)

Delisa Williams  
954.733.0777  
[dwilliams@nextaff.com](mailto:dwilliams@nextaff.com)





## OUR MANAGEMENT TEAM

**Buffy A. Butler**, Managing Member, *FDOT Certified School Crossing Guard Trainer*. With over 25 years' experience in Human Resources and Operations Management, Ms. Butler understands staffing and workflow. She oversees the overall management of the NEXTAFF offices in South Florida. She serves as contract liaison with local municipalities.

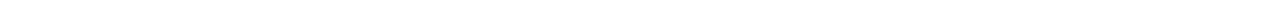
*Ms. Butler was invited by the Administrator of the Florida Crossing Guard Training Program, Ms. Dana Crosby, to take part in the statewide committee meeting to review and update the Florida School Crossing Guard Training (Uniform) Guidelines for 2016 and 2020. Ms. Butler was the only individual from a private company represented. She also served as a presenter and panelist for the rollout of the new guidelines in 2016. Subsequently, Ms. Butler continues to serve on the statewide Guidelines committee that works with the Florida School Crossing Guard Program Administrator, Ms. Crosby. Ms. Butler appears in training videos for school crossing guards and program coordinators. See the links below (more information available on the Florida School Crossing Guard Training Program website).*

<https://fdotxwp02.dot.state.fl.us/crossingguard/coord/links.aspx>

<http://wbt.dot.state.fl.us/ois/FLCGVideo2018pc/FLCGPart2/>

**Delisa S. Williams**, Operations Manager, *FDOT Certified School Crossing Guard Trainer*. Mrs. Williams manages our day-to-day school crossing guard operations and coordinates our training efforts. A former Navy training petty officer, she has extensive knowledge in training and human resources management.

**Elizabeth Cox, Barbara Watson and Paul T. White**, School Crossing Guard Coordinators, *FDOT Certified School Crossing Guard Trainers*. Our coordinators work in the field, overseeing our school crossing guard supervisors and guards.





## QUALIFICATIONS

NEXTAFF helps companies maximize and benefit from strategic workforce planning. Today change is the only constant. Those who remain flexible and adapt quickly can hold the competitive advantage.

As a premier workforce strategies provider, NEXTAFF allows employers to remain flexible. By offering a complete range of employment services, we help companies - no matter where they are in their business evolution - raise productivity through improved strategy, quality, efficiency and cost control across their workforce. With NEXTAFF, companies can concentrate on their core business activities and adapt quickly to changing workforce requirements.

While the need for talent is increasing rapidly in nearly every marketplace, the number of qualified candidates, in many industries, is decreasing. In the U.S. alone, over the next 15 years, the number of available candidates who make up much of the talent pool is expected to decline by 15 percent.

For that reason, it has become critically important for companies to develop a systematic plan and process to put the right talent in the right place at the right time. Those businesses that stand the best chance of overcoming these new market realities are those that are committed to the development and maintenance of a strong and relevant talent acquisition process.

We understand staffing *and* workflow. While our Scope of Services details the specifics of the required work, we realize in the world of school crossing guard services each municipality that we partner with entrusts the entire function of the department to us. Our main responsibilities include:

- Recruiting
- Hiring
- Compensation
- Retention
- Management
- Training
- Safety

We have over twenty (20) Florida Department of Transportation Certified School Crossing Guard Trainers prepared to train and re-certify our school crossing guard team. We re-certify our guards annually during the summer months, for us it is NEXTAFF in Training. We also have a large team of experienced supervisors, team leaders and well in excess of 500 certified (or available for re-certification) school crossing guards.





## EXPERIENCE

Founded in 1998, NEXTAFF has offices in Arizona, California, Colorado, **Florida**, Illinois, Iowa, Kansas, Michigan, Mississippi, Missouri, Nebraska, North Carolina, Oregon, Pennsylvania, South Carolina, Tennessee and Texas. **Our South Florida franchise, which is independently owned and operated, opened in September 2006.**

Since 2006, we have had the opportunity to partner with several South Florida companies providing them with workforce solutions. At NEXTAFF, we realize that talent changes everything, and as a result, we have developed a proprietary formula for identifying, placing and supporting the most qualified candidates for the job.

Counting Dolphin Stadium, now Sun Life Stadium, as one of our first clients, we have provided staffing for the regular National Football League seasons, FEDEX Orange Bowls and the 2007 Super Bowl. Consistently, we have been commended for our people, their conscientiousness and their talent.

In 2007, we were asked to provide security services to a local church with multiple campuses, two schools and over 20,000 congregants. It was there that we had the opportunity to apply our expertise in security and safety services with the church's need to protect and care for the children attending its schools. After much success, we are the church's go to company for security services.

Awarded two contracts with Broward County in 2008, we have provided Broward County with services in general temporary staffing, Information Technology, food services and school crossing guard services.

In 2009, the Town of Davie selected NEXTAFF to administer its school crossing guard program. The Town of Davie was most impressed with the spirit of excellence in which we operated, the immediacy of our response, and the way we seamlessly transitioned between contracts.

We are now proud to call, the Cities of Coconut Creek, Deerfield Beach, Fort Lauderdale, Lighthouse Point, Miramar, North Miami Beach, Oakland Park, Pompano Beach and Wilton Manors; in addition to the Palm Beach Sheriff's Office and the Towns of Davie and Jupiter, clients.

Our crossing guard management approach is fresh and unique. We build teams at NEXTAFF, which in turn helps to lower turnover, improve efficiency, and provides a redundancy in the system to insure complete and solid post coverage at all times. During the past school year, we are proud to report that we had a significant number of guards with perfect attendance, in addition to the fact that most of our guards have been with us since the start of our contracts. Our guards refer their friends and family time and time again for positions within our company. They have a loyalty to NEXTAFF which is unique, and we reward our guards on a regular basis to let them know just how grateful we are for their service.



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**Scheduling and Staffing.** If given the opportunity to serve the City of Coconut Creek again, as your school crossing guard services provider, we would move forward with the following steps.

- Confer with the designated municipal representatives on the set number of posts and/or school crossing guards required for the school crossings within the city's limits, to insure there we are up to date on any changes in the post locations and/or required number of guards. Once confirmed, we will develop a duty roster based on the post requirements.
- We will meet with the individuals currently working as school crossing guards within the city to inform them of any changes to the school crossing guard program.

Successful guards hired by NEXTAFF must possess the following qualifications:

- Good physical condition, including sight, hearing, and ability to move and maneuver quickly to avoid danger from errant vehicles;
- Ability to control a STOP paddle effectively to provide approaching road users with a clear, fully direct view of the paddle's STOP message during the entire crossing movement;
- Ability to communicate specific instructions clearly, firmly, and courteously;
- Ability to recognize potentially dangerous traffic situations and warn and manage students in enough time to avoid injury.
- Mental alertness;
- Neat appearance;
- Good character;
- Dependability; and
- An overall sense of responsibility for the safety of students.

**Training and Certification.** With over 20 certified Florida Department of Transportation School Crossing Guard trainers on staff, we ensure all school crossing guard candidates prior to assuming any post are certified in accordance with Section 316.75 of the Florida Statutes. All guards must successfully complete the following as identified in the Florida School Crossing Guard Training Guidelines.

- Classroom instruction: pass at least 75 percent of the items on the written examination;
  - Practical training: perform each of the duties listed on the performance checklist satisfactorily; and
  - Supervised duty: perform satisfactorily all of the duties listed on the performance checklist in at least the second of two observations, under the following conditions: (1) trainer does not intervene after starting checklist
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entry for an observation, (2) each observation is conducted during a regular shift at a crosswalk to which the guard is as-signed during that shift, (3) observation is continued for at least 30 minutes, or for duration of the guard's shift duty at the crosswalk if it is less than 30 minutes, and (4) if the guard performs crossing duty in both the morning and the afternoon, one observation should be conducted in the morning and the other in the afternoon.

We conduct training sessions regularly for guards to complete the certification and recertification processes to ensure compliance with Florida Department of Transportation School Crossing Guard Program.

**Background Checks and Quality Control.** NEXTAFF reduces hiring risks by providing screening services that are user-friendly and accurate. We have aligned with the nation's leading screening provider to offer our clients the greatest speed, accuracy and technology in the screening industry. We do not believe in a one size fits all philosophy, so, we tailor our screening to our client's needs and requirements. Therefore, **all school crossing guards** will be screened in accordance with your municipality's requirements of a comprehensive background check to include state and national level in addition to sexual predator/offender checks.



NEXTAFF's partner has established a "single blind" Quality Assurance Program for researchers conducting research on behalf of the company. Prior to receiving client research requests, a perspective researcher is given a "blind" sample of criminal research requests with "known records" mixed in. The company has a collection of "known records" for nearly every jurisdiction in the United States. The perspective researcher is required to return the "known records" with 100% accuracy and within an acceptable time frame prior to being placed on the approved list of researchers. Once approved, each researcher is secretly tested each quarter with a "known record" sent along with the standard research request lists. Failure to return the "known record" with 100% accuracy results in removal from the approved list of researchers.

Our partner's custom software system incorporates a quality assurance capability as well. As orders are received and processed electronically or by fax, a second processor must perform a quality assurance audit of the order. As results are received, trained researchers and results specialists perform the initial data entry into our system. These results are not official and not visible to the client until a *second results specialist* reviews the entry and marks it as accurate in the database, thus allowing the result to be visible to the client.

*Note: Re-checks (background screenings) are performed on each guard returning to service at the beginning of each school year.*

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**NEXTAFF employs a telephone answering service, so, calls are answered after hours by a live person.** Calls from school crossing guards are relayed by two methods, one is an immediate dispatch and/or patching to our on-call manager, and then by e-mail giving the status of the call to the office, which is relayed to another manager, so, there is redundancy built into our system.

**Equipment and Appearance.** All school crossing guards employed by NEXTAFF are required to wear a standard uniform, which can be determined by our client. Additionally, guards will be equipped with the following items in accordance with the requirements of the Florida Department of Transportation.

- Retro Reflective Vest
- Whistle
- Retro Reflective Stop Paddle
- Raingear (NEXTAFF provides as standard-issue equipment)

**Employee Tracking and Invoicing:** Invoices can be submitted on a weekly, bi-weekly or monthly basis to your approved Accounts Payable representative. Our payment terms will be set at **Net 30**. Our payroll week runs Monday through Sunday.







## REFERENCES

<b>Company/Agency:</b>	City of Fort Lauderdale
<b>Contact:</b>	Sergeant James McDowell, Traffic Sergeant
<b>Telephone   E-mail:</b>	954.828.6400   JMcDowell2@fortlauderdale.gov
<b>Address:</b>	533 Northeast 13 <sup>th</sup> Street Fort Lauderdale, Florida 33304
<b>Scope of Contract   Cost:</b>	School Crossing Guard Services   \$850,000 Annually
<b>Service Period:</b>	December 2012 – Present
<b>Company/Agency:</b>	City of Oakland Park
<b>Contact:</b>	Ms. Heidi Burnett, Director, Recreation Services
<b>Telephone   E-mail:</b>	954.630.4510   heidib@oaklandparkfl.gov
<b>Address:</b>	3650 Northeast 12 <sup>th</sup> Avenue Oakland Park, Florida 33334
<b>Scope of Contract   Cost:</b>	School Crossing Guard Services   \$256,000 Annually
<b>Service Period:</b>	August 2014 – Present
<b>Company/Agency:</b>	City of Pompano Beach
<b>Contact:</b>	Ms. Kaitlyn Kerr, Recreation Manager
<b>Telephone   E-mail:</b>	954.786.4185   Kaitlyn.Kerr@copbfl.com
<b>Address:</b>	1801 Northeast 6 <sup>th</sup> Street Pompano Beach, Florida 33060
<b>Scope of Contract   Cost:</b>	School Crossing Guard Services   \$610,000 Annually
<b>Service Period:</b>	August 2011 – Present

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**Company/Agency:** Town of Davie  
**Contact:** Ms. Lori Lysfjord, Quartermaster | Office Manager  
**Telephone | E-mail:** 954.693.8200 | lori\_lysfjord@davie-fl.gov  
**Address:** 1230 South Nob Hill Road  
Davie, Florida 33324  
**Scope of Contract | Cost:** School Crossing Guard Services | \$220,000 Annually  
**Service Period:** August 2009 – June 2013; August 2016 - Present

**Company/Agency:** Town of Jupiter  
**Contact:** Captain Michael Barry, District Commander  
**Telephone | E-mail:** 561.746.6201 | 0717@jupiter.fl.us  
**Address:** 210 Military Trail  
Jupiter, Florida 33458  
**Scope of Contract | Cost:** School Crossing Guard Services | \$180,000 Annually  
**Service Period:** August 2010 - Present



**SECTION IV - REQUIRED DOCUMENTS**

**Proposal Requirements Checklist**

Proposer has completed the required documents listed in the checklist below. The required documents shall be executed, notarized (if applicable), and submitted as a condition to this Request for Proposals.

Proposer shall electronically submit all required documents and any other pertinent information electronically through the eBid System.

Required Documents	Yes	No
Proposer Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Proposal Confirmation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Indemnification Clause	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Collusive Affidavit	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Proposer's Qualification Statement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Drug-Free Workplace Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sworn Statement on Public Entity Crimes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Exceptions to the RFP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scrutinized Companies Certification Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Operational Plan – Scope of Services Proposed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Submitted Pricing through the eBid System "Line Items" Tab	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Proposal: (1) Qualifications and Experience (2) Resources and Availability (3) References	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Certificate of Insurance	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Business Tax Receipt	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copies of Valid Licenses	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**PROPOSER INFORMATION**

Communications concerning this proposal shall be addressed to:

Company Name: The Butler Group of South Florida, LLC d/b/a NEXTAFF  
 Social Security/Federal Tax I.D. No.: 41-2133283  
 Proposer's Name (Print): Buffy A. Butler Title: Managing Member  
 Address: 3810 Inverrary Boulevard  
Suite 205  
 City/State/Zip: Lauderhill, Florida 33319  
 Phone: 954.733.0777 Fax: 954.733.0444  
 Email: bbutler@nextaff.com

**ACKNOWLEDGEMENT OF ADDENDA**

**Instructions:** Complete Part I or Part II, Whichever Applies

**Part I:**


Proposer has examined copies of all the Contract Documents and of the following Addenda (receipt of all which is hereby acknowledged).

Addendum No: _____	Dated: _____
Addendum No: _____	Dated: _____
Addendum No: _____	Dated: _____
Addendum No: _____	Dated: _____
Addendum No: _____	Dated: _____

**Part II:**

No Addendum was received in connection with this RFP.

It is understood and agreed by Proposer that the City reserves the right to reject any and all proposals, to make awards on all items or any items according to the best interest of the City, and to waive any irregularities in the proposal or in the proposals received as a result of the RFP. It is also understood and agreed by the Proposer that by submitting a proposal, Proposer shall be deemed to understand and agree that no property interest or legal right of any kind shall be created at any point during the aforesaid evaluation/selection process until and unless a contract has been agreed to and signed by both parties.

  
Proposer's Authorized Signature

June 9, 2020  
Date

Buffy A. Butler  
Proposer's Printed Name

PROPOSAL CONFIRMATION

In accordance with the requirements to provide **School Crossing Guard Services** pursuant to RFP 06-10-20-09, the undersigned submits the attached proposal.

Proposer accepts and hereby incorporates by reference in this proposal all of the terms and conditions of the scope of work, including EPA Standards, Motor Vehicle Safety Standards and required warranty and guarantee certificates.

Proposer is fully aware of the scope of work based on these requirements, the legal requirements (federal, state, county and local laws, ordinances, rules and regulations) and the conditions affecting cost, progress or performance of the work and has made such independent investigation as Proposer deems necessary.

This proposal is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Proposer has not directly or indirectly induced or solicited any other Proposer to submit a false or sham proposal; Proposer has not solicited or induced any person; firm or a corporation to refrain from proposing and Proposer has not sought by collusion to obtain for himself any advantage over any other Proposer or over City.

The Proposer shall acknowledge this Proposal by signing and completing the spaces provided. I hereby submit this Proposal Package for School Crossing Guard Services, RFP No. 06-10-20-09 to the City of Coconut Creek with the full understanding of the Request for Proposal, General Terms and Conditions, Special Terms and Conditions, Detailed Requirements, and the entire Proposal Package.

Buffy A. Butler  
The Butler Group of South Florida, LLC  
Proposer's Name

[Signature]  
Signature

June 9, 2020  
Date

State of: Florida

County of: Broward

The foregoing instrument was acknowledged before me this 9th day of June, 2020, by Buffy A. Butler, who is (who are) personally known to me or who has produced [Signature] as identification and who did (did not) take an oath.

[Signature]  
Notary Public Signature

\_\_\_\_\_  
Notary Name, Printed, Typed or Stamped

Commission Number: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



CITY OF COCONUT CREEK  
SCHOOL CROSSING GUARD SERVICES  
RFP NO. 06-10-20-09

SCHEDULE OF PROPOSAL PRICES

PROPOSER SHALL SUBMIT PRICES ELECTRONICALLY  
THROUGH THE EBID SYSTEM "LINE ITEMS" TAB

WWW.COCONUTCREEK.NET/PURCHASING

PROPOSED PRICING

DESCRIPTION	HOURLY CHARGE
Charge Per Guard	\$ 14.89 /hour
Charge Per Supervisor	\$ 14.89 /hour

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**VISA Credit Card – Payment Method:**

The City of Coconut Creek has implemented a Visa Procurement Card (P-Card) Program through SunTrust Bank. The City's preference is to pay for goods/services with the P-Card. This program allows the City to expedite payment to our vendors. Some of the benefits of the P-Card Program to the vendor are: payment received within 72 hours of receipt and acceptance of goods, reduced paperwork, issue receipts instead of generating invoices, resulting in fewer invoice problems, deal directly with the cardholder (in most cases).

Vendors accepting payment by the P-Card may not require the City (Cardholder) to pay a separate or additional convenience fee, surcharge or any part of any contemporaneous finance charge in connection with a transaction. Such charges are allowable, however must be included in the total cost of their response. Vendors are not to add notations such as "+3% service fee" in their response. All responses shall be inclusive of any and all fees associated with the acceptance of the P-Card.

Vendors agreeing to accept payment by P-Card must presently have the capability to accept Visa or take whatever steps necessary to implement the ability before the start of the agreement term.

## Purchasing Card Acceptance



### Why You Should Accept City of Coconut Creek's Purchasing Card

#### The Challenge

To optimize working capital, buying organizations are requesting that their suppliers accept purchasing cards for payment. By replacing their paper-based accounts payable process with an electronic purchasing card solution, buyers reduce their overall payables cost and suppliers reduce their collection expenses. As a supplier you will be able to accept credit card payments while minimizing your acceptance costs.

#### The Solution

We would like for you to begin accepting the SunTrust Purchasing Card. Payments made with a purchasing card provide faster receipt of funds, as they are deposited electronically to your checking account. We have partnered with SunTrust to negotiate preferred product and pricing solutions that fit the needs of Business-to-Business (B2B) purchasing card acceptance.

#### Here's How It Works

SunTrust will provide a computer-based solution that allows you to get the best effective rate for B2B card acceptance. A computer-based application is necessary to authorize and settle transactions at the best available interchange rate, as typical point-of-sale terminals do not have the capability to send the additional required enhanced data with the purchasing card transactions.

#### What's In It For You

With our B2B solution you will receive payments quicker than through the manual paper-based process. You can also:

- Achieve cost reductions in mail handling, depositing payments and collection
- Have your funds deposited electronically
- Receive payments faster and improved cash flow
- Gain greater visibility to manage cash flow through online reporting
- Increase accounting efficiency
- Receive competitive processing rates and fees
- Eliminate returned or lost checks processing and related expenses
- Experience reduced potential for fraud than with check payments
- Decrease days sales outstanding

#### City of Coconut Creek Preferred Supplier Acceptance Pricing

We have created a program to allow you to qualify at the best effective rates either by software or through a web-based solution.

Visa® Rate	Purchase Card Level 2	Purchase Card Level 3	Large Ticket Rate
*Interchange Rate	2.00% + \$0.05	1.80% + \$0.10	1.45% + \$35.00
*Assessment Fee	0.0925%	0.0925%	0.0925%
SunTrust Merchant Services Fee	0.20%	0.20%	0.20%
*Effective Rate	2.33%	2.13%	1.78%

\*Rate provided by Visa

**Purchase Level 2**

To qualify for the Visa Level 2 Interchange Rates, the sales tax amount must be reported and the value must be greater than zero.

**Purchase Level 3**

To qualify for the Visa Level 3 Interchange Rate, Level 3 data (Item description, product code, quantity, unit of measure and commodity code) must be reported. If the Sales tax is not applied, a value of zero (0.00) is required.

**Purchase Large Ticket**

To qualify for the Visa Large Ticket Interchange Rate, Level 2 and Level 3 data must be reported. Any transaction greater than \$6,980 that has the required data elements will qualify for the Visa Large Ticket Rate.

**City of Coconut Creek Preferred Product Solution Pricing**

Type	Solution Name	Price
Software-based Application	Payment Software	Set-up (one-time): Waived Monthly Access: \$0.00 Per Transaction:\$0.00
Internet-based Solution	Global Gateway e4	Set-up (one-time): Waived Monthly Access: \$9.95 Per Transaction:\$0.05

**Value-Added Services**

- Preferred Supplier status
- Set preferred processing fees for B2B acceptance
- No cost computer application
- No set-up fee
- No early termination fees
- Online reporting

**Supplier Sign-Up:**

To begin the supplier enrollment process, please call 855.468.0317.



**INDEMNIFICATION CLAUSE**

(Page 1 of 1)

The parties agree that one percent (1%) of the total compensation paid to Contractor for the work of the contract shall constitute specific consideration to Contractor for the indemnification to be provided under the Contract. The Contractor shall indemnify and hold harmless the City Commission, the City of Coconut Creek, and its agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the performance of the work provided that any such claim, damage, loss or expense (1) is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property (other than the work itself) including the loss of use resulting therefrom, and (2) is caused in whole or in part by any negligent act or omission of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder.

In any and all claims against the City, or any of their agents or employees by any employee of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation under this Paragraph shall not be limited in any way by any limitation on this amount or type of damages compensation or benefits payable by or for the Contractor or any subcontractor under Workers' Compensation Acts, Disability Benefit Acts or other Employee Benefit Acts. Nothing in this section shall affect the immunities of the City pursuant to Chapter 768, Florida Statutes, as amended from time to time, nor shall it constitute an agreement by the City to indemnify Contractor, its officers, employers, subcontractors or agents against any claim or cause of action. This section shall not be construed as consent to be sued by any third parties in any matter arising out of this Agreement. The foregoing indemnification and release shall survive the termination of this Agreement.

Buffy A. Butler  
Contractor's Name

[Signature]  
Signature

June 9, 2020  
Date

State of: Florida

County of: Broward

The foregoing instrument was acknowledged before me this 9th day of June, 2020, by Buffy A. Butler, who is (who are) personally known to me or who has produced \_\_\_\_\_ as identification and who did (did not) take an oath.

[Signature]  
Notary Public Signature

Notary Name, Printed, Type and Stamped

Commission Number:

My Commission Expires:



NON-COLLUSIVE AFFIDAVIT

State of Florida )

County of Broward )

)ss.


Buffy A. Butler

being first duly sworn, deposes and says that:

- (1) He/she is the Managing Member (Owner)  
(Owner, Partner, Officer, Representative or Agent)  
of The Butler Group of South Florida, LLC the Proposer that has submitted the attached proposal;
- (2) He/she is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such proposal;
- (3) Such proposal is genuine and is not a collusive or sham proposal;
- (4) Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Proposer, firm, or person to submit a collusive or sham proposal in connection with the work for which the attached proposal has been submitted; or to refrain from bidding in connection with such work; or have in any manner, directly or indirectly, sought by agreement or collusion, or communication, or conference with any Proposer, firm or person to fix the price or prices in the attached proposal of any other Proposer, or to fix an overhead, profit, or cost elements of the proposal price or the proposal price of any other Proposer, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed work;
- (5) The price or prices quoted in the attached proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Proposer or any other of its agents, representatives, owners, employees or parties in interest, including this affiant.

Signed, sealed and delivered  
in the presence of:

\_\_\_\_\_  
\_\_\_\_\_

By: 

Buffy A. Butler  
(Printed Name)

Managing Member  
(Title)

ACKNOWLEDGEMENT

State of Florida

County of Broward

The foregoing instrument was acknowledged before me this 9th day of June, 2020,  
by Buffy A. Butler, who is personally known to me or who has produced  
\_\_\_\_\_ as identification and who did (did not) take an oath.

WITNESS my hand and official seal



NOTARY PUBLIC



(Name of Notary Public: Print, Stamp, or  
Type as Commissioned.)

## PROPOSER'S QUALIFICATION STATEMENT

In order to properly evaluate the proposal submittals, Proposers are expected to complete the questionnaire and include the following documentation. By attesting to this submittal, Proposer guarantees the truth and accuracy of all statements and answers herein contained.

SUBMITTED TO: City of Coconut Creek  
Purchasing and Contracts Division  
4800 West Copans Road  
Coconut Creek, FL 33063

Submitted By: The Butler Group of South Florida, LLC d/b/a NEXTAFF  
Name: Buffy A. Butler  
Address: 3810 Inverrary Boulevard, Suite 205  
City, State, Zip Lauderhill, Florida 33319  
Telephone No. 954.733.0777  
Fax No. 954.733.0444

Check One

- Corporation  
 Partnership  
 Individual  
 Other

1. State the true, exact, correct and complete name of the partnership, corporation, trade or fictitious name under which you do business and the address of the place of business.

The correct name of the Proposer is: The Butler Group of South Florida, LLC  
d/b/a NEXTAFF

The address of the principal place of business is: 3810 Inverrary Boulevard, Suite 205  
Lauderhill, Florida 33319

2. If Proposer is a corporation, answer the following:

- a. Date of Incorporation: 2004  
b. State of Incorporation: Florida  
c. President's Name: Buffy A. Butler  
d. Vice President's Name: N/A  
e. Secretary's Name: N/A  
f. Treasurer's Name: N/A  
g. Name and Address of Resident Agent: Buffy A. Butler

3. If Proposer is an individual or a partnership, answer the following:

- a. Date of Organization: N/A  
b. Name, Address and Ownership Units of all Partners: N/A  
\_\_\_\_\_  
c. State whether general or limited partnership: N/A

4. If Proposer is other than an individual, corporation or partnership, describe the organization and give the name and address of principals:

Not applicable.

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5. If Proposer is operating under a fictitious name, submit evidence of compliance with the Florida Fictitious Name Statute.

6. How many years has your organization been in business under its present business name? 16

- a. Under what other former name has your organization operated?

None.

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7. Indicate registration, license numbers or certificate numbers for the businesses or professions, which are the subject of this proposal. Please attach certificate of competency and/or state registration.

Florida Limited Liability Company: Document Number L04000024993

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8. Litigation/Judgments/Settlements/Debarments/Suspensions:  
Submit information on any pending litigation and any judgments and settlements of court cases relative to providing School Crossing Guard Services that have occurred within the last three (3) years. Also indicate if your firm has been debarred or suspended from bidding or proposing on a procurement project by any government during the last five (5) years.

None.

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9. Have you ever failed to complete any work awarded to you? If so, state when, where and why?

No.

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10. List the pertinent experience of the key individuals of your organization (continue on insert sheet, if necessary).

Buffy A. Butler - 25+ years experience in operations and human resources

management. Delisa S. Williams - 25+ years experience in training and operations

management.

---

11. State the name of the individual(s) and titles who will personally supervise the work:

Buffy A. Butler, Managing Member | Delisa S. Williams, Operations Manager

12. State the name and address of the attorney, if any, for the business of the Proposer:

Law Offices of Johnny A. Gaspard

Miami Lakes, Florida

13. State the names and addresses of all businesses and/or individuals who own an interest of more than five percent (5%) of the Proposer's business and indicate the percentage owned of each such business and/or individual:

None.

14. State the names, addresses and the type of business of all firms that are partially or wholly owned by Proposer:

None.

15. State the name of Surety Company which will be providing the bond, and the name and address of agent:

Not applicable.

16. List the following information concerning all Proposer's contracts in progress as of the date of submission and completed projects over the last five (5) years. (In case of any co-venture, list the information for all co-ventures.)

<u>Name of Project</u>	<u>Owner</u>	<u>Total Contract Value</u>	<u>Contracted Date of Completion</u>	<u>% of Completion to Date</u>
City of Pompano Beach Parks Department		\$610,000	2021	80
Town of Davie	Police Department	\$220,000	2021	80
Town of Jupiter	Police Department	\$180,000	2022	67

17. Have you personally inspected the site of the proposed work?

Yes  No

18. Do you have a complete set of documents, including drawings and addenda, if applicable?

Yes  No

19. Did you attend the pre-proposal conference if any such conference was held?

Yes  No  No Conference Held

20. Bank References:

Bank	Address/City/State/Zip	Telephone
TD Bank	Lauderhill, Florida 33319	954.746.6668

The Proposer acknowledges and understands that the information contained in response to this Qualification Statement shall be relied upon by City in awarding the contract and such information is warranted by Proposer to be true. The discovery of any omission or misstatement that materially affects the Proposer's qualifications to perform under the contract shall cause the City to reject the proposal, and if after the award, to cancel and terminate the award and /or contract.

  
\_\_\_\_\_  
Proposer's Signature

June 9, 2020  
\_\_\_\_\_  
Date

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**ACKNOWLEDGEMENT  
PROPOSER'S QUALIFICATION STATEMENT**

State of Florida

County of Broward

On this the 9th day of June, 2020, before me, the undersigned Notary Public of the State of Florida, Personally appeared

Buffy A. Butler And  
*(Name(s) of individual(s) who appeared before notary)*

whose name(s) is/are Subscribed to within the instrument, and he/she/they acknowledge that he/she/they executed it.

WITNESS my hand and official seal.

NOTARY PUBLIC

SEAL OF OFFICE:

NOTARY PUBLIC, STATE OF FLORIDA



*(Name of Notary Public, Print, Stamp, or Type as Commissioned)*

- Personally known to me, or
- Produced identification

*(Type of Identification Produced)*

- DID take an oath, or
- DID NOT take an oath



**DRUG-FREE WORKPLACE FORM**

The undersigned vendor in accordance with Section 287.087, Florida Statutes as may be amended from time to time, hereby certifies that The Butler Group of South Florida, LLC d/b/a NEXTAFF does:  
(Name of Business)

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of *Florida Statutes*, Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

  
\_\_\_\_\_  
Proposer's Signature

The Butler Group of South Florida, LLC  
Company Name

June 9, 2020  
Date

**SWORN STATEMENT  
ON PUBLIC ENTITY CRIMES  
UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a).**

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted with RFP No. 96-10-20-09 for School Crossing Guard Services.
2. This sworn statement is submitted by The Butler Group of South Florida, LLC (name of entity submitting sworn statement) whose business address is 3810 Inverrary Boulevard, Suite 205, Lauderhill, Florida 33319 and (if applicable) its Federal Employer Identification Number (FEIN) is 41-2133283. (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: N/A.)
3. My name is Buffy A. Butler and my  
(Please print name of individual signing)  
relationship to the entity named above is Managing Member.
4. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, includes but is not limited to:
  1. A predecessor or successor of a person convicted of a public entity crime: or
  2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.
7. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision

of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, who are active, or who have been active, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity within the last five (5) years of this sworn statement.

8. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **Please check all statements that are applicable.**
- Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
  - The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND (Please indicate which additional statement applies.)
  - There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
  - The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)
9. Based on information and belief, the statement that I have marked below is true in relation to the entity submitting this sworn statement. **Please check if statement is applicable.**
- The person or affiliate has not been placed on the convicted vendor list.  
(If the box is not checked, please describe any action taken by or pending with the Department of General Services.)
10. The herein sworn statement shall be subject to and incorporate all the terms and conditions contained in Section 287.133 of the Florida Statutes.
11. Conviction of a public entity crime shall be cause for disqualification.

The Butler Group of South Florida, LLC d/b/a NEXTAFF  
Proposer's Name

[Signature]  
Signature

Date: June 9, 2020

State of: Florida

County of : Broward

The foregoing instrument was acknowledged before me this 9th day of June, 2020, by Buffy A. Butler, who is (who are) personally known to me or who has produced \_\_\_\_\_ as identification and who did (did not) take an oath.

[Signature]

Notary Public Signature

Notary Name, Printed, Typed or Stamped

Commission Number: \_\_\_\_\_



My Commission Expires: \_\_\_\_\_



**SCRUTINIZED COMPANIES  
CERTIFICATION PURSUANT TO  
FLORIDA STATUTE § 215.4725 AND § 215.473**

I, Buffy A. Butler, on behalf of The Butler Group of South Florida, LLC,  
Print Name Company Name

certifies that The Butler Group of South Florida, LLC d/b/a NEXTAFF does not:  
Company Name

1. Participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has not engaged in business operations in Cuba or Syria.

  
Signature

Managing Member  
Title

954.733.0777  
Phone

June 9, 2020  
Date



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/10/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Gibbs Insurance LLC 1351 Sawgrass Corporate Pkwy, Ste 102 Sunrise FL 33323		<b>CONTACT NAME:</b> Gibbs Insurance LLC <b>PHONE (A/C, No, Ext):</b> (954) 581-7740 <b>FAX (A/C, No):</b> (954) 584-9875 <b>E-MAIL ADDRESS:</b> agencybiz@rickgibbspa.com <b>PRODUCER CUSTOMER ID #:</b> 00008160	
<b>INSURED</b> The Butler Group Of South Florida dba Nextaff 3810 Inverrary Blvd Ste 205 Lauderhill FL 33319		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Underwriters at Lloyd's, London <b>INSURER B:</b> Progressive Express Insurance <b>10193</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** CL1162900599                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>						
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X		MPL420064519	6/29/2019	6/29/2020	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b>						
	<input checked="" type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS	X		04167678-2	10/04/2019	10/04/2020	BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS					PROPERTY DAMAGE (Per accident) \$	
	<input type="checkbox"/> NON-OWNED AUTOS					\$	
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE \$
	<b>EXCESS LIAB</b>						AGGREGATE \$
	DEDUCTIBLE						\$
	RETENTION \$						\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				WC STATUTORY LIMITS \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						OTHER \$
A	<b>Professional Liability</b>						E.L. EACH ACCIDENT \$
	<b>Sexual Abuse/Misconduct</b>						E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
				MPL420064519	6/29/2019	6/29/2020	Each Claim/Aggregate Limit \$3,000,000
				MPL420064519	6/29/2019	6/29/2020	Aggregate Limit (shared Limit with PL) \$1,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Certificate Holder is named as Additional Insured with respects to general liability, when required by a written contract.

Certificate Holder is named as Additional Insured with respects to automobile liability

<b>CERTIFICATE HOLDER</b>  City of Coconut Creek 4800 West Copans Road Coconut Creek, FL 33063  	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  Amanda Chase/MEGAN <span style="float: right;">Amanda Chase</span>
--	--

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/24/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: J Smith Lanier & Co Columbus 200 Brookstone Centre Pkwy Suite 118 Columbus, GA 31904
CONTACT NAME: Sherry Word
PHONE (A/C, No, Ext): 706-324-6671
FAX (A/C, No): 706-571-9420
E-MAIL ADDRESS: sword@jsmithlanier.com
INSURER(S) AFFORDING COVERAGE: INSURER A: Great American Alliance Insurance Co. NAIC #: 26832

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL/SUBR INSR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Includes rows for Commercial General Liability, Automobile Liability, Umbrella Liab, and Workers Compensation and Employers' Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Named Insured: Malone Nextaff, LLC dba Nextaff

CERTIFICATE HOLDER CANCELLATION

City of Coconut Creek 4800 West Copans Blvd Coconut Creek, FL 33063-0000
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE



**CITY OF LAUDERHILL  
ANNUAL CERTIFICATE OF USE**

To engage in or manage the business occupation listed below  
From October 1, 2019 expires September 30, 2020  
[www.lauderhill-fl.gov](http://www.lauderhill-fl.gov)

**Name of Business**

**Business Number**  
18478

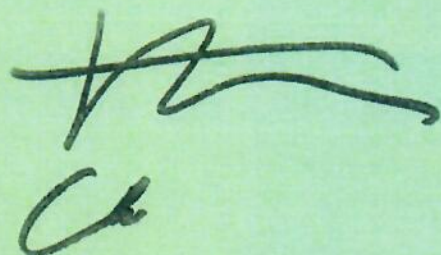
**NEXTAFF  
3810 INVERRARY BLVD #205  
LAUDERHILL , FL 33319**

**Business Classes**

Description	Current	Total
ANNUAL FIRE COMMERCIAL	155.43	0.00
OFFICE SPACE - BUSINESS USE ONLY	201.02	0.00
BUSINESS DEVELOPMENT FEE	27.56	0.00

**Business Address: 3810 INVERRARY BLVD APT 205**

**It is your responsibility to renew your Certificate of Use on or before Sept. 30<sup>th</sup> of each year. This certificate of use must be conspicuously displayed to the public view inside (near cash register or entrance) at the business location, except for rental units which do not have an on-site business office.**



## BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000

VALID OCTOBER 1, 2019 THROUGH SEPTEMBER 30, 2020

**Business Name:** DBA: NEXSTAFF  
BUTLER GROUP OF S FL LLC THE

**Receipt #:** 327-11300  
**Business Type:** BUSINESS/FINANCIAL/CONSULTANT  
(STAFFING AGENCY)

**Owner Name:** BUFFY A BUTLER  
**Business Location:** 3810 INVERRARY BLVD STE 205  
LAUDERHILL

**Business Opened:** 08/14/2006  
**State/County/Cert/Reg:**  
**Exemption Code:**

**Business Phone:**

Rooms	Seats	Employees	Machines	Professionals		
		2				
For Vending Business Only						
	Number of Machines:			Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	0.00	0.00	0.00	33.00

### THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

#### THIS BECOMES A TAX RECEIPT

#### WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

#### Mailing Address:

BUTLER GROUP OF S FL LLC THE  
3810 INVERRARY BLVD STE 205  
LAUDERHILL, FL 33319

**Receipt #** 1CP-18-00009413  
**Paid** 07/12/2019 33.00  
**07/11/2019 Effective Date**

**2019 - 2020**

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000024993

**Entity Name:** THE BUTLER GROUP OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

3810 INVERRARY BOULEVARD  
SUITE 205  
LAUDERHILL, FL 33319

**FILED**  
**Feb 19, 2020**  
**Secretary of State**  
**3376674951CC**

**Current Mailing Address:**

3810 INVERRARY BOULEVARD  
SUITE 205  
LAUDERHILL, FL 33319 US

**FEI Number: 41-2133283**

**Certificate of Status Desired: No**

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

BUTLER, BUFFY A  
3810 INVERRARY BOULEVARD  
SUITE 205  
LAUDERHILL, FL 33319 US

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

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BUTLER, BUFFY A  
Address 3810 INVERRARY BOULEVARD  
SUITE 205  
City-State-Zip: LAUDERHILL FL 33319

*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: BUFFY A BUTLER**

**MGRM**

**02/19/2020**

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

\_\_\_\_\_  
Date

# APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G19000048117

Fictitious Name to be Registered: NEXTAFF

Mailing Address of Business: 3810 INVERRARY BOULEVARD  
SUITE 205  
LAUDERHILL, FL 33319

Florida County of Principal Place of Business: MULTIPLE

FEI Number: 41-2133283

**FILED**  
**Apr 17, 2019**  
**Secretary of State**

Owner(s) of Fictitious Name:

THE BUTLER GROUP OF SOUTH FLORIDA, LLC  
3810 INVERRARY BOULEVARD, SUITE 205  
LAUDERHILL, FL 33319  
Florida Document Number: L04000024993  
FEI Number: 41-2133283

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

\_\_\_\_\_  
BUFFY A. BUTLER

\_\_\_\_\_  
04/17/2019

Electronic Signature(s)

Date

Certificate of Status Requested ( )

Certified Copy Requested ( )

**STATE OF FLORIDA  
DEPARTMENT OF TRANSPORTATION**

**FLORIDA SCHOOL CROSSING GUARD TRAINING PROGRAM**

*This is to certify that*

***Buffy A. Butler***

---

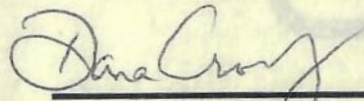
*has successfully completed the  
training and is a certified*

***Florida School Crossing Guard Trainer***

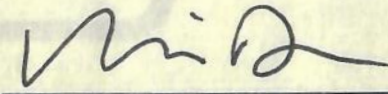
**October 10, 2018**

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Date



**Dana Crosby**  
Program Administrator  
Florida School Crossing Guard Training Program



**Mike Dew**  
Secretary of Transportation

**STATE OF FLORIDA  
DEPARTMENT OF TRANSPORTATION**

**FLORIDA SCHOOL CROSSING GUARD TRAINING PROGRAM**

*This is to certify that*

*Delisa S. Williams*

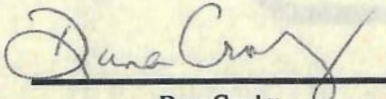
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*has successfully completed the  
training and is a certified*

*Florida School Crossing Guard Trainer*

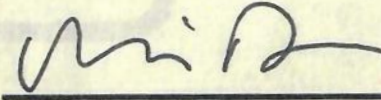
October 10, 2018

Date

  
\_\_\_\_\_

Dana Crosby  
Program Administrator  
Florida School Crossing Guard Training Program



  
\_\_\_\_\_

Mike Dew  
Secretary of Transportation