



NORTH BROWARD HOSPITAL DISTRICT (NBHD) DBA BROWARD HEALTH LOBBYING REGISTRATION FORM

(SEE BACK FOR INSTRUCTIONS)

For what purpose are you using this form?
 New Registration Change to Profile Renewal

To which fiscal year does this form apply? 20 23

LOBBYIST:
Stein Richard Alan
 Last Name First Name Middle

1650 N. Mills Ave Apt. 357 Orlando, FL 32803
 Mailing Address

Richard.stein@icloud.com
 Email Address

(305) 798-5964 (305) 798-5964
 Office Number Cell Number

Syncos iHealth
 Lobbying Firm on behalf of which lobbyist is representing principal (if any)

500 Atrium Drive Somerset, NJ 08876
 Lobbying Firm's Mailing Address

(919) 876-9300
 Telephone Number

Do you have any direct or indirect business association, partnership, or financial relationship or live in the same household with or are related to any Broward Health Board Member, Board Committee Member, employee, or agent?
 No Yes. State with whom and explain: _____

Have you ever been an employee of Broward Health? No Yes,

Title _____ Date of Employment _____ Date of Separation _____

Have you ever served as an NBHD Commissioner or on a Commission Sub-Committee?
 No Yes,
 Date of Service _____ Date of Separation _____

OATH

I do solemnly swear that all the foregoing facts are true and correct.

Richard Stein

Original Signature of Lobbyist

Provide the names, business address, telephone number and area of interest of each principal represented.

PRINCIPAL #1 Syncos Health
 Principal Name
500 Atrium Drive Somerset, NJ 08876
 Principal Mailing Address

(919) 876-9300
 Principal Telephone Number

 Areas of Interest/General & Specific Subject Matter

PRINCIPAL #2 _____
 Principal Name

 Principal Mailing Address

()
 Principal Telephone Number

 Areas of Interest/General & Specific Subject Matter

PRINCIPAL #3 _____
 Principal Name

 Principal Mailing Address

()
 Principal Telephone Number

 Areas of Interest/General & Specific Subject Matter

STATE OF FLORIDA
COUNTY OF Orange
 Sworn to (or affirmed) and subscribed before me this 23 day of June, 2022 by Richard A. Stein

Richard A. Stein
 (Signature of Notary Public - State of Florida)

Amanda Barngrover
 (Print, Type, or Stamp Commissioned Name of Notary Public)

AMANDA BARNGROVER
 Notary Public - State of Florida
 Commission # HH 134449
 My Comm. Expires May 25, 2025
 Bonded through National Notary Assn.

Personally Known _____ OR Produced Identification

Type of Identification Produced FL/DL

Principal Authorization Form

Authorization to Represent the Principal


Type or print the principal represented and name of lobbyist as they are shown on the registration form, also, describe the main business. This authorization to represent the principal before the North Broward Hospital District dba Broward Health for this lobbyist will be carried forward each calendar year if the renewal form submitted by this lobbyist indicates "yes" to renew for the next year. Cancellation of a lobbyist's registration by the principal must be provided by written notice. Cancellation forms can be found at www.browardhealth.org

SYNLOS HEALTH
Principal Name

hereby authorizes

RICHARD STEIN
Lobbyist's Name

PHARMACEUTICALS
Description of Principal's Main Business


Signature of Principal or Principal's Representative

JAIME ANGULO NBD
Print Principal Name / Principal's Representative

NATIONAL BUSINESS DIRECTOR
Print Title of Principal / Principal's Representative

8/1/22
Date

Attach this authorization to your registration form.