

**Notice Pursuant to
Section 394.90825, Florida Statutes**

I, the undersigned, serve as a Director on the Board of Directors of SFBHN, and/or on a related committee of the Board.

I have reviewed the agenda for the upcoming **Board of Directors Meeting** scheduled for **09-19-2025** and have determined that I do _____ / do not _____ have a conflict of interest as defined under Section 394.90825, Florida Statutes and included in the Conflict of Interest (Exhibit A) of the SFBHN Bylaws (see attached language from Exhibit A).

A new law, Section 394.90825, Florida Statutes, which became effective July 1, 2021, requires that I disclose to SFBHN any contract(s) or relationships that may reasonably be construed as a statutory conflict of interest under such new law. This document satisfies such disclosure required by Section 394.90825, Florida Statutes. Please acknowledge receipt and return a copy to me.

Name:

Title:

Date:

SOUTH FLORIDA BEHAVIORAL HEALTH NETWORK, INC. acknowledges receipt of the above notice.

Name:

Title:

Date:

