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LOBBYIST REGISTRATION STATEMENT

You must file this statement with the Office of the County Clerk if you are an individual who for pay or other consideration engages in lobbying on behalf of another person, or organization, for more than five (5) hours in any month or spends more than \$750 lobbying during any reporting period (January 1st through December 31st of the previous year). NOTE THAT THIS IS A PUBLIC DOCUMENT.

(Type or Print Clearly)

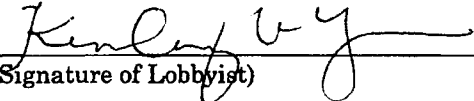
NAME	Last Yoshimoto	First Kimberley	Middle W.	
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code
	745 Fort Street Mall, 17th Floor	Honolulu	HI	96813
TELEPHONE NO. (808) 521-9500	E-MAIL kyoshimoto@imanaka-asato.com			
NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (do not abbreviate) American Resort Development Association (ARDA)				
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code
	Landmark Center-Two; 225 E. Robinson Street	Orlando	FL	32801
BUSINESS TELEPHONE NO. (407) 245-7601				

SUBJECT AREAS OF LOBBYING*(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))*

Tourism; Business, Economic Development; Technology

CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

1/30/2023
(Date)

AUTHORIZATION TO LOBBY

NAME Justin Vermuth	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED VP, State Government Affairs & Deputy General Counsel			
NAME OF ORGANIZATION (if applicable) American Resort Development Association (ARDA)			TELEPHONE NO. (407) 245-7601	
ADDRESS OF ORGANIZATION OR PERSON	Street	City	State	Zip Code
	Landmark Center-Two; 225 E. Robinson St., Suite 405	Orlando	FL	32801
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>				
Justin Vermuth	Digitally signed by Justin Vermuth Date: 2023.01.15 19:20:00 -0500		1/15/23	
(Signature of Authorizing Officer)			(Date)	