

LFIR # 2575

1. Project Title	Oriana Landing	s Affordable Housin	g Development - Osc	eola		
2 Canata Spanaar	\/iotov.Tovroo					
2. Senate Sponsor	Victor Torres					
3. Date of Request	01/12/2022					
4. Project/Program De	escription					
making it more diffict housing shortage in the National Low Inc	ult for anyone to re the U.S. Just 20 un come Housing Coa e. With funds receiver rovide 100 units to	ent. Many studies hants are available for lition. Many residen ved from the state at residents who are	region with the rising of ave identified the region revery 100 low-incomets live within the 70 to and local funding Bless with the 70 to 120 AM then to feconomic Opposite identification.	on as having the mo ne, working families 120 AMI and canno sed Home Foundati II in Osceola County	st severe affordable in need, according to	
	•	Бера пп	ient of Economic Opp	ortarity		
State Agency conta	icted? No					
6. Amount of the Nonr	ecurring Reques	t for Fiscal Year 20)22-2023			
Type of Funding			Amo	unt		
Operations				250,000		
Fixed Capital Outlay	Fixed Capital Outlay			5,000,000		
Total State Funds F	Requested		5,250,000			
7. Total Project Cost fo	or Fiscal Year 202	22-2023 (including	matching funds ava	ilable for this proje	ect)	
			-		, 	
Type of Funding			Amount	Percentage		
Total State Funds Ro	equested (from qu	estion #6)	-			
Total State Funds Ro Matching Funds	equested (from qu	estion #6)	Amount 5,250,000	Percentage 84%		
Total State Funds Ro Matching Funds Federal			Amount 5,250,000	Percentage 84% 0%		
Total State Funds Romatching Funds Federal State (excluding the			Amount 5,250,000	Percentage 84% 0% 0%		
Total State Funds Romatching Funds Federal State (excluding the Local			Amount 5,250,000 0 0 1,000,000	Percentage 84% 0% 0% 16%		
Total State Funds Romatching Funds Federal State (excluding the Local Other	amount of this req	uest)	Amount 5,250,000 0 0 1,000,000 0	Percentage 84% 0% 0% 16% 0%		
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Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this req	uest) 022-2023	Amount 5,250,000 0 1,000,000 0 6,250,000 No Specific	Percentage 84% 0% 0% 16% 0%		
Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this req	uest) 022-2023 state funding?	Amount 5,250,000 0 1,000,000 0 6,250,000	Percentage 84% 0% 0% 16% 100%		
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Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like	amount of this requested amount of this requested amount of this request	uest) 022-2023 state funding? ount Nonrecurring ed?	Amount 5,250,000 0 1,000,000 0 6,250,000 No Specific	Percentage 84% 0% 0% 16% 100%		
Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate no	amount of this request on recurring amount of this request and the second secon	uest) 022-2023 state funding? ount Nonrecurring ed? unt per year.	Amount 5,250,000 0 1,000,000 0 6,250,000 No Specific Appropriation #	Percentage 84% 0% 0% 16% 0% 100% Vetoed		
Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate no	amount of this request on recurring amount of this request and the second secon	uest) 022-2023 state funding? ount Nonrecurring ed? unt per year.	Amount 5,250,000 0 1,000,000 0 6,250,000 No Specific Appropriation #	Percentage 84% 0% 0% 16% 0% 100% Vetoed		
Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate no	amount of this request on recurring amount of this request and the second secon	uest) 022-2023 state funding? ount Nonrecurring ed? unt per year.	Amount 5,250,000 0 1,000,000 0 6,250,000 No Specific Appropriation #	Percentage 84% 0% 0% 16% 0% 100% Vetoed		
Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate no	amount of this request onrecurring amount of this request areas and the seriously received	uest) 022-2023 state funding? ount Nonrecurring ed? unt per year. at can be used in	Amount	Percentage 84% 0% 0% 16% 0% 100% Vetoed		



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If yes, indicate the amount of funds received and what the funds were used for.	

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits	1 FTE Project manager	100,000			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study	Developer consulting and management	150,000			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering	Construction of up to 100 affordable housing units	5,000,000			
Total State Funds Requested (must equal total from question #6) 5,250,000					

12. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

Many residents cannot afford the sky rocketing rent with their fixed incomes. Blessed Home Foundation will provide the opportunity for residents to live in dignified and affordable units. With the funds that are received Blessed Home Foundation will be able to lower the cost of rental units and help those who are within the 70 to 120 AMI.

b. What activities and services will be provided to meet the intended purpose of these funds?

Safe, decent, and affordable housing will become achievable for veterans, families, and individuals. Additionally, the foundation will provide budgeting and debt management services to families in need for stabilization and sustainability.

c. What direct services will be provided to citizens by the appropriation project?

Safe, decent, and affordable housing for families and individuals.

d. Who is the target population served by this project? How many individuals are expected to be served?

Residents who live within the 70 to 120 AMI. There is an estimate of 100 families that this project will serve.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Providing affordable housing units to the community.

Creation of these units will assist the region in reducing the shortfall of 30,000 units needed. It will enable family stability, improve economic security, and improve the overall quality of life for families in Osceola County.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Standard contract penalties will be sufficient.



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13.	The owners of the facility to receive, directly	or indirectly, an	y fixed capital	outlay funding.	Include the
	relationship between the owners of the facilit	ty and the entity	•		

Blessed Home Foundation, INC., will own the project.



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14. Requestor Contact Information						
	a. First Name	Maria Jose	Last Name	Rangel Morla		
	b. Organization	Blessed Home Foundation, INC.				
	c. E-mail Address	maria@mrhometeam.com				
	d. Phone Number	(407)632-2891 Ext .				
15.	Recipient Contact	Information				
	a. Organization	Blessed Home Foundation	n, INC.			
	b. Municipality and County Osceola					
	c. Organization Ty	pe				
	□For Profit Entity					
	□Non Profit 501(c)(3)					
	□Non Profit 501(c)(4)					
	□Local Entity					
	□University or College					
	☑Other (please specify) Non-profit pending certification					
	d. First Name	Maria Jose	Last Name	Rangel Morla		
	e. E-mail Address	maria@mrhometeam.com				
	f. Phone Number	(407)632-2891				
16.	16. Lobbyist Contact Information					
	a. Name	None				
	b. Firm Name	None				
	c. E-mail Address	S				
	d. Phone Number					