

1. Project Title

2. Senate Sponsor

Ileana Garcia

The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

Miami Dade Sherrif Office Rebranding and Unification Initiative

LFIR # 1014

3.	Date of Request	10/23/2025					
4.	Project/Program De	escription					
	entity from the formed district stations and of Current outdated ME	er Miami-Dade Polic government facilitie DPD brand confuse	ce Department s, patrol vehicl s residents and	(MD les, b d visi	riff's Office (MDSO) t SO). Rebranding will oats, motorcycles, ai tors and decreases p fice is seen as releva	replace MDPD with rcraft, uniforms, prin ublic safety. This pro	ted materials, etc. oject is critical for
5. 3	State Agency to red	ceive requested fu	nds Dep	artm	ent of Law Enforcem	ent	
•	State Agency conta	cted? No					
s /	Amount of the Nonr	ecurring Poguest	for Fiscal Vo	ar 20	26-2027		
		ecurring Request	IOI FISCAI I E	ai 20			
Г	Type of Funding				Amo		
_ F	Operating					1,500,000	
	Fixed Capital Outlay					0	
L	Total State Funds F	Requested				1,500,000	
7. 1	Total Project Cost f	or Fiscal Year 202	6-2027 (includ	ding	matching funds ava	ilable for this proje	ect)
	Type of Funding				Amount	Percentage	
ľ	Total State Funds R	equested (from que	estion #6)		1,500,000	50%	
	Matching Funds						
	Federal				0	0%	
	State (excluding the	amount of this requ	ıest)		0	0%	
	Local				1,500,000	50%	
	Other				0	0%	
	Total Project Costs	for Fiscal Year 20	26-2027		3,000,000	100%	
	Has this project pre If yes, provide the I	•	•	?	No		
Fiscal Year		Amount			Specific	Vetoed	
	(уууу-уу)	Recurring	Nonrecurri	ing	Appropriation #		
9.	Is future-year fundi	ng likely to be req	uested?		No		
	a. If yes, indicate n	onrecurring amou	nt per year.				
	b. Describe the sou	arce of funding tha	nt can be used	d in li	eu of state funding		
				••			
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a. What is the current phase of Planning Design b. Is the project "shovel ready" c. What is the estimated start d d. What is the estimated comple e. What funding stream will be	Construction N/A (i.e permitted)? ate of construction?	
b. Is the project "shovel ready" c. What is the estimated start d d. What is the estimated comple	(i.e permitted)? ate of construction? etion date of construction?	
c. What is the estimated start d	ate of construction? etion date of construction?	
d. What is the estimated comple	etion date of construction?	
•		
•		
List the owners of the facility relationship between the owners of the facility of relationship between the owners of the facility of relationship between the	to receive, directly or indirectly, any fixed capital outlay funding. Inclers of the facility and the entity. State funds will be expended	ude the
Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		(
Other Salary and Benefits		(
Expense/Equipment/Travel/Supplies Other	Rebrand through procurement of MDSO signage on district stations and government facilities, patrol vehicles, boats, motorcycles, aircraft, uniforms, printed materials, etc.	1,500,000
Consultants/Contracted Services/Study		(
Operational Costs		
Salary and Benefits		(
Expense/Equipment/Travel/Supplies Other	5/	(
Consultants/Contracted Services/Study		(
Fixed Capital Construction/Ma	ijor Renovation:	
Construction/Renovation/Land/ Planning Engineering		(
Total State Funds Requested	(must equal total from question #6)	1,500,000
Improved law enforcement and		
b. What activities and services	s will be provided to meet the intended purpose of these funds?	
Increased law enforcement and	d public safety operations	



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MDSO rebranding will improve trust because it is paired with authentic change. If the community sees both a new look and new actions (transparency, fairness, engagement), the rebrand will reinforce the transformation.

а	nd new actions (transparency, fairness, engagement), the rebrand will reinforce the transformation.							
d.	. Who is the target population served by this project? How many individuals are expected to be served?							
A	All residents and visitors in Miami-Dade County; over 5 million persons							
	nat is the expected benefit or outcome of this project? What is the methodology by which this outcome will							
b	e measured?							
I M	mproved community trust and visibility, and increased law enforcement and public safety operations as measured by IDSO tracking data							
	What are the suggested penalties that the contracting agency may consider in addition to its standard penaltie							
fc	or failing to meet deliverables or performance measures provided for in the contract?							
F	Failure to meet deliverables will result in complete or partial termination of contract							
14. Is	this project related to mitigation, response, or recovery from a natural disaster? No							
a. I	f Yes, what phase best describes the project?							
	Mitigation (reducing or eliminating potential loss of life or property)							
	Response (addressing the immediate and short-term effects of a natural disaster)							
	Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)							
b. I	Name of the natural disaster (or Executive Order # for events not under a federal declaration):							
	· ·							
15. Ha	as the entity applied for or received federal assistance for this project?							
	Yes, Applied							
	Yes, Received							
	No							
	No, but intends to apply							
a. I	f yes, provide the FEMA project worksheet ID#:							
b. I	Provide the total project cost listed on the FEMA project worksheet:							
16. Ha	as the entity applied for or received state assistance for this project (other than this request)?							
	Yes, Applied							
	Yes, Received							
	No							
	No, but intends to apply							



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a. If yes, specify the Commerce):	e program and state agency (ex. Local Government Emergency Br						
7. Requester Contact	t Informat	ion					
a. First Name	Rosie		Last Name	Cordero-Stut	Z		
b. Organization	Miami-Da	ade Sheriff's Offic	ce				
c. E-mail Address	SheriffRo	osie@mdso.com					
d. Phone Number	(305)471-3518		Ext.				
8. Recipient Contact	Informati	on					
a. Organization	Miami-Da	ade Sheriff's Offic	ce				
b. Municipality and	d County Miami-Dade						
c. Organization Ty	ре						
□For Profit Entity							
□Non Profit 501(d	501(c)(3)						
□Non Profit 501(d	c)(4)	(4)					
□Local Entity							
□University or Co	llege	ege					
☑Other (please sp	specify) Sheriff's Office						
d. First Name	Dorcas		Last Name	Perez			
e. E-mail Address	dmperez@mdso.com						
f. Phone Number	(305)216	-4098	Ext.				
9. Lobbyist Contact I	nformatio	on					
a. Name	Erin Daly	y Ballas					
b. Firm Name	Public A	ffairs Consultants	3				
c. E-mail Address	erinballa	erinballas@paconsultants.com					
d. Phone Number	(850)681-1065						

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.