

**LFIR # 1236** 

4. Project/Program D	escription				
of cutting-edge space laboratory resources collaboration with ur	ce technologies. The s, participants turn in niversity tech transf	rough technical innovative concerns and accept the con	s Florida veterans to leatraining, mentorship, arepts into viable products erospace industry partnirida's leadership in the	nd access to shared of and services. The person statewide, accele	equipment and program fosters erating technology
5. State Agency to re	caive requested fu	ınde Dena	irtment of Commerce	•	
	•	пиз Бера	intilicité de Committee		
State Agency conta	acted? No				
6. Amount of the Non	recurring Request	t for Fiscal Year	r 2026-2027		
Type of Funding			Am	ount	1
Operating			7	250,000	
Fi - 1 O - Clal O de	ı			0	$\mathbf{p}$
Fixed Capital Outlay	1			250 000	
Total State Funds	Requested			250,000	_
Total State Funds	Requested	26-2027 (includi	ng matching funds av	·	_
Total State Funds 7. Total Project Cost f	Requested for Fiscal Year 202	,		railable for this proj	ject)
7. Total Project Cost f Type of Funding	Requested for Fiscal Year 202	,	Amount	railable for this proj	ject)
7. Total Project Cost f  Type of Funding  Total State Funds R  Matching Funds  Federal	Requested for Fiscal Year 202 Lequested (from que	estion #6)	Amount 250,000	Percentage 92%	ject)
7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the	Requested for Fiscal Year 202 Lequested (from que	estion #6)	Amount 250,000	Percentage 92% 0 0%	ject)
7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local	Requested for Fiscal Year 202 Lequested (from que	estion #6)	Amount 250,000	Percentage 92% 0 0% 0 0% 0 6%	ject)
7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local Other	Requested For Fiscal Year 202 Requested (from quested) Requested (from quested)	estion #6) uest)	Amount 250,000 ( ( ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	Percentage 92% 0 0% 0 0% 0 6% 0 2%	ject)
7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local	Requested For Fiscal Year 202 Requested (from quested) Requested (from quested)	estion #6) uest)	Amount 250,000	Percentage 92% 0 0% 0 0% 0 6% 0 2%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding  Total State Funds R  Matching Funds  Federal  State (excluding the Local  Other  Total Project Costs	Requested For Fiscal Year 202 Requested (from quested (fro	estion #6)  uest)  026-2027  state funding?	Amount 250,000 ( ( ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	Percentage 92% 0 0% 0 0% 0 6% 0 2%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local Other Total Project Costs  8. Has this project profit yes, provide the	Requested  For Fiscal Year 202  Requested (from quested amount of this requested for Fiscal Year 202  Reviously received most recent instal	estion #6)  uest)  026-2027  state funding?	Amount  250,000  (0)  15,000  5,000  270,000  No  Specific	Percentage 92% 0 0% 0 0% 0 6% 0 2%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds  Federal State (excluding the Local Other  Total Project Costs  8. Has this project profit yes, provide the	Requested  For Fiscal Year 202  Requested (from quested amount of this requested for Fiscal Year 202  Reviously received most recent instal	estion #6)  uest)  026-2027  state funding? nce:	Amount  250,000  (0)  15,000  5,000  270,000  No  Specific	Percentage 92% 0 92% 0 0% 0 0% 0 2% 0 100%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local Other Total Project Costs  8. Has this project profit yes, provide the	Requested  for Fiscal Year 202  Requested (from quested amount of this requested eviously received most recent instal	estion #6)  uest)  026-2027  state funding? nce:	Amount  250,000  (0)  15,000  5,000  270,000  No  Specific	Percentage 92% 0 92% 0 0% 0 0% 0 2% 0 100%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding  Total State Funds R  Matching Funds  Federal  State (excluding the Local  Other  Total Project Costs  8. Has this project profit yes, provide the Fiscal Year  (уууу-уу)	Requested  for Fiscal Year 202  Requested (from quested amount of this requested for Fiscal Year 202  eviously received most recent instal  Amount Recurring	estion #6)  uest)  026-2027  state funding? nce:  ount  Nonrecurrin	Amount  250,000  (0)  15,000  5,000  270,000  No  Specific Appropriation #	Percentage 92% 0 92% 0 0% 0 0% 0 2% 0 100%	ject)
Total State Funds  7. Total Project Cost f  Type of Funding Total State Funds R  Matching Funds Federal State (excluding the Local Other Total Project Costs  8. Has this project profit yes, provide the	Requested  for Fiscal Year 202  Requested (from quested amount of this requested for Fiscal Year 202  eviously received most recent instal  Amount Recurring	estion #6)  uest)  026-2027  state funding? nce:  ount  Nonrecurrin	Amount  250,000  (0)  15,000  5,000  270,000  No  Specific	Percentage 92% 0 92% 0 0% 0 0% 0 2% 0 100%	ject)



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10.	Status	ot	Construction	

•	a. what is the cu	rrent phase of t	ne project?				
	Planning	O Design	Construction	∙ N/A			
	b. Is the project "	"shovel ready" (	(i.e permitted)?				
	c. What is the es	timated start da	te of construction?				
	d. What is the es	timated comple	tion date of constru	ction?			
,	e. What funding	stream will be u	sed for ongoing ope	erations a	and maintenance	e of the project?	
11.			o receive, directly or rs of the facility and			ital outlay funding. In	clude the

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount				
Administrative Costs:						
Executive Director/Project Head Salary and Benefits						
Other Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other	Travel	4,000				
Consultants/Contracted Services/Study		0				
Operational Costs						
Salary and Benefits	The Program Coordinator will support the planning and execution of all program activities, ensuring smooth operations and effective communication among participants, partners, and stakeholders. Responsibilities include coordinating training sessions and events, managing logistics and travel arrangements, maintaining project records, and assisting with reporting and outreach.	45,000				
Expense/Equipment/Travel/Supplies/ Other	Computing, Software, AV equipment. Industry Partnership Visit, Training Materials, Office supplies, Event Supplies, Marketing, In-State Travel, Training Methodology	90,000				
Consultants/Contracted Services/Study	Business Consultant, Subject Matter Experts & Facilitators	41,000				
Fixed Capital Construction/Majo	r Renovation:					
Construction/Renovation/Land/ Planning Engineering		0				
Total State Funds Requested (m	ust equal total from question #6)	250,000				

### 13. Program Performance

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



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The funds will empower veteran-led technology companies to develop and commercialize space-related innovations through technical training and collaboration with industry and university tech transfer offices statewide, accelerating commercialization and strengthening Florida's leadership in aerospace and defense innovation.

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

The program will provide veteran-led companies with technical training, mentorship, and hands-on support to develop and commercialize space-related technologies. Activities include prototype development, access to specialized equipment and labs, and collaboration with university tech transfer offices and industry partners statewide. Additional services include business coaching, investor readiness training, networking events, and public demonstrations to connect veterans with the space ecosystem and accelerate technology commercialization in Florida.

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

The program will provide citizens with direct access to innovative space technologies developed by veteran-led companies, including wearable health monitors, telemedicine devices, and rehabilitation tools. Citizens will benefit from public demonstrations, STEM workshops, and community engagement events that showcase these technologies. Additional services include educational outreach, training sessions, and opportunities to participate in pilot programs, enabling citizens to experience, test, and benefit from cutting-edge space innovations.

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

The primary target population is veterans across Florida who are interested in entrepreneurship and technology development, particularly in space and defense sectors. Secondary beneficiaries include Florida citizens who will gain access to space-enabled healthcare innovations and STEM outreach programs. The program also engages industry partners, university tech transfer offices, and research institutions, fostering statewide collaboration that supports veteran entrepreneurs while advancing Florida's space technology ecosystem.

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

The level of benefit will be measured using quantitative and qualitative metrics focused on space technology and health applications. Metrics include the number of veteran-led prototypes developed, technologies licensed, and companies launched.

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 in the contract?

Failure to complete all deliverables in accordance with the requirements will result in DEO's assessment and potential of financial consequences. If appropriate, should the Parties agree to a corrective action plan, the plan shall specify additional financial consequences to be applied after the effective date of the corrective action plan. This provision for financial consequences shall in no manner affect Commerce's right to terminate the Agreement.

14. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. I	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. N	lame of the natural disaster (or Executive Order # for events not under a federal declaration):
15. Ha	s the entity applied for or received federal assistance for this project?
	Yes, Applied



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☐ Yes, Received					
□ No					
☐ No, but intends t	o apply				
a. If yes, provide th	e FEMA project workshe	et ID#:			٦
b. Provide the total	project cost listed on th	ne FEMA proje	ct worksheet:		_
16. Has the entity app	lied for or received state	assistance fo	or this project (othe	r than this reque	j est)?
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends t	o apply				
Commerce):	e program and state age	ncy (ex. Local	Government Emer	gency Bridge Lo	oan, Department of
17. Requester Contact		7 <b>.</b> . [	•		
a. First Name	Rafael	Last Name			
b. Organization c. E-mail Address	Veterans Entrepreneursh rafael@vei.center	iip iriilialive (ve	=1)		
d. Phone Number		Ext.			
18. Recipient Contact	Information				
a. Organization	Veterans Entrepreneursh	nip Initiative (VE	EI)		
b. Municipality and	d County Seminole				
c. Organization Ty	pe				
□For Profit Entity					
☑Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	ollege				



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□Other (please specify)						
d. First Name	Rebecca	Last Name	Dobo			
e. E-mail Address	rebecca@vei.center					
f. Phone Number	(321)663-4204	Ext.				
9. Lobbyist Contact I	nformation					
a. Name	None					
b. Firm Name						
c. E-mail Address						
d. Phone Number						

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