



HONOLULU ETHICS COMMISSION
 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
 Email: ethics@honolulu.gov
 Website: <http://www.honolulu.gov/ethics/>

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HONOLULU
 ETHICS COMMISSION
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Jan 14 19
 '19 JAN -8 P2:51

2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Sabas, John R.		
LOBBYIST FIRM/EMPLOYER (if applicable) Carlsmith Ball LLP		TELEPHONE (808) 523-2500
MAILING ADDRESS (No. and Street or P.O. Box) 1001 Bishop Street, Suite 2100		FAX (808) 523-0842
		EMAIL jsabas@carlsmith.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Artspace Projects, Inc.		TELEPHONE (612) 889-3905
MAILING ADDRESS (No. and Street or P.O. Box) 250 Third Avenue North, Suite 400		FAX
		EMAIL
(City) Minneapolis	(State) MN	(Zip Code) 55401
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below): _____		

STATE OF HAWAII)
) SS.
 CITY AND COUNTY OF HONOLULU)

PART IV LOBBYIST CERTIFICATION

<p><i>I hereby certify that the foregoing statements are true and correct.</i></p> <p><i>[Signature]</i></p> <p>LOBBYIST SIGNATURE</p> <p><i>01/8/2019</i></p> <p>DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>8TH</u> day of <u>January</u>, 2019.</p> <p>By: <i>[Signature]</i></p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p style="text-align: center;">Rodney S. Nagasako</p> <p>My commission expires:</p> <p style="text-align: center;"><u>SEP 05 2022</u></p>
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PART V AUTHORIZATION TO LOBBY

NAME Gregory Handberg	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice President
NAME OF ORGANIZATION (if applicable) Artspace Projects, Inc.	TELEPHONE (612) 889-3905
MAILING ADDRESS (No. and Street or P.O Box) 250 Third Avenue North, Suite 400	FAX
	EMAIL
(City) Minneapolis	(State) MN
(Zip Code) 55401	
<p><i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i></p> <p><i>[Signature]</i> _____</p> <p>(Signature of Authorizing Officer or Person Represented)</p>	
<p style="text-align: right;"><i>1/8/19</i></p> <p style="text-align: right;">(Date)</p>	

NOTARY CERTIFICATE ON NEXT PAGE

NOTARY PUBLIC CERTIFICATION
Rodney S. Nagasako 1st Judicial Circuit
Doc. Description: 2019 REGISTRATION -
LOBBYIST REGISTRATION

No. of Pages: 3 Date of Doc. JAN 08 2019

Rodney S. Nagasako JAN 08 2019
Notary Signature Date





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'19 JAN 11 P3:23

2019 REGISTRATION

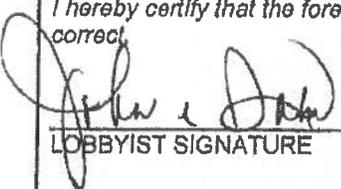
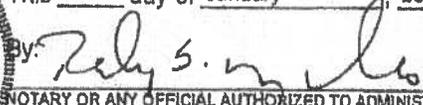
Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Sabas, John R.		
LOBBYIST FIRM/EMPLOYER (if applicable) Carlsmith Ball LLP		TELEPHONE (808) 523-2500
MAILING ADDRESS (No. and Street or P.O. Box) 1001 Bishop Street, Suite 2100		FAX (808) 523-0842
		EMAIL jsabas@carlsmith.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Brookfield Properties Retail Group [successor of General Growth Properties]		TELEPHONE (312) 960-6478
MAILING ADDRESS (No. and Street or P.O. Box) 350 N. Orleans St., Suite 300		FAX
		EMAIL Scott.McCubbrey@brookfieldproperties.com
(City) Chicago	(State) IL	(Zip Code) 60654
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY		
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<input type="checkbox"/> Other (Indicate below): _____		
		STATE OF HAWAII } ss.
CITY AND COUNTY OF HONOLULU		

PART IV LOBBYIST CERTIFICATION	
<i>I hereby certify that the foregoing statements are true and correct.</i>  LOBBYIST SIGNATURE JAN 11 2019 DATE	Subscribed and sworn to before me This <u>11th</u> day of January, 2019. By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires <u>Rodney S. Nagasako</u> <u>SEP 05 2022</u>

PART V AUTHORIZATION TO LOBBY		
NAME Scott McCubbrey (Scott.McCubbrey@brookfieldpropertiesretail.com)	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Senior Director, Development	
NAME OF ORGANIZATION (if applicable) Brookfield Properties Retail Group [successor of General Growth Properties]	TELEPHONE (312) 960-6478	
MAILING ADDRESS (No. and Street or P.O. Box) 350 N. Orleans St., Suite 300	FAX EMAIL Scott.McCubbrey@brookfieldpropertiesretail.com	
(City) Chicago	(State) IL	(Zip Code) 60654
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>  (Signature of Authorizing Officer or Person Represented)		
		<u>1/9/19</u> (Date)

NOTARY CERTIFICATE ON NEXT PAGE

NOTARY PUBLIC CERTIFICATION

Rodney S. Nagasako 1ST Judicial Circuit

Doc. Description: 2018 ANNUAL REPORT -
LODYIS ANNUAL REPORT (JANUARY
1-DECEMBER 31, 2018)

No. of Pages: 3 Date of Doc. JAN 10 2019

Rodney S. Nagasako JAN 10 2019
Notary Signature Date





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31.14.19
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2019 REGISTRATION

Lobbyist Registration
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NAME (Last) (First) (Middle) Sabas, John R.		
LOBBYIST FIRM/EMPLOYER (if applicable) Carlsmith Ball LLP		TELEPHONE (808) 523-2500
MAILING ADDRESS (No. and Street or P.O. Box) 1001 Bishop Street, Suite 2100		FAX (808) 523-0842
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<input type="checkbox"/> Other (indicate below): STATE OF HAWAII) CITY AND COUNTY OF HONOLULU) SS.		

PART IV LOBBYIST CERTIFICATION	
<p>I hereby certify that the foregoing statements are true and correct.</p> <p><i>John R. Sabas</i></p> <p>LOBBYIST SIGNATURE</p> <p>JAN 09 2019</p> <p>DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>9th</u> day of <u>January</u>, 2019.</p> <p>By: <i>Rodney S. Nagasako</i></p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>Rodney S. Nagasako</p> <p>My commission expires:</p> <p>SEP 05 2022</p>

PART V AUTHORIZATION TO LOBBY		
NAME Sabas, John R.	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Director, Public & Governmental Affairs	
NAME OF ORGANIZATION (if applicable) Carlsmith Ball LLP	TELEPHONE (808) 523-2500	
MAILING ADDRESS (No. and Street or P.O. Box) 1001 Bishop Street, Suite 2100	FAX (808) 523-0842	
	EMAIL jsabas@carlsmith.com	
(City) Honolulu <i>John R. Sabas</i>	(State) HI	(Zip Code) 96813
<p>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</p> <p style="text-align: right;">JAN - 9 2019</p> <p>(Signature of Authorizing Officer or Person Represented) _____ (Date) _____</p>		

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