



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2814

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. Project/Program Description

Hialeah Chamber of Commerce and Industries (HCCI) multifaceted project to help local businesses be ready for the future ahead. Get ready for business in 2030
 1) Analysis of each participating business to evaluate and determine training and guiding needs
 2) Conduct workshops on a weekly basis (online-presentations)
 a) Operations
 b) Financials
 c) Technology
 d) Sales/Marketing/Advertising

5. **State Agency to receive requested funds**

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	200,000
Fixed Capital Outlay	0
Total State Funds Requested	200,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	200,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	200,000	100%

8. **Has this project previously received state funding?**

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future-year funding likely to be requested?**

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Program Development Manager	35,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Equipment - Computers, Printers, Audio Visual, Classroom Furniture (tables/chairs) Supplies (handbooks, notebooks, misc. materials) Space rental for workshops.	90,000
Consultants/Contracted Services/Study	Business Evaluation consultant to measure level of individual businesses readiness for their future Identify 150-200 businesses to qualify for participation.	15,000
Operational Costs		
Salary and Benefits	Instructors/clerical support	40,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Marketing and Advertising outreach to make the business community aware of the program to sign up (Radio/TV/Print/Social/Media) \$5,000.00 Co-op 60/30 advertising element for qualifying participants \$15,000.00	20,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		200,000

13. Program Performance

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



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Hialeah Chamber of Commerce and Industries's principal goal of this project is to help the businesses in our service area help themselves by upgrading the way they conduct the operation of their businesses and benefit the local economy and beyond.

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

Get ready for business in 2030
 1) Analysis of each participating business to evaluate and determine training and guiding needs
 2) Conduct workshops on a weekly basis (online-presentations)
 a) Operations b) Financials c) Technology d) Sales/Marketing/Advertising e) Equipment up Grade Advise

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

1) Direct Operational Evaluation
 2) Direct Sales training - How to close a sales (One to one, Phone Sales, Online Sales)
 3) Marketing plan preparation - Creative and Messaging (know your business)
 4) Advertising opportunities (this will be on a co-op basis as the business has to have stake in this element)

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

Small to Medium size independent businesses in the Cities of Hialeah and Hialeah Gardens. The initial target will be 150-200 business to be able to create a program that will support the economic growth of the South Florida Community as it can be expanded and share with other Chambers of Commerce.

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

To strengthen the future growth of business that otherwise might not be able to survive with the fast-paced world that they are functioning. The outcome will be measured by the stability and growth that each business will be producing in a 12-month period. Regularly follow up reports will be requested every 3 months on their group workshops.

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?

The participant that does not comply and deliver the required measurable effort will be dismissed from the project and will not be allowed to participate in the 2026 edition of the project.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If 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 infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply



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a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has 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

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

18. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify) 501 (c)(6)

d. First Name Last Name

e. E-mail Address



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f. Phone Number Ext.

19. Lobbyist Contact Information

a. Name

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.