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MIAMI-DADE
ELECTIONS

**ELECTIONEERING COMMUNICATION
STATEMENT OF ORGANIZATION**

(PLEASE TYPE)

OFFICE USE ONLY

1. Full Name of Organization

RESPECT THE VOTERS CHOICE

Telephone

305-446-0702

Mailing Address (include city, state and zip code)

2655 LeJeune Road, Ste. 323

Street Address (include city, state and zip code)

Coral Gables, FL 33134

2. Affiliated or Connected Organizations

Name of Affiliated or Connected Organization	Mailing Address	Relationship
None		

3. Area, Scope and Jurisdiction of the Organization

Miami-Dade County - Educating Voters

4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization

Full Name	Mailing Address	Street Address	Title or Position
Ernesto Martinez, Jr.	2655 LeJeune Road, Ste. 323 Coral Gables, FL 33134	2655 LeJeune Road, Ste. 323 Coral Gables, FL 33134	Chairman and Treasurer

5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.)

- As a newly created organization during the current calendar quarter.
 From an organization existing prior to the current calendar quarter.

6. List By Name, Mailing and Street Address, & Position, Other Principal Officers, including the treasurer and deputy treasurer, if any. Include the top-ranking officer's (e.g., chairperson) name and information.

Full Name	Mailing Address	Street Address	Title or Position
Ernesto Martinez, Jr.	2655 LeJeune Road, Ste. 323 Coral Gables, FL 33134	2655 LeJeune Road, Ste. 323 Coral Gables, FL 33134	Chairman and Treasurer

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7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?

Donated to a 501 (c)(3) organization or as other otherwise allowed under Florida law.

8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications

Name of Bank or Depository	Mailing Address
Sunstate Bank	14095 South Dixie Highway Miami, Florida 33176-7222

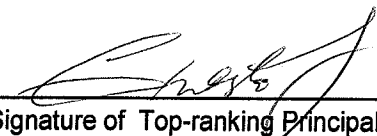
9. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
Form SS-4 Form 8871 as may be required	Upon formation March 15, annually	Internal Revenue Service	Ogden, Utah 84201

STATE OF Florida COUNTY Miami-Dade

I, Ernesto Martinez, Jr., certify that the information in this Statement of

Organization is complete, true, and correct.

X 
 Signature of Top-ranking Principal Officer of Organization

5/2/12
 Date

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

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ELECTIONS

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name: Ernesto Martinez, Jr. Telephone: 305-446-0702

Street Address: 2655 LeJeune Road, Ste. 323

City: Coral Gables State: FL Zip Code: 33134

Mailing Address: 2655 LeJeune Road, Ste. 323

City: Coral Gables State: FL Zip Code: 33134

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.


Signature of Registered Agent

5/2/12
Date

Former Registered Agent and Office Information (for changes only)

Name: _____ Telephone: _____

Street Address: _____


City: _____ State: _____ Zip Code: _____

Committee or Organization Information

Name of Committee or Organization: RESPECT THE VOTERS CHOICE

Street Address: 2655 LeJeune Road, Ste. 323 Telephone: 305-446-0702

City: Coral Gables State: FL Zip Code: 33134


Signature of Chairperson

Ernesto Martinez, Jr.
Printed Name of Chairperson

5/2/12
Date

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**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization
RESPECT THE VOTERS CHOICE

2. Telephone
(305) 446-0702

3. Name of Treasurer or Deputy Treasurer 4. Email (optional)
ERNESTO MARTINEZ, JR.

5. Telephone (optional)
(305) 446-0702

6. Mailing Address
2655 LeJeune Road, Ste. 323, Coral Gables, FL 33134

7. Street Address
2655 LeJeune Road, Ste. 323, Coral Gables, FL 33134

8. The following bank has been designated as the **Primary Depository** **Secondary Depository**

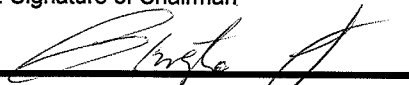
9. Name of Bank
Sunstate Bank

10. Street Address
14095 South Dixie Highway Miami, Florida 33176-7222

11. City
Miami

12. State
FL

13. Zip Code
33176-7222

14. Signature of Chairman
X 

15. Name of Chairman (Print or Type)
Ernesto Martinez, Jr.

Campaign Treasurer's Acceptance of Appointment

I, Ernesto Martinez, Jr., do hereby accept the appointment as
(Please Print or Type)

treasurer or deputy treasurer for RESPECT THE VOTERS CHOICE
(Committee or Organization)

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

5/2/12
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer



Access to Handbook and the Election Laws of the State of Florida

Candidate/Chairperson:

Ernesto

Martinez, Jr.

First Name

Middle Name

Last Name

RESPECT THE VOTERS CHOICE

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

Candidate Qualifying Handbook (http://www.miamidade.gov/elections/candidate.asp) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.

[X] Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by:

[Handwritten Signature]

Candidate / Chairperson Signature

Date:

5/2/12

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Primary Telephone Number: 305-446-0702

Alternate Telephone Number:

E-mail address: EMJFIRM@AOL.COM

**Campaign Treasurer's Report
Electronic Filing Requirements
for Miami-Dade County**



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: RESPECT THE VOTERS CHOICE ECO

Party Executive Committee: _____

Other: _____

I, ERNESTO MARTINEZ, JR.
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

Signature of Candidate or Chairperson

5/2/12

Date

Day Time Telephone No: 305-446-0702

Email Address: EMJFIRM@AOL.COM

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.

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