## ELECTIONEERING COMMUNICATIONS ORGANIZATION

#### STATEMENT OF ORGANIZATION

(PLEASE TYPE)

## RECEIVED

2014 JUN 13 PM 4: 13

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY 1. Full Name of Organization Jobs Now Telephone 305-444-3437 Mailing Address (include city, state and zip code) 1200 NW 78th Avenue, Suite 300, Miami, Florida 33126 Street Address (include city, state and zip code) 1200 NW 78th Avenue, Suite 300, Miami, Florida 33126 2. Affiliated or Connected Organizations Name of Affiliated or Mailing Address Relationship Connected Organization n/a 3. Area, Scope and Jurisdiction of the Organization Support for Candidates that promote job creation in Miami-Dade County 4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization **Full Name** Mailing Address Street Address Title or Position Jose Riesco 95 Merrick Way, 95 Merrick Way, Treasurer Suite 250 Suite 250 Coral Gables, FL Coral Gables, FL 33134 33134 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 at deputy treasurer, if any. In	nd Street Address, & Position of the top-ranking office	n, Other Pi r's (e.g., cl	rincipal Officers nairperson) nam	, includin e and inf	g the treasurer ormation.	and	
Full Name	Mailing Address	Street Address			Title or Position		
J. Wil Morris	1200 NW 78th Avenue Suite 300 Miami, FL 33126	),	1200 NW 78th Avenue, Suite 300 Miami, FL 33		Chairman		
Jose Riesco	95 Merrick Way Suite 250 Coral Gables, FI 33	134	Same		Treasurer 2014 JUN	REO	
7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?  Donation to 501(c)(3) charitable organization.							
8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications							
Name of Bank or Depository		Mailing Address					
Bank of Coral Gables		2295 Galiano St, Coral Gables, FL 33134					
List All Reports Required     & Positions of Such Offi	l to be Filed by this Organiza cials, If Any	ation with I	Federal Officials	, & the N	ames, Address	es,	
Report Title	Dates Required to be Filed	Name &	Position of Official		Mailing Address		
SS4 Form 8871 Form 1120 POL Form 990	Upon Formation Upon Formation March 15, Annually May 15, Annually	Internal Service	Revenue	Ogde	en, UT 84201		
STATE OF HORNA		-	Miani	- Das	COUNT	Υ	
1. J. WIE MORRIS			, certify that the information in this Statement of				
Organization is complete, true, and correct.							
X Signature of Top-ranking	Principal Officer of Organizat	ion	_6/4	Date		_	

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#### **REGISTERED AGENT** STATEMENT OF APPOINTMENT

OFFICE USE ONLY 2014 JUN 13 PM 4: 13

(Section 106.022, F.S.)	MIAMI-DADE CO	UNTY	
		ELECTION DELA	VITILINI
✓ Original Appointment Change of Appoi	ntment		
Change of Mailing Address Change of Physic	cal Address		
Registered Ag	gent and Of	fice Information	
Name Juan-Carlos Planas, Esq.	Telephone 305-929-8500		
Street Address 18851 NE 29 Avenue, Suite 303			
City Aventura	State Florida	Zip Code 33180	
Mailing Address 18851 NE 29 Avenue, Suite 303		120:00	
City Aventura	State Florida	Zip Code 33180	
I accept this appointment and confirm that I am forth in Section 106.022, F.S. I also understan statement of resignation and filing it with the app	d that I may r	esign this appointment by executing a	n as set a written
Signature of Registered Agent		Date	
Former Registered Agent a	and Office In	nformation (for changes only)	- Aller
Name	Telephone		
Street Address		<u> </u>	
City	State	Zip Code	
Committee or	Organizatio	on Information	
Name of Committee or Organization			
Jobs Now, ECO			
Street Address 18851 NE 29 Avenue, Suite 303		Telephone 305-444-3437	12.0
City Miami	State Florida	Zip Code 33126	
Signature of Chairperson  J. Wil Morris		6/13/14	
Printed Name of Chairperson	Date /		

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## Access to Handbook and the Election Laws of the State of Florida PM 4: 13

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

		LLLO HONO DEL MINISTER	
Candidate/Chairperson:			
J. Wil	Morris		
First Name	Middle Name	Last Name	
Jobs Now			
	Office Sought / Organization		
I acknowledge that it is my requirements described in the County Elections Department W	e following resources a	understand and follow the vailable on the Miami-Dade	
Candidate Qualifying Handb Contains information on Stat Florida, County Laws and Ha and Procedures, Important C	e Laws and Handbooks, the andbooks, Qualifying Informa	Election Laws of the State of tion, Electronic Reporting Dates	
Political Committee Handboo Contains information on State Florida, County Laws and Ha Important Committee Informa	e Laws and Handbooks, the andbooks, Electronic Reportii	Election Laws of the State of ng Dates and Procedures.	
Acknowledged by:	and		
Date: 6/13/14	_Candidate Chairperson S	Signature	
Primary Telephone Number:	(201) 444 -	-3437	
Alternate Telephone Number:	(305/ 775.	7686	
E-mail address:		nt. com	

# Campaign Treasurer's Report RECEIVED Miami-Dade County Electronic Filing Requirements 2014 JUN 13 PM 1: 1

	10 111 4
☐ Candidate (office sought):	MIAMI-DADE COUN
Candidate's Florida Voter Registration Number:	LEPARTE
Political Committee: Jobs Now	
□ Party Executive Committee:	
□ Other:	
J. Wil Morris	
(Please print name of Candidate or Chairperson)	
understand that Campaign Treasurer's Reports <u>must</u> be filed elect Supervisor of Elections website by midnight of the day designated in	order to comply
with Miami-Dade County requirements. I also acknowledge that Section	
21 of the Code of Miami-Dade County regarding the filing of the ca	
reports with the Supervisor of Elections were recently amended in the	nt original signed
hardcopies are no longer required.	
I also understand that, in accordance with Section 12-14.1 of the Cod-	e of Miami-Dade
County, Florida, candidates running for the Offices of Miami-Dade	County Mayor,
Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Co	mmunity Council
must now file the Absentee Ballot Campaign Report (MD-ED 26) to dis	Service of a final property of the service of the s
of paid campaign workers engaged in absentee ballot activities.	
and the second of the second o	13/y
Signature of Candidate or Chairperson	Date
Day Time Telephone Number: (2017 444 - 343)	
Alternate Contact Number: (301) 775 - 7686	
Email Address: WILE MORRES ON E- COM	ĺ

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.