STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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2015 APR -2 PM 3: 36

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

1. Full Name of Committee Building a Better Homeste	ad		Telephone 305-929-8500			
Mailing Address (include city, state and zip code) 18851 NE 29 Avenue, Suite 303, Aventura, FL 33180						
Street Address (include city, 18851 NE 29 Avenue, Sui	state and zip code) te 303, Aventura, FL 33180					
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)						
Name of Affiliated or Connected Organization	Mailing Address	Mailing Address				
N/A	N/A		N/A			
3. Area, Scope and Jurisdiction of the Committee City of Homestead, Florida and Miami-Dade County						
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.) Preserving Quality of Life in the City of Homestead						
5. Identify by Name, Address	and Position, the Custodian of Books and Acc	counts (inc	lude treasurer's name)			
Full Name	Mailing Address	Comr	mittee Title or Position			
Jose A. Riesco	2600 South Douglas Road Suite 900 Coral Gables, FL 33134	Treasure	r			

The state of the s	THE RESIDENCE OF THE PARTY OF T	STATE OF THE PARTY.	Market and the second s	WALLESS CO.	DISPOSITION OF THE PERSON	the state of the s	and the same of the same	
6. List by Name, Addres Finance Committee, I	s and Position, Other Principa FAny (include chairman's nam	l Offi e)	icers, Including (Officers	and Men	nbers of	the	
Full Name	Mailing Ad	dress	3	Committee Title or Positi		Position)	
Juan-Carlos Planas, Esq.	18851 NE 29 Avenue, Aventura, FI 33181	Sui	te 303	Chairman and Registered Agent				
7. List by Name, Address Committee is Support	s, Office Sought and Party Affi ing (if none, please indicate)	liatio	n Each Candida	te or Ot	her Indivi	idual th	at this	A 1849
Full Name	Mailing Address		Office	Sought		T	Party	
Patricia D. Fairclough	424 SE 37th Place, Homestead, FL 33033		Homestead C Seat 6				W	
8. List Any Issues this C	ommittee is Supporting: to be	1 1		THE RESERVE OF THE PARTY OF THE		1	2015	
	ommittee is Opposing:		ermined onal Amendmei	nt 2		AMI-DA TIONS (APR -	C
9. If this Committee is Su N/a	pporting the Entire Ticket of a	Part	y, Give Name of	Party		EPART	PH	
					Ü			
11. List all Banks, Safety	Deposit Boxes, or Other Depo	sitor	ies Used for Cor	nmittee	Funds			NAME OF TAXABLE PARTY.
Name of Bank or Depository & Account Number Mailing Address								
Bank of America	t.	2600 South Douglas Road, Coral Gables, F 33134			es, FL			
12. List all Reports Requi and Positions of Sucl	red to be Filed by this Commit n Officials, If Any	tee v	vith Federal Offic	cials an	d the Nan	nes, Ad	dresse	S
Report Title	Dates Required to be Filed	Na	me & Position of	Official	Ma	ailing Ad	dress	
SS4 Form 8871 Form 1120 POL Form 990	Upon Formation Upon Formation March 15, Annually May 15, Annually		ernal Revenue rvice		Ogden,	UT 84	201	
STATE OF Florida			Miami-l	Dade		(COUNT	Υ
Juan-Carlos Planas , certify that the information in this Statement of								
Organization is complete, true and correct.								
X 3/20/15								
Signature of Chairman of Political Committee Date				-				

2015 APR -2 PM 3: 36

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR** POLITICAL COMMITTEES

(Sections 106.011(1) and 106.021(1), F.S.)

CHECK ADDROBDIATE DOV.			OFFICE USE ONLY	
CHECK APPROPRIATE BOX: Original Appointment of Treasurer Reappoint	ntment of Treasurer		Deputy Treasurer	
1. Committee or Organization		2. Telephone		
Building a Better Homestead		(305) 929-8	3500	
3. Name of Treasurer or Deputy Treasurer 4. Email (optional	1)	5. Telephone (c	optional)	
Jose A. Riesco jose@riescoand	company.com	(305) 445-0)777	
6. Mailing Address 2600 South Douglas Road, Suite 9	900, Coral	Gables, F	FL 33134	
7. Street Address 2600 South Douglas Road, Suit	te 900, Co	ral Gable	es, FL 33134	
8. The following bank has been designated as the Prin	mary Depository	Seconda	ry Depository	
9. Name of Bank	10. Street Address	ALL THROUGH CONTROL OF THE PERSON OF THE PER		
Bank of America	2600 South	Douglas F	Road, Suite 900	
11. City	12. State		13. Zip Code	
Coral Gables	Florid	ak	33134	
14. Signature of Chairman	15. Name of Chairn	nan (Print or Type	e)	
X	Juan-Carl	rlos Planas		
Campaign Treasurer's Ac	ceptance of Ar	pointment		
Jose A. Riesco		, do hereb	y accept the appointment as	
(Please Print or Type) treasurer or deputy treasurer for Building a Bette	r Homestead			
	Committee or Organiza	tion)	- Arrithman Salaman Line - A .	
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.				
7-27-15 X	1			
Date	Signature of Campai	on Treasurer or F	Jenuty Treasurer	

REGISTERED AGENT

2015 APR -2FFPHUSE 36LY

STATEMENT OF APPOINTME (Section 106.022, F.S.)	ENT	MIAMI-DADE COUNTY ELECTIONS DEPARTMENT				
Original Appointment Change of Appointment	ntment					
Change of Mailing Address Change of Physic	cal Address	$-iagl_{j}$.				
Registered Ac	Registered Agent and Office Information					
Name Juan-Carlos Planas, Esq.		Telephone 305-929-8500				
Street Address 18851 NE 29 Avenue, Suite 303						
City Aventura	State Florida	Zip Code 33181				
Mailing Address 18851 NE 29 Avenue, Suite 303	THORIGO	100101				
City Aventura	State Florida	Zip Code 33181				
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	and accept the obligations of the position as set resign this appointment by executing a written officer.				
Former Registered Agent a	and Office	Information (for changes only)				
Name		Telephone				
Street Address		The state of the s				
City	State	Zip Code				
Committee or	Organizat	tion Information				
Name of Committee or Organization Building a Better Homestead	,					
Street Address 18851 NE 29 Avenue, Suite 303		Telephone 305-929-8500				
City Aventura	State Florida	Zip Code 33180				
Signature of Chairperson						
Juan-Carlos Planas		3/20/15				
Printed Name of Chairperson		Date				



2015 APR -2 PM 3: 36 Access to Handbook and the Election Laws of the State of Florida MI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:		(44%)
Juan-Carlos		Planas
First Name	Middle Name	Last Name
Building a Better Ho	mestead	
tions of plants to the control of th	Office Sought / Organization	
I acknowledge that it is m requirements described in t County Elections Department	he following resources a	
Contains information on Sta Florida, County Laws and F		Election Laws of the State of tion, Electronic Reporting Dates
Florida, County Laws and F	ook (<u>http://www.miamidade.go</u> ate Laws and Handbooks, the landbooks, Electronic Reporti nation, and Recent Legislative	Election Laws of the State of ng Dates and Procedures,
Acknowledged by:		
Date: 3/20/15	Candidate / Chairperson S	Signature
Primary Telephone Number:	305-929-8500	
Alternate Telephone Number	850-980-6542	
E-mail address: jcplanas	@kb-attorneys.co	m

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

П	Candidate (office sought):	MIA
Sound	Candidate's Florida Voter Registration Number:	
机	Political Committee: Building a Better Homestead	SADE
	Political Committee:	PARCE
	Party Executive Committee:	THE S
	Other:	4 ' 6
١,	Juan-Carlos Planas	
	(Please print name of Candidate or Chairperson) derstand that Campaign Treasurer's Reports must be filed electronically	via the
	spervisor of Elections website by midnight of the day designated in order to	
	th Miami-Dade County requirements. I also acknowledge that Sections 12-17	
	of the Code of Miami-Dade County regarding the filing of the campaigr	
rep	ports with the Supervisor of Elections were recently amended in that original	al signed
ha	rdcopies are no longer required.	
l a	lso understand that, in accordance with Section 12-14.1 of the Code of Mia	ımi-Dade
	ounty, Florida, candidates running for the Offices of Miami-Dade County	
	ommissioner, Property Appraiser, Clerk of the Circuit Courts, and Community	
	ust now file the Absentee Ballot Campaign Report (MD-ED 26) to disclose the	e names
OI	paid campaign workers engaged in absentee ballot activities.	
	3/20/15	
	Signature of Candidate or Chairperson Date	
Da	y Time Telephone Number: 305-929-8500	
Alte	ernate Contact Number: 850-980-6542	······································
Ξm	nail Address: jcplanas@kb-attorneys.com	7

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.