STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE

1. Full Name o	f Committee
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West End Citizens Initiative To Incorporate (WE CITI)

305-929-8500

Mailing Address (include city, state and zip code) 1952 NW 88th Court, Suite 101, Doral, FL 33172

Street Address (include city, state and zip code)
1952 NW 88th Court, Suite 101, Doral, FL 33172

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Mailing Address	Relationship
N/A	N/A
	N/A

3. Area, Scope and Jurisdiction of the Committee

Supporting Issues in Miami-Dade County

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Incorporation of Municipalities in Western Miami-Dade County

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position	
Carlos M. Trueba	1985 NW 88th Court Suite 101 Doral, FL 33172	Treasurer	
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6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)							
Full Name	Mailing Add	Mailing Address		Committee Title or Position			
Pablo Aguilar	986 SW 82nd Avenue Miami, FL 33144						
Juan-Carlos Planas, E	SQ 18851 NE 29 Avenue, Suite 30 Aventura, FL 33181	18851 NE 29 Avenue, Suite 303		Registered Agent			
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)							
Full Name	Mailing Address	Office	Sought	Party			
N/A	N/A	N/.	A	N/A			
8. List Any Issues this Co	ommittee is Supporting: Incorp	oration					
	List Any Issues this Committee is Opposing: To be determined						
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A							
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Donation to 501(c)(3) charitable organization.							
11. List all Banks, Safety	Deposit Boxes, or Other Depos	sitories Used for Co	mmittee Fu	N C			
Name of Bank or Dep	ository & Account Number		Mailing Address	<u>ن</u>			
		8790 NW 25 Street Doral, FL 33172					
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any							
Report Title	Dates Required to be Filed	Name & Position o	f Official M	ailing Address			
Form 8871 Form 1120POL	Upon formation Upon formation	Internal Revenue Service	Ogden, UT 84201				
STATE OF Florida		Miami-Dade county					
, certify that the information in this Statement of							
Organization is complete, to	rue and correct.						
X		3/8/17					
Signature of 0	Chairman of Political Committee	· · ·	Da				