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MIAMI-DADE
ELECTIONS

May 13, 2016

Carolina Lopez
Deputy Supervisor of Elections
Miami-Dade Elections Department
2700 NW 87th Avenue
Miami, FL 33172

Dear Ms. Lopez:

Please find enclosed an updated Statement of Organization for An Accountable Miami-Dade PC to reflect the appointment of a new Chair.

Please let me know if you have any questions. I can be reached at 305-336-3631 or at christian.ulvert@gmail.com.

Many thanks,

Christian Ulvert
An Accountable Miami-Dade

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS

1. Full Name of Committee

An Accountable Miami-Dade

Telephone

786-762-4990

Mailing Address (include city, state and zip code)

2929 SW 3 Ave Suite 220 Miami, FL 33129

Street Address (include city, state and zip code)

2929 SW 3 Ave Suite 220 Miami, FL 33129

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

| Name of Affiliated or Connected Organization | Mailing Address | Relationship |
|--|-----------------|--------------|
| N/A | | |

3. Area, Scope and Jurisdiction of the Committee

Ballot referendum Miami-Dade County.

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

Campaign Finance

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 |
|-----------------|--|-----------------------------|
| Anthony Brunson | 801 Brickell Ave Suite 900 Miami, FL 33131 | Treasurer |

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 Address | Committee Title or Position |
|--------------|---|-----------------------------|
| Monica Russo | 2929 SW 3 Ave Suite 220 Miami, FL 33129 | Chairwoman |

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 |
|-----------|-----------------|---------------|-------|
| None | | | |

8. List Any Issues this Committee is Supporting: Campaign Finance referendum in Miami-Dade County.

List Any Issues this Committee is Opposing: N/A

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?

Return to contributors or contribute to a 501(c)3 or 527 organization.

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

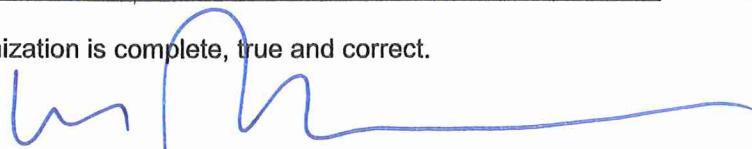
| Name of Bank or Depository & Account Number | Mailing Address |
|---|--|
| Bank United | 900 SE 3rd Ave, Suite 100 Fort Lauderdale, FL 33316 |

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 of Official | Mailing Address |
|--------------|----------------------------|-----------------------------|------------------------|
| 1024 990 | w/i a year annually | IRS IRS | Ogden, UT Ogden, UT |

STATE OF Florida Miami-Dade COUNTY

I, Monica Russo, certify that the information in this Statement of Organization is complete, true and correct.

X  5/11/16
Signature of Chairman of Political Committee Date