



Tel: 305-442-2200
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www.bdo.com

2121 Ponce De Leon Boulevard
11th Floor
Coral Gables, FL 33134

September 26, 2016

VIA COURIER

Miami-Dade County - Division of Elections
ATTN: MARIA ACOSTA
2700 NW 87th Avenue
Suite 100
Doral, FL 33170

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

RE: Coral Gables First - PC

Division of Elections:

Attached hereto please find the original executed documents as it related to Coral Gables First, PC, and they are as follows:

- 1) DS-DE 5 Statement of Organization of Political Committee
- 2) DS-DE 41 Registered Agent Statement of Appointment
- 3) DS-DE 6 Appointment of Campaign Treasurer And Designation of Campaign Depository For Political Committees
- 4) MD-ED 10 Campaign Treasurer's Report MD Electronic Filing Requirements and
- 5) MD-ED 2 Access to handbook and the Election Laws of the State of FL

Please let me know if you need any additional information.

Sincerely,

Gloria Maggiolo
RA for Coral Gables First

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

1. Full Name of Committee

Coral Gables First

Telephone

(305) 442-2200

Mailing Address (include city, state and zip code)

2121 Ponce de Leon Blvd., 11th Floor, Coral Gables, FL 33134

Street Address (include city, state and zip code)

2121 Ponce de Leon Blvd., 11th Floor, Coral Gables, FL 33134

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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

Miami-Dade County - to support or oppose candidates for state, county and municipal office and other activities allowed under Florida election law

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

Legal - reform of local government

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
Christopher Zoller	2121 Ponce de Leon Blvd. 11th Floor Coral Gables, FL 33134	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
Margarita Rohaidy Delgado	2121 Ponce de Leon Blvd., 11th Floor, Coral Gables, FL 33134	Chairperson

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
To be determined			

8. List Any Issues this Committee is Supporting: To be determined
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?
 Any activities allowed under Florida law for disposal of residual funds

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

Name of Bank or Depository & Account Number	Mailing Address
Professional Bank	396 Alhambra Circle, Suite 255, Coral Gables, FL 33134

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
Form 8871 Form 1120 POL Form 990 as may be required	Upon formation March 15, annually May 15, annually	Internal Revenue Service	Ogden, Utah 84201

STATE OF Florida Miami-Dade COUNTY

I, Margarita Rohaidy Delgado, certify that the information in this Statement of

Organization is complete, true and correct.

X Margarita Rohaidy Delgado
 Signature of Chairman of Political Committee

9/22/16
 Date

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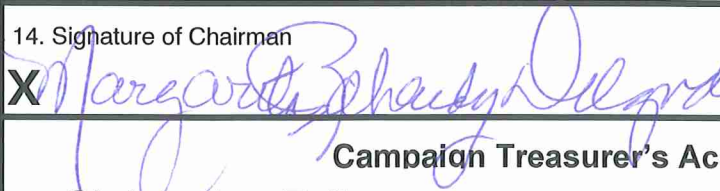
**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

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CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Coral Gables First		2. Telephone (305) 442-2200	
3. Name of Treasurer or Deputy Treasurer Christopher Zoller		4. Email (optional)	
5. Telephone (optional) (305) 442-2200		6. Mailing Address 2121 Ponce de Leon Blvd., 11th Floor, Coral Gables, FL 33143	
7. Street Address 2121 Ponce de Leon Blvd., 11th Floor, Coral Gables, FL 33143			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Professional Bank		10. Street Address 396 Alhambra Circle, Suite 255	
11. City Coral Gables		12. State FL	13. Zip Code 33134
14. Signature of Chairman 		15. Name of Chairman (Print or Type) Margarita Rohaidy Delgado	

Campaign Treasurer's Acceptance of Appointment

I, Christopher Zoller , do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Coral Gables First
(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.**

9/22/16
Date


Signature of Campaign Treasurer or Deputy Treasurer

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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ELECTIONS DEPARTMENT

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

Registered Agent and Office Information

Name Gloria Maggiolo		Telephone (305) 442-2200
Street Address 2121 Ponce de Leon Blvd., 11th Floor		
City Coral Gables	State FL	Zip Code 33134
Mailing Address 2121 Ponce de Leon Blvd., 11th Floor		
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

9/26/16
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 Coral Gables First		
Street Address 2121 Ponce de Leon Blvd., 11th Floor		Telephone (305) 442-2200
City Coral Gables	State FL	Zip Code 33134


Signature of Chairperson

Margarita Rohaidy Delgado
Printed Name of Chairperson

09/22/16
Date



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

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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:

Margarita

Rohaidy

Delgado

First Name

Middle Name

Last Name

Coral Gables First

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)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: [Signature]
Date: 09/22/16

Primary Telephone Number: (305) 442-2200

Alternate Telephone Number: (305) 774-7110

E-mail address: margarita.delgado@coralgablesfirst.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: Coral Gables First

Party Executive Committee: _____

Other: _____

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I, Margarita Rohaidy Delgado
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.

I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Absentee Ballot Campaign Report ([MD-ED 26](#)) to disclose the names of paid campaign workers engaged in absentee ballot activities.

Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity ([MD-ED 19](#)) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person.

Margarita Rohaidy Delgado
Signature of Candidate or Chairperson

09/22/2016
Date

Day Time Telephone Number: (305) 442-2200

Alternate Contact Number: (305) 774-7110

Email Address: margarita.delgado@coralgablesfirst.com