

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE  
ELECTIONS

**1. Full Name of Committee**

RESIDENTS FIRST MIAMI DADE

Telephone

305-766-3520

Mailing Address (include city, state and zip code)  
1825 PONCE DE LEON BLVD, SUITE 373  
CORAL GABLES, FL 33134

Street Address (include city, state and zip code)  
1825 PONCE DE LEON BLVD, SUITE 373  
CORAL GABLES, FL 33134

**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	N/A	N/A

**3. Area, Scope and Jurisdiction of the Committee**

PC TO SUPPORT OF OPPOSE BALLOT ISSUES AND/OR CANDIDATES IN MIAMI-DADE COUNTY.

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

**POLITICAL, 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
LAUREN PARDO	1825 PONCE DE LEON BLVD, SUITE 373 CORAL GABLES, FL 33134	CHAIRPERSON/TREASURER

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MIAMI-DADE ELECTIONS

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

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?

CONTRIBUTE TO PCs, ECOs, 501 (C)(3)s , AND OTHER ACTIVITIES ALLOWED BY LAW

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

Name of Bank or Depository & Account Number	Mailing Address
REGIONS BANK	3516 MAIN HIGHWAY MIAMI, FL 33133

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 SS4 FORM 8871 FORM 1120POL FORM 990	UPON FORMATION UPON FORMATION MARCH 15, ANNUALLY MAY 15, ANNUALLY	INTERNAL REVENUE SERVICE	OGDEN, UT 84201

STATE OF FLORIDA

MIAMI-DADE COUNTY

I, LAUREN PARDO, certify that the information in this Statement of

Organization is complete, true and correct.

**X**   
Signature of Chairman of Political Committee

7-27-18  
Date

**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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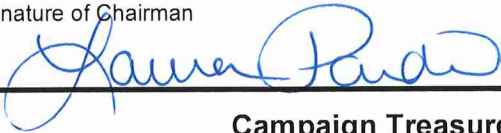
MIAMI-DADE  
ELECTIONS

CHECK APPROPRIATE BOX:

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Original Appointment of Treasurer       Reappointment of Treasurer       Deputy Treasurer

1. Committee or Organization RESIDENTS FIRST MIAMI DADE		2. Telephone (305 ) 766-3520	
3. Name of Treasurer or Deputy Treasurer LAUREN PARDO		4. Email (optional) LAUREN@GROUNDSWELLSTRATEGIES.NET	
5. Telephone (optional) (305 ) 766-3520			
6. Mailing Address 1825 PONCE DE LEON BLVD, SUITE 373, CORAL GABLES, FL 33134			
7. Street Address 1825 PONCE DE LEON BLVD, SUITE 373, CORAL GABLES, FL 33134			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank REGIONS		10. Street Address 3516 MAIN HIGHWAY	
11. City MIAMI		12. State FL	13. Zip Code 33133

14. Signature of Chairman <b>X</b> 	15. Name of Chairman (Print or Type) LAUREN PARDO
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**Campaign Treasurer's Acceptance of Appointment**

I, LAUREN PARDO, do hereby accept the appointment as  
(Please Print or Type)  
treasurer or deputy treasurer for RESIDENTS FIRST MIAMI DADE  
(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.

7-27-18      **X**   
Date      Signature of Campaign Treasurer or Deputy Treasurer

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**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)

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MIAMI-DADE  
ELECTIONS

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

**Registered Agent and Office Information**

Name LAUREN PARDO	Telephone 305-766-3520
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Street Address 1825 PONCE DE LEON BLVD, SUITE 373
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City CORAL GABLES	State FL	Zip Code 33134
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Mailing Address 1825 PONCE DE LEON BLVD, SUITE 373
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City CORAL GABLES	State FL	Zip Code 33134
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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

7-27-18  
 \_\_\_\_\_  
 Date

**Former Registered Agent and Office Information (for changes only)**

Name	Telephone
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Street Address
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City	State	Zip Code
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**Committee or Organization Information**

Name of Committee or Organization RESIDENTS FIRST MIAMI DADE
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Street Address 1825 PONCE DE LEON BLVD, SUITE 373	Telephone 305-766-3520
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City CORAL GABLES	State FL	Zip Code 33134
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 \_\_\_\_\_  
 Signature of Chairperson

LAUREN PARDO  
 \_\_\_\_\_  
 Printed Name of Chairperson

7-27-18  
 \_\_\_\_\_  
 Date



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

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MIAMI-DADE ELECTIONS

Candidate/Chairperson:

Lauren

Pardo

First Name

Middle Name

Last Name

Residents First Miami-Dade

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] Candidate / Chairperson Signature

Date: 7-27-18

Primary Telephone Number: 305-766-3520

Alternate Telephone Number:

E-mail address: lauren@lpstrategies.net

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



2018 JUL 27 PM 2:09

- Candidate (office sought): \_\_\_\_\_
- Candidate's Florida Voter Registration Number: \_\_\_\_\_
- Political Committee: Residents First Miami-Dade
- Party Executive Committee: \_\_\_\_\_
- Other: \_\_\_\_\_

MIAMI-DADE  
ELECTIONS

I, Lauren Pardo

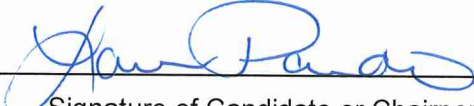
*(Please print name of Candidate or Chairperson)*

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 Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and 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 Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.

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, if applicable.

 \_\_\_\_\_  
Signature of Candidate or Chairperson

7-27-18  
Date

Day Time Telephone Number: 305-766-3520

Alternate Contact Number: 305-766-3520

Email Address: lauren@LPSTRATEGIES.net

*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.*