

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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2018 AUG 13 AM 10:05

MIAMI-DADE
ELECTIONS

1. Full Name of Committee

South Florida Taxpayers Alliance PC

Telephone

305-531-2424

Mailing Address (include city, state and zip code)

600 Brickell Avenue, Suite 1715, Miami Florida, 33131

Street Address (include city, state and zip code)

600 Brickell Avenue, Suite 1715, Miami Florida, 33131

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

Candidates and Issues in Miami-Dade County

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

Supporting candidates who use taxpayer money wisely

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
Jose A. Riesco	2600 South Douglas Road Suite 900 Coral Gables, FL 33134	Treasurer
Jeannine Riesco Miranda	2600 South Douglas Road Suite 900 Coral Gables, FL 33134	Deputy 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
Juan-Carlos Planas, Esq.	600 Brickell Avenue Suite 1715 Miami Florida, 33131	Chairman and 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 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?
 Donation to 501(c)(3) charitable organization.

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
SS4	Upon Formation	Internal Revenue Service	Ogden, UT 84201
Form 8871	Upon Formation	Internal Revenue Service	Ogden, UT 84201
Form 1120 POL	March 15, Annually	Internal Revenue Service	Ogden, UT 84201
Form 990	May 15, Annually	Internal Revenue Service	Ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY

I, Juan-Carlos Planas, certify that the information in this Statement of

Organization is complete, true and correct.

X 
 Signature of Chairman of Political Committee


 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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ELECTIONS

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization South Florida Taxpayers Alliance PC		2. Telephone (305) 531-2424
3. Name of Treasurer or Deputy Treasurer Jose A. Riesco	4. Email (optional) jose@riescoandcompany.com	5. Telephone (optional) (305) 445-0777


6. Mailing Address
2600 South Douglas Road, Suite 900, Coral Gables, FL 33134

7. Street Address
2600 South Douglas Road, Suite 900, Coral Gables, FL 33134

8. The following bank has been designated as the Primary Depository Secondary Depository

9. Name of Bank Regions Bank	10. Street Address 3516 Main Highway
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11. City Miami	12. State Florida	13. Zip Code 33133
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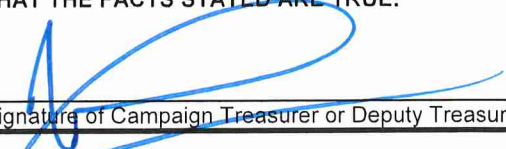
14. Signature of Chairman X 	15. Name of Chairman (Print or Type) Juan-Carlos Planas
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Campaign Treasurer's Acceptance of Appointment

I, Jose A. Riesco, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for South Florida Taxpayers Alliance PC
(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.

8/10/18
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer


**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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ELECTIONS

CHECK APPROPRIATE BOX:

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Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

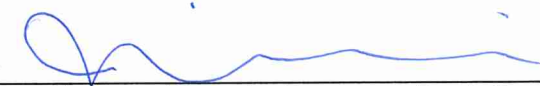
1. Committee or Organization South Florida Taxpayers Alliance PC		2. Telephone (305) 531-2424	
3. Name of Treasurer or Deputy Treasurer Jeannine Riesco Miranda		4. Email (optional) jen@riescoandcompany.com	
5. Telephone (optional) (305) 445-0777			
6. Mailing Address 2600 South Douglas Road, Suite 900, Coral Gables, FL 33134			
7. Street Address 2600 South Douglas Road, Suite 900, 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 Bank		10. Street Address 3516 Main Highway	
11. City Miami		12. State Florida	13. Zip Code 33133
14. Signature of Chairman 		15. Name of Chairman (Print or Type) Juan-Carlos Planas	

Campaign Treasurer's Acceptance of Appointment

I, Jeannine Riesco Miranda, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for South Florida Taxpayers Alliance PC
(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.

8/10/18
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 Juan-Carlos Planas, Esq.	Telephone 305-929-8500
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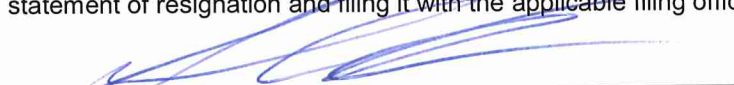
Street Address
600 Brickell Avenue, Suite 1715

City Miami	State Florida	Zip Code 33131
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Mailing Address
600 Brickell Avenue, Suite 1715

City Miami	State Florida	Zip Code 33131
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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.

 _____ 8/10/18
Signature of Registered Agent **Date**

Former Registered Agent and Office Information (for changes only)

Name	Telephone
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Street Address

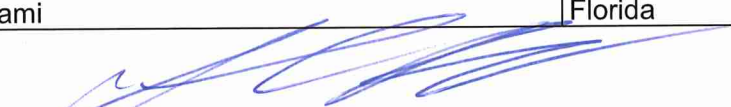
City	State	Zip Code
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Committee or Organization Information

Name of Committee or Organization
South Florida Taxpayers Alliance PC

Street Address 600 Brickell Avenue, Suite 1715	Telephone 305-531-2424
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City Miami	State Florida	Zip Code 33131
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 _____
Signature of Chairperson

Juan-Carlos Planas 8/10/18

Printed Name of Chairperson **Date**



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

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MIAMI-DADE ELECTIONS

Candidate/Chairperson:

Juan-Carlos

Planas

First Name

Middle Name

Last Name

South Florida Taxpayers Alliance PC

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: 8/10/18

Primary Telephone Number: 850-980-6542

Alternate Telephone Number:

E-mail address: jcplanas@kymplaw.com

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



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Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: South Florida Taxpayers Alliance PC

Party Executive Committee: _____

Other: _____

I, Sum-Patley Plenas

(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

8/13/18
Date

Day Time Telephone Number: 850 980 6542

Alternate Contact Number: _____

Email Address: scplenas@kypian.com

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.

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



2018 AUG 13 AM 10:05

Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: South Florida Taxpayers Alliance PC

Party Executive Committee: _____

Other: _____

Juan-Carlos Planas

I, _____
(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.

Signature of Candidate or Chairperson

8/10/18
Date

Day Time Telephone Number: 850-980-6542

Alternate Contact Number: _____

Email Address: jcplanas@kymplaw.com

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.