

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee

Telephone

CITIZENS FOR EXCELLENCE IN MIAMI-DADE COUNTY GOVERNMENT

305-529-5440

Mailing Address (include city, state and zip code)

2600 S DOUGLAS ROAD, SUITE 800, CORAL GABLES, FL 33134

Street Address (include city, state and zip code)

2600 S DOUGLAS ROAD, SUITE 800, 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
NONE	N/A	N/A

3. Area, Scope and Jurisdiction of the Committee

MIAMI-DADE COUNTY

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

CIVIC AND GOVERNMENTAL POLICY EDUCATION

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	2600 S DOUGLAS ROAD SUITE 800 CORAL GABLES, FL33134	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
MICHAEL MONTIEL	1200 BRICKELL AVENUE SUITE 950 MIAMI, FL 33131	CHAIRMAN 2023 MAR 17 AM 10:12 MIAMI DADE COUNTY ELECTIONS DEPARTMENT

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	N/A	N/A	N/A

8. List Any Issues this Committee is Supporting: NONE

List Any Issues this Committee is Opposing: NONE

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?

RESIDUAL FUNDS WILL BE GIVEN TO CHARITABLE ORGANIZATIONS 501(C)3

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

Name of Bank or Depository & Account Number	Mailing Address
OCEAN BANK	780 NW 42ND AVEUE MIAMI, FL, 33126

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 1120 POL	ANNUALLY	INTERNAL REVENUE	OGDEN, UT, 84201

STATE OF FLORIDA MIAMI-DADE COUNTY

I, MICHAEL MONTIEL, certify that the information in this Statement of

Organization is complete, true and correct.

X


Signature of Chairman of Political Committee

3/10/2023
Date

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(2) and 106.021(1), F.S.)


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CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

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1. Committee CITIZENS FOR EXCELLENCE IN MIAMI-DADE COUNTY GOVERNMENT		2. Telephone (3053) 529-5440	
3. Name of Treasurer or Deputy Treasurer CARLOS M. TRUEBA		4. Email (optional) cpazos@gemrtcpa.com	
5. Telephone (optional) (305) 529-5440			
6. Mailing Address 2600 S DOUGLAS ROAD, SUITE 800, CORAL GABLES, FL 33134			
7. Street Address 2600 S DOUGLAS ROAD, SUTE 800, CORAL GABLES, FL			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank OCEAN BANK		10. Street Address 780 NW 42ND AVENUE	
11. City MIAMI		12. State FLORIDA	13. Zip Code 33126
14. Signature of Chairman 		15. Name of Chairman (Print or Type) MICHAEL MONTIEL	

Campaign Treasurer's Acceptance of Appointment

CARLOS M. TRUEBA

I, _____, do hereby accept the appointment as

(Please Print or Type)

treasurer or deputy treasurer for **CITIZENS FOR EXCELLENCE IN MIAMI-DADE COUITY GOVE**
(Committee)

**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.**

March 9, 2023

Date

X



Signature of Campaign Treasurer or Deputy Treasurer

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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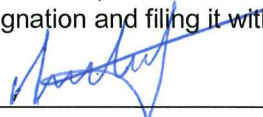
MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

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

Registered Agent and Office Information

Name MICHAEL MONTIEL		Telephone 305-377-1000
Street Address 1200 BRICKELL AVENUE, SUITE 950		
City MIAMI	State FLORIDA	Zip Code 33131
Mailing Address 1200 BRICKELL AVENUE, SUITE 950		
City MIAMI	State FLORIDA	Zip Code 33131

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.



3/10/2023

Signature of Registered Agent

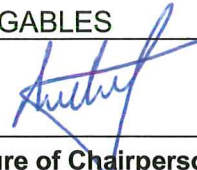
Date

Former Registered Agent and Office Information (for changes only)

Name TOMAS P. REGALADO		Telephone 305-529-5440
Street Address 987 SW 37TH AVENUE, APT 510		
City MIAMI	State FLORIDA	Zip Code 33135

Committee or Organization Information

Name of Committee or Organization CITIZENS FOR EXCELLENCE IN MIAMI-DADE COUNTY GOVERNMENT		
Street Address 2600 S DOUGLAS ROAD, SUITE 800		Telephone 305-529-5440
City CORAL GABLES	State FLORIDA	Zip Code 33134



Signature of Chairperson

MICHAEL MONTIEL

3/10/2023

Printed Name of Chairperson

Date



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

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Candidate/Chairperson:

MICHAEL

ALEXANDER

MONTIEL

First Name

Middle Name

Last Name

CITIZENS FOR EXCELLENCE IN MIAMI-DADE GOVERNMENT

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 (https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.

[x] Political Committee Handbook (https://www.miamidade.gov/global/elections/political-committee-resources.page) Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by: [Signature] Candidate / Chairperson Signature

Date: 3/10/2023

Primary Telephone Number: 305-529-5440

Alternate Telephone Number: N/A

E-mail address: cpazos@gemrtcpa.com

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



Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____

Political Committee: CITIZENS FOR EXCELLENCE IN MIAMI-DADE COUNTY GOVERNMENT

Party Executive Committee: _____

Other: _____

I, MICHEL MONTIEL

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ELECTIONS DEPARTMENT

(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.

3/10/2023

Signature of Candidate or Chairperson

Date

Day Time Telephone Number: 205-529-5440

Alternate Contact Number: N/A

Email Address: cpazos@gemrtcpa.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.