

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS
TELEPHONE
786-382-7171

1. Full Name of Committee

Protect our Future

Telephone

786-382-7171

Mailing Address (include city, state and zip code)

c/o Rochelle Levin
18495 S Dixie Highway, #158
Miami, FL 33157

Street Address (include city, state and zip code)

18495 S Dixie Highway, #158
Miami, FL 33143

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

Miami-Dade County- to support or oppose candidates for 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.)

political

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
Janet Schwartz	18495 S Dixie Hwy. #158 Miami, FL 33157	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
Rochelle Levin	18495 S Dixie Hwy# 158 Miami, Florida 33157	Chairperson
Janet Schwartz	18495 S. Dixie Hwy #158 Miami, Florida 33157	Treasurer

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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
TBD			

8. List Any Issues this Committee is Supporting: N/A

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 donate to 501(c) 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 of America Acct # TBD	20099 SW 127th Avenue Miami, FL 33177

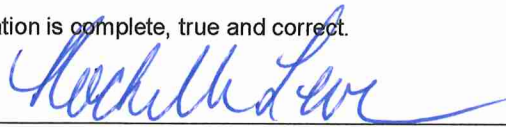
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
Form SS-4	upon formation	Internal Revenue Serv	Ogden, Utah 84201
Form 8871	upon formation	Internal Revenue Serv	Ogden, Utah 84201

STATE OF Florida Miami-Dade COUNTY

I, Rochelle Levin, certify that the information in this Statement of

Organization is complete, true and correct.

X 
Signature of Chairman of Political Committee

4/12/19
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.)

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization
Protect Our Future
2. Telephone
(786) 382-7171

3. Name of Treasurer or Deputy Treasurer 4. Email (optional)
Janet Schwartz
5. Telephone (optional)
()

6. Mailing Address
C/O ROCHELLE LEVIN 18495 S DIXIE HIGHWAY #158, MIAMI, FLORIDA 33157

7. Street Address
18495 S DIXIE HIGHWAY #158, MIAMI, FLORIDA 33157

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

9. Name of Bank
Bank of America
10. Street Address
20099 SW 127TH AVENUE

11. City
MIAMI
12. State
FL
13. Zip Code
33177

14. Signature of Chairman
[Signature]
15. Name of Chairman (Print or Type)
Rochelle Levin

Campaign Treasurer's Acceptance of Appointment
I, JANET SCHWARTZ, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Protect Our Future
(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.**

4/12/2019 X *[Signature]*
Date Signature of Campaign Treasurer or Deputy Treasurer

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

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

Registered Agent and Office Information

Name
Rochelle Levin Telephone
786-382-7171

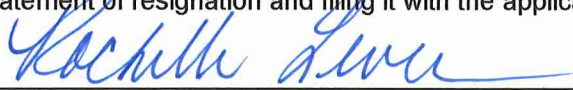
Street Address
18495 South Dixie Highway, #158

City State Zip Code
Miami FL 33157

Mailing Address
c/o Rochelle Levin, 18495 S. Dixie Hwy. #158

City State Zip Code
Miami FL 33157

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.



4/12/19

Signature of Registered Agent

Date

Former Registered Agent and Office Information (for changes only)

Name Telephone

Street Address

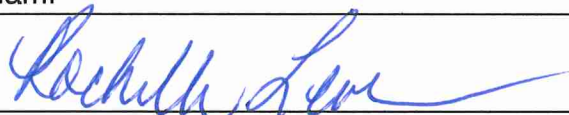
City State Zip Code

Committee or Organization Information

Name of Committee or Organization
Protect Our Future

Street Address Telephone
c/o Rochelle Levin, 18495 South Dixie Highway, #158 786-382-7171

City State Zip Code
Miami FL 33170



Signature of Chairperson

Rochelle Levin

4/12/19

Printed Name of Chairperson

Date



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

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Candidate/Chairperson:

MIAMI-DADE ELECTIONS

Rochelle

Levin

First Name

Middle Name

Last Name

Protect Our Future

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) 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.
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp) 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: Rochelle Levin Candidate / Chairperson Signature

Date: 4/12/19

Primary Telephone Number: 786-382-7171

Alternate Telephone Number:

E-mail address: Shellie.levin@slevinsolutions.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: Protect Our Future

Party Executive Committee: _____

Other: _____

I, Rochelle Levin

(Please print name of Candidate or Chairperson)

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I 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.

4/12/19

Signature of Candidate or Chairperson

Date

786-382-7171

Day Time Telephone Number: _____

Alternate Contact Number: _____

Shellie.levin@slevinsolutions.com

Email Address: _____

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.