STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

1. Full Name of Committee

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| Protect Our Future | | ELEU | 786-382-7171 |
|--|---|-----------------------------|------------------------|
| Mailing Address (include city c/o Rochelle Levin 18495 S Dixie Highway, # Miami, FL 33157 | | | • |
| Street Address (include city, s 18495 S Dixie Highway, #158 Miami, FL 33157 | state and zip code) | | |
| 2. Affiliated or Connected Org committees) | ganizations (includes other committees of cor | ntinuous ex | istence and political |
| Name of Affiliated or Connected Organization | Mailing Address | | Relationship |
| N/A | N/A | | N/A |
| 3. Area, Scope and Jurisdicti Miami-Dade County to sup activities allowed under Flo | port or oppose candidates for county and | d municipa | ll office and other |
| 4. Nature of Organization or 0 political | Organization's Special Interest (e.g., medical, | legal, educa | ntion, etc.) |
| 5. Identify by Name, Address | and Position, the Custodian of Books and Ac | counts (inc | lude treasurer's name) |
| Full Name | Mailing Address | Committee Title or Position | |
| | 18495 S Dixie Hwy #158 Miami, FL 33157 | Treasure | r |

| 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 Addr | ess | Committee Title or Position | | | | |
| Rochelle Levin | 18495 S Dixie Highway, Miami, FL 33157 | #158 C | Chairperson | | | | |
| Janet Schwartz | 18495 S Dixie Highway, Miami, FL 33157 | 18495 S Dixie Highway, #158 Miami, FL 33157 | | Treasurer | | | |
| 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 S | Office Sought Party | | | | |
| Cindy L Lerner | PO Box 566655 Miami, FL 33256 | County Commi 7 | County Commission District | | | | |
| 8. List Any Issues this C | ommittee is Supporting: N/A | | | TA R | | | |
| 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 501C 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 Account# 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 N | ailing 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 | | | | | |
| Rochelle Levin , certify that the information in this Statement of | | | | | | | |
| Organization is complete, true and conject. X 4/26/19 | | | | | | | |
| Signature of Chairman of Political Committee Date | | | | | | | |