

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE  
ELECTIONS

**1. Full Name of Committee**

South Dade Matters

Telephone

786-264-2987

Mailing Address (include city, state and zip code)

P.O. Box 653223; Miami, Florida 33265

Street Address (include city, state and zip code)

P.O. Box 653223; Miami, Florida 33265

**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**

Supporting Candidates in Miami-Dade County

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

South Dade Matters will educate, advocate, support or oppose candidates for Miami-Dade county and municipal office and other actives permissible under Florida State election law.

**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
Isabel Barcelo	P.O. Box 653223 Miami, Florida	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
Johnny G. Farias	13718 SW 283 Terrace Miami, Florida 33033	Chairperson

**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?**

Any activities allowed under Florida law for disposal of residual funds

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

Name of Bank or Depository & Account Number	Mailing Address
BB&T	19455 S Dixie Hwy Cutler Bay, Florida 33157

**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	IRS	Ogden, UT 84201
Form 8871	Upon Formation	IRS	Ogden, UT 84201
Form 1120 POL	March, 15, Annually	IRS	Ogden, UT 84201
Form 990	May 15, Annually	IRS	Ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY

I, Johnny G. Farias, certify that the information in this Statement of

Organization is complete, true and correct.

**X**

  
Signature of Chairman of Political Committee

November 1, 2019

Date

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**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 <p align="center">South Dade Matters</p>		2. Telephone (786 ) 264-2987	
3. Name of Treasurer or Deputy Treasurer <b>Isabel Barcelo</b>		4. Email (optional) southdadematters@aol.com	
5. Telephone (optional) (786 ) 241-5651			
6. Mailing Address P.O. 653223 ; Miami, Florida 33365			
7. Street Address 1555 NE 36 Ave; Homestead, Florida 33033			
8. The following bank has been designated as the <input checked="" type="checkbox"/> <b>Primary Depository</b> <input type="checkbox"/> <b>Secondary Depository</b>			
9. Name of Bank BB&T		10. Street Address 19455 S Dixie Hwy	
11. City Miami		12. State Florida	13. Zip Code 33157
14. Signature of Chairman <b>X</b> 		15. Name of Chairman (Print or Type) Johnny G. Farias	

**Campaign Treasurer's Acceptance of Appointment**

I, **Isabel Barcelo**, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for South Dade Matters  
(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.**

11/1/19  
Date

**X**   
Signature of Campaign Treasurer or Deputy Treasurer



**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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ELECTIONS

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

**Registered Agent and Office Information**

Name: Isabel Barcelo      Telephone: 786-241-5651

Street Address: 1555 NE 356 Ave

City: Homestead      State: Florida      Zip Code: 33033

Mailing Address: P.O. Box 653223

City: Miami      State: Florida      Zip Code: 33265

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.



11/1/2019

Signature of Registered Agent

Date

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

Name: Venusmia Fernandez      Telephone: 786-280-2588

Street Address: 18495 South Dixie Highway #320

City: Miami      State: Florida      Zip Code: 33157

**Committee or Organization Information**

Name of Committee or Organization: South Dade Matters

Street Address: P.O. Box 653223      Telephone: 786-264-2987

City: Miami      State: Florida      Zip Code: 33265



Signature of Chairperson

Johnny G. Farias

11/1/2019

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

Johnny

G

Farias

First Name

Middle Name

Last Name

South Dade Matters

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:

Handwritten signature

Candidate / Chairperson Signature

Date:

11/1/19

Primary Telephone Number:

786-264-2987

Alternate Telephone Number:

786-714-8889

E-mail address:

southdadematters@aol.com

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



Candidate (office sought): \_\_\_\_\_

Candidate's Florida Voter Registration Number: \_\_\_\_\_

Political Committee: South Dade Matters

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

I, Johnny G. Farias

*(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

11/01/2019

\_\_\_\_\_  
Date

Day Time Telephone Number: 786-264-2987

Alternate Contact Number: 786-714-8889

Email Address: southdadematters@aol.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.*

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