

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

## 1. Full Name of Committee

Alliance for a Stronger Miami-Dade

Telephone

305-789-6673

Mailing Address (include city, state and zip code)

Anthony Brunson, P.A.  
12000 Biscayne Blvd, Suite 503  
Miami, FL 33181

Street Address (include city, state and zip code)

Anthony Brunson, P.A.  
12000 Biscayne Blvd, Suite 503  
Miami, FL 33181

## 2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship
NONE	NONE	

## 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.)

Supporting or opposing Candidates and Political, Social, Economic  
Issues Impacting Miami-Dade

## 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
Anthony Brunson, P.A.	12000 Biscayne Blvd, Suite 503 Miami, FL 33181	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
Irmine Extra	17042 NW 9th Court Miami Gardens, FL 33169	Chairperson
Anthony Brunson, P.A.	12000 Biscayne Blvd, suite 503 Miami, FL 33181	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 Sought	Party
To be determined			

**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?**

Donate funds to Charitable Organizations (501c3) or 527

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

Name of Bank or Depository & Account Number	Mailing Address
Bank United	12290 Biscayne Blvd North Miami, FL 33181

**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 Services	ogden, UT 84201
Form 8871	Upon Formation	Internal Revenue Services	ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY ogden@utcc@utcc

I, Irmine Extra, certify that the information in this Statement of ogden@utcc@utcc

Organization is complete, true and correct.

**X**

[Signature]  
Signature of Chairman of Political Committee

11/1/22  
Date