| STATEMENT OF ORGANIZATION   |   | OFFICE USE ONLY                           |                           |  |  |
|---|---|---|---------------------------|--|--|
|   | AL COMMITTEE  | RECEIVED                                  |                           |  |  |
| (PLEASE TYPE)   |   | 2019 AUG 20 AM 11: 05                     |                           |  |  |
|   |   | MIAMI-DADE COUNTY<br>ELECTIONS DEPARTMENT |                           |  |  |
| 1. Full Name of Committee   |   |   | Telephone                 |  |  |
| A Seat on the Bench, Inc.   |   |   | (305)778-2366             |  |  |
| Mailing Address (include city, state and zip code)<br>9999 NE 2nd Avenue, Suite 310, Miami Shores, FL 33138           |   |   |                           |  |  |
| Street Address (include city,   | state and zip code)                                     |   |                           |  |  |
| 9999 NE 2nd Avenue, Su  | ite 310, Miami Shores, FL 33138                         |   |                           |  |  |
| 2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees) |   |   |                           |  |  |
| Name of Affiliated or<br>Connected Organization   | Mailing Addres  | s   | Relationship              |  |  |
| None  |   |   |                           |  |  |
| 3. Area, Scope and Jurisdiction of the Committee<br>Miami-Dade County Judicial Races                                  |   |   |                           |  |  |
| 4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)<br>Judiciary     |   |   |                           |  |  |
| 5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)             |   |   |                           |  |  |
| Full Name   | Mailing Address   | Comr                                      | mmittee Title or Position |  |  |
| Marva L. Wiley  | 9999 NE 2nd Avenue, Suite 310<br>Miami Shores, FL 33138 | 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   | Mailing Address   |                   | Committee Title or Position          |  |
| Danielle Geathers  |  | 9999 NE 2nd Avenue, Suite 310<br>Miami Shores, FL 33138 |                   | Chief Executive Officer              |  |
|  | s, Office Sought and Party Affiliaing (if none, please indicate)   | ation Each Candidat                                     | e or Other Indivi | dual that this                       |  |
| Full Name  | Mailing Address  | Office  | Sought            | Party                                |  |
| Tanya Brinkley<br>Olanike Adebayo<br>Michelle Delancy  | 2745 Ponce de Leon Blvd, Coral Gables, FL 33134<br>550 Northeast 124th Street<br>North Miami, FL 33161<br>2600 Douglas Road, Suite # 900, Coral Gables, FL 3 | Circuit Judge<br>Circuit Judge<br>Circuit Judge         | Nonpartisan       |                                      |  |
| 8. List Any Issues this Committee is Supporting: the election of diverse candidates for Miami-Dade<br>List Any Issues this Committee is Opposing: <sup>judiciary</sup>   |  |   |                   |                                      |  |
| 9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party<br>N/A   |  |   |                   |                                      |  |
| 10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Image: Comparison of Compari |  |   |                   |                                      |  |
| 11. List all Banks, Safety   | Deposit Boxes, or Other Depos  | itories Used for Co                                     | mmittee Funds     | -DA                                  |  |
| Name of Bank or Depository & Account Number Mailing Address  |  |   |                   |                                      |  |
| Banterioa  |  | 9499 NE 2nd Av<br>Miami Shores, F                       |                   | VED<br>AMII:05<br>COUNTY<br>PARTMENT |  |
| 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        | lailing Address                      |  |
| N/A  |  |   |                   |                                      |  |
| STATE OF Florida   |  | Miami   | -Dade             | COUNTY                               |  |
| I, Danielle A. Geathers , certify that the information in this Statement of  |  |   |                   |                                      |  |
| Organization is complete, true and correct.  |  |   |                   |                                      |  |
| X Denill Grandbard August 14, 2019<br>Signature of Chairman of Political Committee Date  |  |   |                   |                                      |  |

| APPOINTMENT OF CAMPAIGN TREASURER<br>AND DESIGNATION OF CAMPAIGN<br>DEPOSITORY FOR<br>POLITICAL COMMITTEES  |   |               |   | IVED                         |  |
|---|---|---------------|---|------------------------------|--|
| (Sections 106.011(2) and 106.021(1), F.S.)  |   |               | 2019 AUG 20                               |                              |  |
|   |   |               | MIAMI-DAD<br>ELECTIONS D                  | E COUNTY<br>EPARTMENT        |  |
| CHECK APPROPRIATE BOX:  |   |               |   |                              |  |
| Initial Filing for: 🗹 Primary Treasurer 🗌 Deputy Treasurer  |   |               |   | OFFICE USE ONLY              |  |
| Re-filing to Change: Primary Treasurer Deputy Treasurer   | Primary/S   | Seconda       | y Depository                              |                              |  |
| 1. Committee  |   | 2. Telephone  |   |                              |  |
| A SEAT ON THE BENCH   |   | (305)778-2366 |   | 2366                         |  |
| 3. Name of Treasurer or Deputy Treasurer 4. Email (optional)  |   |               | 5. Telephone (optional)<br>(305) 793-0701 |                              |  |
| 6. Mailing Address<br>9999 NE 2ND AVENUE, SUITE 310, MIAMI SHOI   | 6. Mailing Address<br>9999 NE 2ND AVENUE, SUITE 310, MIAMI SHORES, FL 33138 |               |   |                              |  |
| 7. Street Address<br>9999 NE 2ND AVENUE, SUITE 310, MIAMI SHORES, FL 33138  |   |               |   |                              |  |
| 8. The following bank has been designated as the  |   |               |   |                              |  |
| 9. Name of Bank<br>BANK OF AMERICA  | 10. Street Address<br>9499 NE 2ND AVENUE                                    |               |   |                              |  |
| 11. City<br>MIAMI SHORES  |   | 12. Sta<br>FL | te  | 13. Zip Code<br>33138        |  |
| 14. Signature of Chairman   | 15. Name of Chairman (Print or Type)  |               |   |                              |  |
| X Vounde another  | X Varialle Construct DANIELLE A. GEATHERS                                   |               |   |                              |  |
| Campaign Treasurer's Acceptance of Appointment  |   |               |   |                              |  |
| , MARVA L. WILEY  |   |               | , do herek                                | by accept the appointment as |  |
| (Please Print or Type)<br>A SEAT ON THE BENCH, INC.   |   |               |   |                              |  |
| treasurer or deputy treasurer for A SEAT ON THE BENCH, INC. (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. |   |               |   |                              |  |
| AUGUST 14, 2019 × Mandaly   |   |               |   |                              |  |
| Date DS-DE 6 (Rev. 4/19)  | Signature of  | Campa         | aign Treasurer or                         | Deputy Treasurer             |  |

| REGISTERED AGENT<br>STATEMENT OF APPOINTMENT<br>(Section 106.022, F.S.)  |                               | OFFICE USE ONLY<br>RECEIVED               |  |  |  |
|--|-------------------------------|---|--|--|--|
|  |                               | 2019 AUG 20 AM 11: 05                     |  |  |  |
| Original Appointment Change of Appointment   |                               | MIAMI-DADE COUNTY<br>ELECTIONS DEPARTMENT |  |  |  |
| Change of Mailing Address Change of Physica  |                               |   |  |  |  |
| Registered Agent and Office Information  |                               |   |  |  |  |
| Name<br>MARVA L. WILEY   |                               | Telephone<br>(305) 793-0701               |  |  |  |
| Street Address<br>9999 NE 2ND AVENUE, SUITE 310  |                               |   |  |  |  |
| City<br>MIAMI SHORES   | State                         |   |  |  |  |
| Mailing Address<br>9999 NE 2ND AVENUE, SUITE 310   |                               |   |  |  |  |
| City<br>MIAMI SHORES   | State<br>FL                   | Zip Code<br>33138                         |  |  |  |
| I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set<br>forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written<br>statement of resignation and filing it with the applicable filing officer.<br>AUGUST 14, 2019 |                               |   |  |  |  |
| Signature of Registered Agent  | Signature of Registered Agent |   |  |  |  |
| Former Registered Agent a  | nd Office                     | e Information (for changes only)          |  |  |  |
| Name   |                               | Telephone                                 |  |  |  |
| Street Address   |                               |   |  |  |  |
| City   | State                         | Zip Code                                  |  |  |  |
| Committee or   | Organiza                      | ation Information                         |  |  |  |
| Name of Committee or Organization<br>A SEAT ON THE BENCH, INC.   |                               |   |  |  |  |
| Street Address<br>9999 NE 2ND AVENUE, SUITE 310  |                               | Telephone<br>(305) 778-2366               |  |  |  |
| City<br>MIAMI SHORES   | City State                    |   |  |  |  |
| Danelle (acather<br>Signature of Chairperson   |                               |   |  |  |  |
| DANIELLE A. GEATHERS   |                               | AUGUST 14, 2019                           |  |  |  |
| Printed Name of Chairperson  |                               | Date                                      |  |  |  |