

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS

1. Full Name of Committee

A Better Miami-Dade

Telephone

305-445-0777

Mailing Address (include city, state and zip code)

2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

Street Address (include city, state and zip code)

2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

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

3. Area, Scope and Jurisdiction of the Committee

Miami-Dade County---candidate and ballot issues for county-wide and municipal elections

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

Good government

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

Jose A. Riesco, CPA

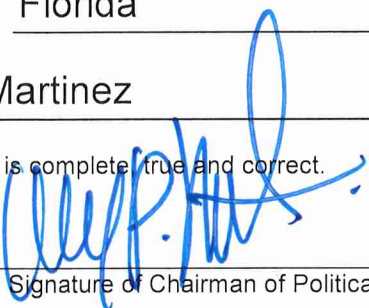
2600 S. Douglas Road, Suite 900
Coral Gables, Florida 33134

Treasurer

Jeannine R. Miranda

2600 S. Douglas Road, Suite 900
Coral Gables, Florida 33134

Deputy 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	
Alex Martinez	2600 S. Douglas Road, Suite 900 Coral Gables, Florida 33134	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 disposition allowed under Florida law for 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	
City National Bank		8311 S.W. 40th Street Miami, Florida 33155	
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 8871 Form 1120 POL Form 990	Upon formation Annually Annually	Internal Revenue Service	Ogden, UT 84201
STATE OF <u>Florida</u>		<u>Miami-Dade</u> COUNTY	
I, <u>Alex Martinez</u> , certify that the information in this Statement of			
Organization is complete, true and correct.			
X 		<u>11/21/19</u> Date	
Signature of Chairman of Political Committee		Date	

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MIAMI-DADE
ELECTIONS

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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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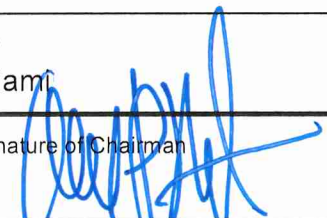
MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

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Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

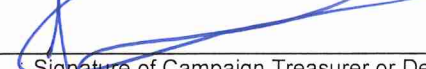
1. Committee A Better Miami-Dade		2. Telephone (305) 445-0777	
3. Name of Treasurer or Deputy Treasurer Jose A. Riesco, CPA		4. Email (optional) jose@riescoandcompany.com	
5. Telephone (optional) (305) 445-0777			
6. Mailing Address 2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134			
7. Street Address 2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank City National Bank		10. Street Address 8311 S.W. 40th Street	
11. City Miami		12. State Florida	13. Zip Code 33155
14. Signature of Chairman 		15. Name of Chairman (Print or Type) Alex Martinez	

Campaign Treasurer's Acceptance of Appointment

I, Jose A. Riesco, CPA, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for A Better Miami-Dade
(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.

11/21/19
Date


Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI-DADE ELECTIONS

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR POLITICAL COMMITTEES (Sections 106.011(2) and 106.021(1), F.S.)

CHECK APPROPRIATE BOX:

Initial Filing for: [] Primary Treasurer [x] Deputy Treasurer

OFFICE USE ONLY

Re-filing to Change: [] Primary Treasurer [] Deputy Treasurer [] Primary/Secondary Depository

Form fields containing committee name (A Better Miami-Dade), treasurer name (Jeannine R. Miranda), bank name (City National Bank), and chairman name (Alex Martinez).

Campaign Treasurer's Acceptance of Appointment

I, Jeannine R. Miranda, do hereby accept the appointment as treasurer or deputy treasurer for A Better Miami-Dade (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.

Date: 11/21/19

Signature of Campaign Treasurer or Deputy Treasurer (with handwritten signature)

**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: Jose A. Riesco, CPA Telephone: 305-445-0777

Street Address: 2600 S. Douglas Road, Suite 900

City: Coral Gables State: Florida Zip Code: 33134

Mailing Address: 2600 S. Douglas Road, Suite 900

City: Coral Gables State: Florida Zip Code: 33134

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.


Signature of Registered Agent

11/21/19
Date

Former Registered Agent and Office Information (for changes only)

Name: _____ Telephone: _____

Street Address: _____

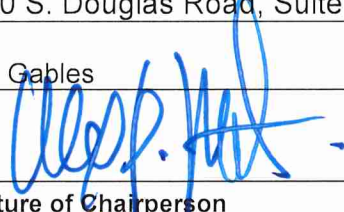
City: _____ State: _____ Zip Code: _____

Committee or Organization Information

Name of Committee or Organization: A Better Miami-Dade

Street Address: 2600 S. Douglas Road, Suite 900 Telephone: 305-445-0777

City: Coral Gables State: Florida Zip Code: 33134


Signature of Chairperson

Alex Martinez

Printed Name of Chairperson

11/21/19
Date



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

Candidate/Chairperson:

Alex

Martinez

First Name

Middle Name

Last Name

A Better Miami-Dade

Office Sought / Organization

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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:  Candidate / Chairperson Signature

Date: 11/21/19

Primary Telephone Number: 305-445-0777

Alternate Telephone Number: 305-447-0224

E-mail address: jose@riescoandcompany.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: A Better Miami-Dade

Party Executive Committee: _____

Other: _____

I, Alex Martinez

(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

11/21/19

Date

Day Time Telephone Number: 305-445-0777

Alternate Contact Number: 305-447-0224

Email Address: jose@riescoandcompany.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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