STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEERECEPT 2024 JUL 15				
(PLEASE TYPE)		.MI-DADE TIONS DEF	COUNTY PARTMENT	
1. Full Name of Committee				Telephone
A Better Hialeah		* 		305-445-0777
Mailing Address (include cit	y, state and zip code)			
2600 S. Douglas Road, S	uite 900, Coral Gables, FL 33134	1		
Street Address (include city,	state and zip code)			
2600 S. Douglas Road, S	uite 900, Coral Gables, FL 33134	1		
2. Affiliated or Connected O committees)	rganizations (includes other committe	ees of cont	inuous exi	stence and political
Name of Affiliated or Connected Organization	Mailing Addres	Mailing Address Relationship		
N/A				
3. Area, Scope and Jurisdiction of the Committee Miami-Dade Countycandidate and ballot issues for county-wide and municipal elections				
4. Nature of Organization or Good Government	Organization's Special Interest (e.g.,	medical, le	egal, educa	tion, etc.)
	s and Position, the Custodian of Bool	ks and Acc		
Full Name	Mailing Address		Comn	nittee Title or Position
Jose A. Riesco, CPA	2600 S.Douglas Road, Suite 90 Coral Gables, FL 33134	0	Treasure	r
Jeannine R. Miranda	2600 S.Douglas Road, Suite 90 Coral Gables, FL 33134	0	Deputy T	reasurer

(continued on reverse side)

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	
Esteban L. Bovo, Jr				Chairperson	
	, Office Sought and Party Affili ng (if none, please indicate)	ation Each Candida	te or Oth	er Individual that this	
Full Name	Mailing Address	Office	Sought	Party	
To be determined					
8. List Any Issues this Co	ommittee 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					
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?					
11. List all Banks, Safety	Deposit Boxes, or Other Depos	sitories Used for Co	mmittee	Funds	
Name of Bank or Depository & Account Number Mailing Address					
City National Bank	8311 SW 40 Stre Miami, FL 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 o	f Official	Mailing Address	
Form 8871 Form 1120 POL Form 990	Upon formation Annually Annually	Internal Revenue Service	e	Ogden, UT 84201	
STATE OF Florida		Miami	-Dade	COUNTY	
I, Esteban L. Boy Organization is complete, f		, certify that the ir	nformatior	n in this Statement of	
X 7-14-2024				4-2024	
Signature of	Chairman of Political Committee			Date	

APPOINTMENT OF CAMPAIGN TREASURE	>		RECEIV		
APPOINTMENT OF CAMPAIGN TREASURED AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR POLITICAL COMMITTEES (Sections 106.011(2) and 106.021(1), F.S.)			<mark>024 JUL 15 A</mark> Miami-dade c	OUNTY	
(Sections 106.011(2) and 106.021(1), F.S.)		-1	ECTIONS DEP.	ARTMENT .	
CHECK APPROPRIATE BOX:					
Initial Filing for: 🖌 Primary Treasurer 🗌 Deputy Treasurer					
		,		OFFICE USE ONLY	
Re-filing to Change: Primary Treasurer Deputy Treasurer	Primary	/Seconda	ry Depository		
1. Committee			2. Telephone		
A Better Hialeah			(305)445-0)777	
3. Name of Treasurer or Deputy Treasurer 4. Email (optiona			5. Telephone (o		
Jose A. Riesco, CPA jose@riescoan	Jose A. Riesco, CPA jose@riescoandcompany.com (305) 445-0777				
^{6.} Mailing Address 2600 S Douglas Road, Suite 900, Coral Gables, F	FL 33134			b.	
7. Street Address 2600 S Douglas Road, Suite 900, Coral Gables, Fl	_ 33134				
8. The following bank has been designated as the Pri	mary Depos	sitory	Seconda	ry Depository	
9. Name of Bank 10. Street Address					
City National Bank	8311 S	W 40tl	n Street		
11. City	i.	12. Sta	te	13. Zip Code	
Miami //		FL		33155	
14. Signature of Chairman	15. Name	of Chair	man (Print or Type	e)	
x //	Esteba	n L. Bo	ovo, Jr		
Campaign Treasurer's Ac	ceptanc	e of A	ppointment		
Jose A. Riesco, CPA			de hereb	y accept the appointment as	
I,(Please Print or Type)			, do hereb	y accept the appointment as	
treasurer or deputy treasurer for A Better Hialeah					
	(0	Committe	e)		
UNDER PENALTIES OF PERJURY, I DECLARE THAT I H ACCEPTANCE OF APPOINTMENT AND					
7/14/2024 X	K	-		-	
Date	Signature o	of Campa	aign Treasurer or I	Deputy Treasurer	
DS-DE 6 (Rev. 4/19)					

APPOINTMENT OF CAMPAIGN TREASURER		RECE		
APPOINTMENT OF CAMPAIGN TREASORER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR POLITICAL COMMITTEES (Sections 106.011(2) and 106.021(1), F.S.)			5 AM 9:49	
CHECK APPROPRIATE BOX:			OFFICE USE ONLY	
Re-filing to Change: Primary Treasurer Deputy Treasurer	Primary/Seconda	ry Depository		
1. Committee A Better Hialeah		2. Telephone (305) 445-(0777	
3. Name of Treasurer or Deputy Treasurer4. Email (optional)Jeannine R. Mirandajen@riescoando		5. Telephone (c (305)) 445-(
^{6.} Mailing Address 2600 S Douglas Road, Suite 900, Coral Gables, F	L 33134			
7. Street Address 2600 S Douglas Road, Suite 900, Coral Gables, FL	33134			
8. The following bank has been designated as the Y Prin	nary Depository	Seconda	ry Depository	
9. Name of Bank City National Bank	10. Street Address 8311 SW 40t			
11. City Miami	12. Sta FL	te ,	13. Zip Code 33155	
14. Signature of Chairman	15. Name of Chai Esteban L. B	man (Print or Typ ovo, Jr	e)	
Campaign Treasurer's Ac	ceptance of A	ppointment		
I, Jeannine R. Miranda (Please Print or Type)		, do hereb	by accept the appointment as	
treasurer or deputy treasurer for A Better Hialeah (Committee)				
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HA ACCEPTANCE OF APPOINTMENT AND				
11424 X	Signature of Camp			
Date DS-DE 6 (Rev. 4/19)		aign neasulei U		

		RECEIVED
REGISTERED AGENT		OFFICE USE ONLY
STATEMENT OF APPOINTME (Section 106.022, F.S.)	NT	2024 JUL 15 AM 9:49
		MIAHI-DADE COUNTY ELECTIONS DEPARTMENT
Original Appointment Change of Appoint	ntment	
Change of Mailing Address Change of Physic	cal Address	
Registered Ag	jent and Office Inform	ation
Name Jose A. Riesco, CPA		Telephone 305-445-0777
Street Address		
2600 S Douglas Road, Suite 900 City Coral Gables	State FL	Zip Code 33134
Mailing Address 2600 S Douglas Road, Suite 900	<u>~</u>	
City Coral Gables	State FL	Zip Code 33134
forth in Section 106.022, F.S. I also understan statement of resignation and filing it with the app	licable filing officer.	
Signature of Registered Agent	7 Date	114/2024
Signature of Registered Agent Former Registered Agent a	Date	
	Date	
Former Registered Agent a	Date	n (for changes only)
Former Registered Agent a	Date	n (for changes only)
Former Registered Agent a Name Street Address City	Date	Telephone Zip Code
Former Registered Agent a Name Street Address City	Date	Telephone Zip Code
Former Registered Agent a Name Street Address City Committee or Name of Committee or Organization A Better Hialeah	Date	a (for changes only) Telephone Zip Code ation
Former Registered Agent a Name Street Address City Committee or Organization	Date	Telephone Zip Code
Former Registered Agent a Name Street Address City Committee or Name of Committee or Organization A Better Hialeah Street Address	Date	a (for changes only) Telephone Zip Code ation Telephone
Former Registered Agent a Name Street Address City Committee or Organization A Better Hialeah Street Address 2600 S. Douglas Road, Suite 900 City	Date and Office Information State r Organization Information	Image: for changes only) Telephone Zip Code ation Telephone 305-445-0777 Zip Code
Former Registered Agent a Name Street Address City Committee or Organization A Better Hialeah Street Address 2600 S. Douglas Road, Suite 900 City Coral Gables Signature of Chairperson	Date and Office Information State r Organization Information FL	Image: for changes only) Telephone Zip Code ation Telephone 305-445-0777 Zip Code
Former Registered Agent a Name Street Address City Committee or Organization A Better Hialeah Street Address 2600 S. Douglas Road, Suite 900 City Coral Gables	Date and Office Information State r Organization Information FL	r (for changes only) Telephone Zip Code ation Telephone 305-445-0777 Zip Code 33134

Form DS-DE 41 (revised 6/1	Form	DS-DE	41	(revised	6/11
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Access to Handbook and the Election Laws of the State of Florida

Candidate/Chairperson:

Esteban	L.	Bovo, Jr
First Name	Middle Nam	Last Name
	A Better Hia	
	Office Sought / Org	anization
I acknowledge that it is requirements described County Elections Departm	in the following res	to read, understand and follow the ources available on the Miami-Dade
Contains information of Florida, County Laws	<u>de.gov/global/elections/c</u> on State Laws and Handk and Handbooks, Qualifyii	andidate-qualifying-handbook.page) books, the Election Laws of the State of ng Information, Electronic Reporting Dates ion, and Recent Legislative Changes.
Contains information of Florida, County Laws	le.gov/global/elections/po on State Laws and Handk	Ditical-committee-resources.page) books, the Election Laws of the State of the Reporting Dates and Procedures, Legislative Changes.
Acknowledged by:		airperson Signature
Date:	305-445-07	777 Repair 59
Alternate Telephone Nu	mber: <u>305-519-9</u>	090
E-mail address: jOSE	@riescoandcor	mpany.com

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

Candidate (office sought):				
Candidate's Florida Voter Reg	jistration Number:			
Political Committee:	A Better Hialeah	2		
Party Executive Committee	v		100	2
Other:		And a set of the set o	C	C.L.S.
l,	Esteban L. Bovo, Jr			111
	(Please print name of Candidate or Chairperson)	27	323	Contra Contra
		PAG	- Alian	11
		and a second	9	Carrier of

understand that Campaign Treasurer's Reports <u>must</u> 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, and Community Council must now file the Vote by Mail Campaign Report (<u>MD-ED 26</u>) 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, 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, Political Parties, parties, pa

Signature of Candidate or Chairperson

7-14-2024

Date

Day Time Telephone Number	305-445-0777			
Alternate Contact Number:	305-519-9090			
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.