

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee
TRUSTED LEADERSHIP FOR MIAMI DADE

Telephone
786-740-0545

Mailing Address (include city, state and zip code)
6355 SW 8TH ST, #607
MIAMI, FL 33144

Street Address (include city, state and zip code)
6355 SW 8TH ST, #607
MIAMI, FL 33144

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
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.)
PUBLIC SAFETY

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
Ariel Trueba	6355 SW 8th St, #607, Miami, FL 33144	Chairman & 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
Ariel Trueba	6355 SW 8th St, #607, Miami, FL 33144	Chairman & 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
Orlando "Orly" Lopez	2010 SE 14th Circle, Homestead, FL 33035	Sheriff	REP

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?

RESIDUAL FUNDS WILL BE GIVEN TO CHARITABLE ORGANIZATIONS 501(C)3

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

Name of Bank or Depository & Account Number	Mailing Address
TRUIST BANK	5711 NW 7TH ST, SUITE 5 MIAMI, FL 33126

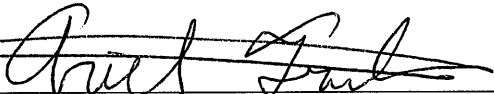
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
<i>N/A</i>			

STATE OF FLORIDA MIAMI DADE COUNTY

I, Ariel Trueba, certify that the information in this Statement of

Organization is complete, true and correct.

X 
Signature of Chairman of Political Committee

09/25/2023
Date

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 ELECTIONS DEPARTMENT

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

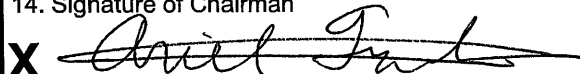
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ELECTIONS DEPARTMENT

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 TRUSTED LEADERSHIP FOR MIAMI DADE		2. Telephone (786)740-0545	
3. Name of Treasurer or Deputy Treasurer ARIEL TRUEBA		4. Email (optional) trustedleadership@miamidade@gmail.com	
5. Telephone (optional) N/A		6. Mailing Address 6355 SW 8TH ST, #607, MIAMI, FL 33144	
7. Street Address 6355 SW 8TH ST, #607, MIAMI, FL 33144			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Truist Bank		10. Street Address 5711 NW 7th St, Suite #5	
11. City Miami		12. State FL	13. Zip Code 33126
14. Signature of Chairman X 		15. Name of Chairman (Print or Type) Ariel Trueba	

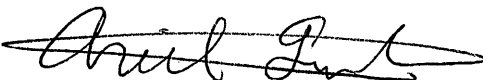
Campaign Treasurer's Acceptance of Appointment

I, Ariel Trueba, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Trusted Leadership for 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.**

09/25/2023

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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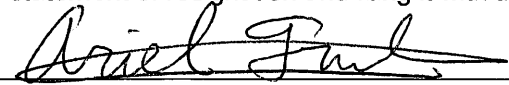
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ELECTIONS DEPARTMENT

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

Registered Agent and Office Information

Name Ariel Trueba		Telephone 786-740-0545
Street Address 6355 SW 8th St, #607		
City Miami	State FL	Zip Code 33144
Mailing Address 6355 SW 8th St, #607		
City Miami	State FL	Zip Code 33144

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

09/25/2023

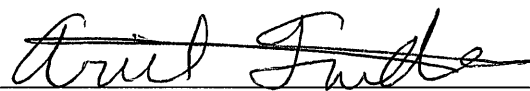
Date

Former Registered Agent and Office Information (for changes only)

Name N/A		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization Trusted Leadership for Miami Dade		
Street Address 6355 SW 8th St, #607		Telephone 786-740-0545
City Miami	State FL	Zip Code 33144



Signature of Chairperson

Ariel Trueba

Printed Name of Chairperson

9/25/2023

Date



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

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Candidate/Chairperson:

Ariel

Trueba

First Name

Middle Name

Last Name

Trusted Leadership for Miami Dade PAC

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 (https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page) 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.

[X] Political Committee Handbook (https://www.miamidade.gov/global/elections/political-committee-resources.page) 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: [Signature] Candidate / Chairperson Signature

Date: 09/25/2023

Primary Telephone Number: 786-740-0545

Alternate Telephone Number: N/A

E-mail address: trustedleadership4miamidade@gmail.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: Trusted Leadership for Miami Dade

Party Executive Committee: _____

Other: _____

I, Ariel Trueta

(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, 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, 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.

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Ariel Trueta

Signature of Candidate or Chairperson

09/25/2023

Date

Day Time Telephone Number: 786-740-0545

Alternate Contact Number: N/A

Email Address: trustedleadership4miamidade@gmail.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.