APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the filing officer before opening the campaign account.

RECEIVED

2025 MAY 13 AM 9: 48

MIAMI-DADE COUNTY SLECTIONS DEP**OFFICE/USE ONLY**

1. CHECK APPROPRIATE BOX(ES):							
■ Initial Filing of Form □ Re-filing to Change: ■ Treasurer/Deputy □ Depository □ Office □ Party							
2. Name of Candidate (in this order: First, Middle, Last):			3. Address (include PO Box or Street, City, State, Zip Code):				
(Please Print or Type Name)			2600 SOUTH DOUGLAS ROAD, SUITE 900				
NATALIE MOORE			CORAL GABLES, FL 33134				
4. Telephone: 5. Candidate's Voter Registration #: 6. Email Address:							
(305) 445-0777 114539256 (not required for qualifying purpose							
7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a nonpartisan office, check the box if applicable:							
11TH JUDICIAL CIRCUIT, MIAMI DADE COUNTY COURT JUDGE, GROUP 34							
9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a							
☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐Party candidate.							
10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer							
11. Name of Treasurer or Deputy Treasurer:			ephone:		13. Email Address:		
JAVIER LEY-SOTO			(305) 237-3694 javierleysoto@gmail.com				
14. Mailing Address:	15. Cit	50		16. St	ate:	17. Zip Code:	
300 NE 2 AVENUE, #1453	MIAM	l		FL		33132	
18. I have designated the following bank as my (check appropriate box): I Primary Depository							
19. Name of Bank:	20. Address:						
CITY NATIONAL BANK 21. City:	2855 SOUTH LEJEUNE ROAD 22. County: 23. State:				24. Zip Code:		
CORAL GABLES	l	-	-DADE		ate.	33134	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.							
26. Signature of Candidate:							
25. Date: 4/26/25			\mathbf{x}				
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)							
JAVIER LEY-SOTO do hereby accept the appointment designated above as:							
JAVIER LEY-SOTOdo hereby accept the appointment designated above as: (Please Print or Type Name)							
☐ Campaign Treasurer. ■ Deputy Treasurer.							
28. Date: 5/5/2025			29 Signature of Campaign Treasurer or Deputy Treasurer				
			X Janu Cot sy soro				
DS-DE 9 (Rev. 09/23)		Rule 1S-2.0001, F.A.C.					