STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE (PLEASE TYPE)		OFFICE USE ONLY RECEIVED 2016 OCT - 3 AM 11:29		
	OFFICE Cl	OFFICE OF THE CITY CLERK CITY OF MIAMI		
1. Full Name of Committee A Stronger Miami			Telephone 305-445-0777	
Mailing Address (include cit 2600 South Douglas Roa	y, state and zip code) d, Suite 900, Coral Gables, FL 33	134	L	
Street Address (include city, state and zip code) 2600 South Douglas Road, Suite 900, Coral Gables, FL 33134				
2. Affiliated or Connected O committees)	rganizations (includes other committe	es of continuous ex	sistence and political	
Name of Affiliated or Connected Örganization	Mailing Addres	Mailing Address		
N/A	N/A		N/A	
3. Area, Scope and Jurisdict	ion of the Committee			
County wide and City of Miami PC for Candidates and Issues 4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)				
Making Miami Stronger				
5. Identify by Name, Address Full Name	and Position, the Custodian of Book Mailing Address		ilude treasurer's name)	
Jose A. Riesco	2600 South Douglas Road Suite 900 Coral Gables, FL 33134	·····	Treasurer	

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