#### AFFIDAVIT OF CANDIDATE

#### CITY OF MIAMI, FLORIDA

### STATE OF FLORIDA ) COUNTY OF MIAMI-DADE ) CITY OF MIAMI )

### Jim Fried

\_\_\_\_ (hereinafter "affiant"), being first duly sworn, deposes and says:

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2019 SEP -9 PM 2: 34

OFFICE OF THE CITY CLERK

CITY OF MIAMI

day of

# 1. My name is Jim Fried

 For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner please check and fill in the blank in subsection (b) below:

(a) I am offering myself as a candidate for the office of Mayor of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Miami for the duration of my term of office.

 $\mathbf{V}$ (b) I am offering myself as a candidate for the office of Commissioner in District Number  $\frac{2}{2}$  of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.

3. I have resided in the City of Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for the Commission, and I am a registered voter and a duly qualified elector of the City of Miami, Florida, presently registered to vote in Precinct No. 538

I presently reside at the following address (must include zip code):

### 555 NE 34 Street, #2601, Miami FL 33137-4059

which is my legal address, and I have resided continually at said address from the for over 25 years 2003 to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the hereinbelow listed addresses for the cited periods of time (list hereinbelow all addresses at which you have resided for the past five years, as well as the length of time at each address):

Prior Addresses	For the Period
N/A	N/A
N/A	N/A

5. In addition to the residence that I have listed as my present address, I also reside at the following listed addresses on a temporary basis as a secondary domicile or domiciles:

N/A

6. Affiant's spouse resides at the following address (must include city, state and zip code):

### 555 NE 34 Street, #2601, Miami FL 33137-4059

- Affiant's minor children reside at the following address (must include city, state and zip code):
   N/A
- 8. At the present time, affiant (is) is not registered to vote in any city, county or state other than as stipulated in subparagraph 3 above.
- 9. Name and business address of affiant's employer:

	Self	SE	2019	
	Self	SE OF	SEP	RE
10.	Affiant's occupation: Real Estate Broker	-YEE	-9	CE
	Affiant's business telephone number(s): 305-573-7070		PM 2:	ED
		111	S	

11. Affiant has been employed in the above-cited capacity for the following period of time:

2000 > Present

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

20

5

N/A

N/A

- 12. Affiant represents that he/she (is) (is not currently holding another elective or appointive office whether city, county or municipal the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S. 99.012 and/or the City of Miami Charter.
- 13. Affiant represents that, as of this date, he/she (is) is not seeking to qualify for public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office.

Note: If affiant is an employee of the City of Miami, affiant shall take a leave of absence, without pay from his/her employment during the period in which affiant has become a candidate for elective public office. This subsection does not apply to the Commissioners and Mayor, City Manager, City Attorney, City Clerk, and Independent Auditor General. Such leave of absence shall be effective upon whichever occurs first:

- (a) Such employee receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures, with a view to bringing about his or her nomination or election to public office; or
- (b) At the time such employee appoints a campaign treasurer and designates a primary depository; or
- (c) At the time such employee files qualification papers and subscribes to a candidate's oath as required by law.

14. Affiant's campaign headquarters address and telephone number: 555 NE 34 Street, #2601, Miami FL 33137-4059	
Affiant's campaign treasurer's name: Self	
Affiant's campaign treasurer's address: 555 NE 34 Street, #2601, Miami FL 33137-4059	
Telephone numbers: (work) 305-573-7070	9

- 15. Affiant represents that, if elected, he/she shall serve in the elective office to which he/she seel election.
- 16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot: Jim Fried

DAY OF September 2019 SIGNED THIS \_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_\_ Fried who, after first being duly sworn, deposes and states that  $\underline{\sqrt{e}}$  executed the foregoing to the best of <u>bis</u> knowledge and belief.

CITY CLERK

(home)

CITY OF MIAMI, FLORIDA

(SEAL)

TODD B HANNON Notary Public - State of Florida Commission # GG 262274 My Comm. Expires Sep 25, 2022 Bonded through National Notary Assn

Did take an oath Produced identification Type of identification produced: FLDGVers License

STATE OF	FLORIDA

COUNTY OF ULAMI-DADE

BEFORE ME, the undersigned, personally appeared:

JAMES FRIED (write legal name of candidate)

AFFIDAVIT OF NICKNAME

who being first duly sworn or placed under affirmation says:

- 1. My legal name is: <u>JAMES FRIED</u> I am over the age of eighteen (18) and the contents of this affidavit are true and correct.
- 2. I am a candidate for the office of: MIAMICOMMISSION DISTRICT 2.
- 3. My nickname is: <u>JIM FRIED</u>

I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. I plan to designate this nickname on my candidate oath as the same name I wish to have printed on the ballot when I submit the candidate oath form during the qualifying period for the above office.

**4.** Attached are documents that show that my nickname is one by which I am generally known or one that I have used as a part of my legal name. [List the title of any documents or affidavits from other persons reflecting that the candidate is generally known by the nickname or that it has been used as part of the candidate's legal name.]

A. PROFESSIONAL U	JEBSITE.
B. TWITTER	
C. LINKEDIN	
JAMES L. FRIED Printed /Typed Name of Affiant	Signature of Affiant
Sworn to me th	is 9th day of <u>September</u> 2019.
	CH12/6
TODD B HANNON Notary Public - State of Florida Commission # GG 262274 My Comm. Expires Sep 25, 2022 Bonded through National Notary Assn.	Todd B. Hannon Printed Name September 25, 2022
	My Commission Expires
Personally known or Produced Identificat	ion
Type of Identification Produced: FL Drivers	License

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#### Page 1 of 1

# **ABOUT JIM FRIED**

Jim Fried has been a real estate business person since 1980 and has had his own radio show since 2009.

Mr. Fried specializes in capitalizing commercial real estate transactions, unearthing urban land opportunities and is also a private lender.



He has been active in the real estate industry for many years as a financial intermediary, broker and investor. He has experience with many property types including, but not limited to: apartments, condominiums, retail centers, office buildings, industrial parks and health care – with a special focus on memory care.

Jim has closed over \$3BB in real estate transactions during his career in markets across the eastern US.

Jim uses his communication skills to inform and entertain on his weekly radio show – Fried on Business – heard each week on 880 AM in Miami. Of course, the show discusses real estate, but he also tackles issues such as branding, sports business, philanthropy, entrepreneurship, public private partnerships as well as health and wellness.

He is also a mentor to many up and coming people in the real estate industry through his membership on the Board of The University of Florida's Bergstrom Center for Real Estate Studies.

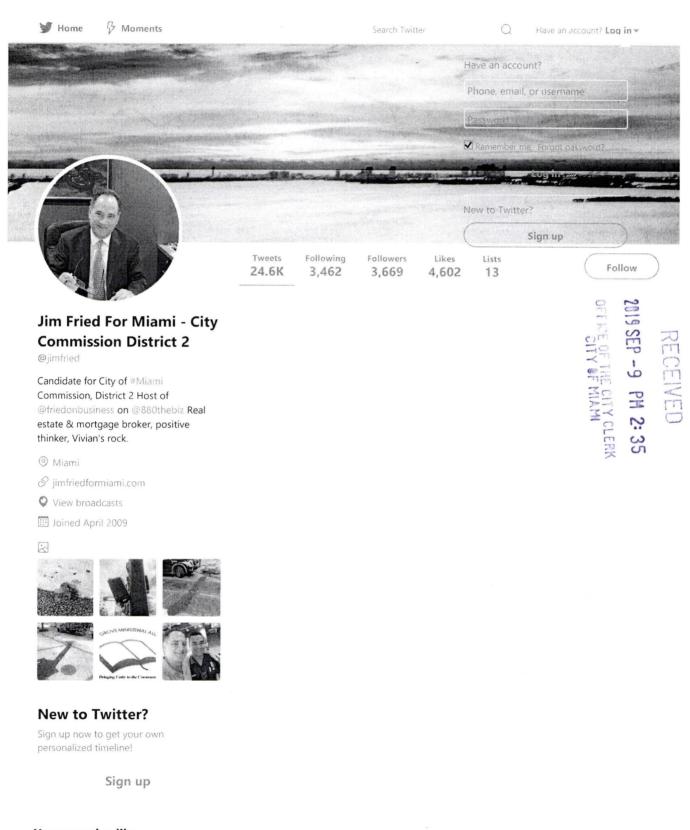
Mr. Fried is a winner of the Miami-Dade Public School Alumni Achievement Award.

Contact Jim via email at jim@friedonbusiness.com.

Click Here to download media kit.



For the best Twitter experience, please use Microsoft Edge, or install the Twitter app from Microsoft Store.



You may also like · Refresh



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OFFICE OF THE CITY CLERK CITY &F MIAMI



Jim Fried

**Jim Fried** Miami Commission Candidate in the City of Miami Miami/Fort Lauderdale Area · 500+ connections

Join to Connect



University of Florida - Warrington College Of Business



### About

I have spent over 35 years as a real estate business person. I have closed over \$3BB in commercial real estate transactions. I am one of the top mortgage brokers and investment sales brokers in Miami. My one person firm was ranked in the Top 25 real estate firms in South Florida by transaction volume in 2018 by the South Florida Business Journal.

I use my vast network of contacts to help my clients execute their plans.

I specialize in the origination and placement of real estate debt and equity, "private loans" and "hard money" loans. I am also focused on originating and placing residential jumbo and super jumbo mortgages for wealthy owners and investors (\$500,000 and greater). I have significant relationships in the family office niche.

I was just named one of the family Office Real Estate Global Advisors by Family Capital Magazine.

Most recently, my transaction focus has been on urban land sales and other real estate investment sales. I have closed more land sales for apartment buildings in South Florida in the last two cycles than anyone

else. I also have a strong expertise in creating joint ventures.

My urban focused practice had led me to doing some representation in the Medical Cannabis field. Joinmt venture capital and tenant representation has been my focus in this area to this point.

I am a very creative at real estate deal structuring. I am always looking for new ways to get deals done.

You will love my radio show -check it out at www.FriedOnBusiness.com - on 880AM in Miami Thursdays from 6-7 PM. To listen live cut and paste this link into your wen browser: bit.ly/jimlive .

Give me a call - I would love to help you achieve your goals. cell: 305-773-6300 - When you call me ---it's all about YOU!

https://youtu.be/gNvCaLu-ak8

## Articles by Jim



### Please consider voting for my niece for AG Commissioner in Florida

By Jim Fried November 5, 2018



# Florida Cabinet, Medical Marijuana and the Intersection of Politics and Health

By Jim Fried July 16, 2018



### Vivian Making Great Progress!

By Jim Fried July 9, 2018



Activity

FORM 1	STATEN	IENT OF	print scholar inclusion of standard	2018
Please print or type your name, mailing address, agency name, and position below:		INTERESTS		FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE N. Fried, Jim MAILING ADDRESS :	AME :		20	19 SEP -9 PM 2: 35
555 NE 34th Street			OFI	CE OF THE CITY CLERK
#2601				or maps
CITY: Miami FL 33137	ZIP : COUNTY : Miami-Dac	le		
NAME OF AGENCY : City of Miami				
NAME OF OFFICE OR POSITION HELD O Commissioner District 2	R SOUGHT :			
You are not limited to the space on the lines of	on this form. Attach additional she	ets, if necessary.		
CHECK ONLY IF I CANDIDATE OF		RAPPOINTEE		
	ARTS OF THIS SECT	FION <u>MUST</u> BE CO	MPLET	ED ****
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASI EITHER (must check one):				
DECEMBER 31, 2018		FY TAX YEAR IF OTHER TH	AN THE C	ALENDAR YEAR:
MANNER OF CALCULATING REPOR FILERS HAVE THE OPTION OF USING F CALCULATIONS, OR USING COMPARA for further details). CHECK THE ONE YO	REPORTING THRESHOLDS	ARE USUALLY BASED ON	LAR VALU	JES, WHICH REQUIRES FEWER
	CENTAGE) THRESHOLDS		AR VALL	JE THRESHOLDS
PART A PRIMARY SOURCES OF INCOM (If you have nothing to report,		the reporting person - See inst	ructions]	
NAME OF SOURCE OF INCOME		URCE'S DRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Sandstone Realty Advisors	555 NE 34th Street a	#2601	Investr	nent Advisor
	Miami FL 33137			
	ther sources of income to busine	sses owned by the reporting pe	erson - See	instructions]
(If you have nothing to report, NAME OF NA BUSINESS ENTITY	AME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Fried on Business Adve	rtising Revenue	5757 Blue Lagoon [	Drive	Broadcasting
		#450		
		Miami FL 33126-70	52	
PART C REAL PROPERTY [Land, buildin		on - See instructions]	FILIN	G INSTRUCTIONS for when
	write "none" or "n/a")			where to file this form are and at the bottom of page 2.
N/A	vrite "none" or "n/a")		locate INSTR	here to file this form are

PART D — INTANGIBLE PERSONAL PROF       Y [Stocks, bonds, certificates of deposit, etc See       Introductions]         (If you have nothing to report, write "none" or "n/a")       BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
Money Market Account	Sandstone	Realty Advisors	
Individual IRA	Jim Fried		
PART E — LIABILITIES [Major debts - See instruction:	sl		219
(If you have nothing to report, write "non			SEP
NAME OF CREDITOR		ADDRES	S OF CREDITOR 2
N/A	N/A		THE P
N/A	n/A		AND HAD
PART F — INTERESTS IN SPECIFIED BUSINESSES [ (If you have nothing to report, write "none"	or "n/a") BUSIN	ESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY		Venture #1	N/A
ADDRESS OF BUSINESS ENTITY		hore Dr., Plaza, Miami	N/A
PRINCIPAL BUSINESS ACTIVITY		al Rental Property	N/A
POSITION HELD WITH ENTITY	Limited Pa	Irtner	N/A
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	<5%		N/A
NATURE OF MY OWNERSHIP INTEREST	Passive In	vestment	N/A
I CERTIFY THAT I		ON A SEPARATE SHE	
SIGNATURE OF FILE	R:	CPA or ATTC	DRNEY SIGNATURE ONLY
Signature:		<ul> <li>If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:</li> <li>I,, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.</li> </ul>	
		CPA/Attorney Signature	
FILING INSTRUCTIONS:			
If you were mailed the form by the Commission on Et Supervisor of Elections for your annual disclosure form to that location. To determine what category you under, see page 3 of instructions.	filing, return the	MULTIPLE FILING UNNE	together with their filing papers. ECESSARY: A candidate who files a Form is not required to file with the Commission s.
Local officers/employees file with the Supervise of the county in which they permanently reside. permanently reside in Florida, file with the Supervise where your agency has its headquarters.) Form 1 file the Supervisor of Elections may file by mail or ema Supervisor of Elections for the mailing address or e use. Do not email your form to the Commission on returned.	(If you do not or of the county ers who file with ail. Contact your email address to	WHEN TO FILE: <i>Initially</i> and specified state emp date of his or her appoin Appointees who must be confirmation, even if that appointment. <i>Candidates</i> must file at	r, each local officer/employee, state officer, oloyee must file <i>within 30 days</i> of the trunent or of the beginning of employment. confirmed by the Senate must file prior to is less than 30 days from the date of their t the same time they file their qualifying
State officers or specified state employees will Commission on Ethics may file by mail or email. send the completed form to P.O. Drawer 15709,	To file by mail,	papers. <i>Thereafter</i> , file by July 1 hold their positions.	following each calendar year in which they
32317-5709; physical address: 325 John Knox Rd, I Tallahassee, FL 32303. To file with the Commission your completed form and any attachments as a pdf other format) and send it to CEForm1@leg.state.fl.u both mail and email. Choose only one filing method	Bldg E, Ste 200, by email, scan (do not use any s. <u>Do not file by</u>	<i>Finally</i> , file a final discleaving office or employm of Financial Interests) doe	osure form (Form 1F) within 60 days of nent. Filing a CE Form 1F (Final Statement es <u>not</u> relieve the filer of filing a CE Form 1 er position on December 31, 2018.

Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. <u>Do not file by both mail and email. Choose only one filing method</u>. Form 6s will not be accepted via email.

CANDIDATE OA	0		
NONPARTISAN OFFICE			
(Do not use this form if a Judicial or School Board Candidate)	RECEIVED		
Check box <b>only</b> if you are seeking to qualify as a write-in candidate:	2019 SEP -9 PM 2: 35		
☐ Write-in candidate	OFFICE OF THE CITY CLERK CITY OF MIAM		
	OFFICE USE ONLY		
	ate Oath (a), Florida Statutes)		
I, Jim Fried			
hyphen, check box 🗌. (See page 2 - Compound Last I	. If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. ballot, the name must be printed above for oath purposes.)		
am a candidate for the nonpartisan office of Miami Comr	nissioner , 2 ,		
	(Office) (District #)		
N/A ; I am a qualified elector of	Miami-Dade County, Florida;		
(Circuit #) (Group or Seat #)			
I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I			
have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office			
I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes;			
and I will support the Constitution of the United States and the Constitution of the State of Florida.			
Candidate's Florida Voter Registration Number (located on your voter information card): <u>#109377295</u>			
	on the line below as you wish it to be pronounced on the audio ns on page 2 of this form): <i>[Not applicable to write-in candidates.]</i> D) reed = gym freed		
X (305) 209- Signature of Candidate Telephone Number	6764 JIMFried for Minmi Man Email Address		
555 NE 34th Street #2601 Miami	FL c 33137		
Address City	State ZIP Code		
STATE OF FLORIDA	Signature of Notary Public		
COUNTY OF MIAMI-DADE	Print, Type, or Stamp Commissioned Name of Notary Public below:		
Sworn to (or affirmed) and subscribed before me this <u>standard</u> day of <u>September</u> , 20 <u>19</u> . Personally Known: <u>v</u> or Produced Identification: <u></u> Type of Identification Produced: <u></u>	RANDALL HILLIARD MY COMMISSION #GG072341 EXPIRES: FEB 13, 2021 Bonded through 1st State Insurance		

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	LOYALTY OATH	G	2
STATE OF FLORIDA COUNTY OF MIAMI-DADE		FFICEOF	RECEIVE
, Jim	Frie	d THE	-9
First Name	Middle Initial	Last Name	PM D
a citizen of the State of Florida and of the U hereby solemnly swear or affirm that I will sup			
CITY OF MI	AMI OATH OF CAND	IDATE	
	MIAMI COMMISSIONER DIS	TRICT 2	
Before me, an officer authorized to administer <b>Jim Fried</b>	oaths, personally appeared		
	(PLEASE PRINT NAME)		
who, being sworn, says he/she is a candidate of Miami, Florida; that he/she is a qualified ele Constitution, the Laws of Florida, and City of elected; that he/she has taken the oath require no other public office in the State, the term of w he/she seeks; and that he/she has resigned required to resign or take a leave of absence, p	ector of the City of Miami, Fle of Miami Charter to hold the ed by Section 99.021, Florida which office or any part there or taken a leave of absence pursuant to Section 99.012, F	orida; that he/she is qualif e office to which he/she a Statutes; that he/she ha of runs concurrent with that e from any office from wh	fied under the desires to be s qualified for at of the office
555 <sup>/</sup> 34th Street #2601	Miami		33137
	City	State	ZIP Code
The Loyalty Oath and Oath of Candidate are swe of <u>September</u> , 20_/ <u>Randcol Uclud</u> Signature of Officer Administering Oath or Notary Public Personally Known: OR Produced Identifica Type of Identification Produced:	Name of I	ribed before me this <u>S</u> Notary Typed, Printed or Stamp RANDALL HILLIARD WY COMMISSION #GG07234 EXPIRES: FEB 13, 2021 Bonded through 1st State Insuran	ed II

	<b>20</b> OF1	19 SEP -9 PM 2: 36
	City of Miami OFFICIAL RECEIPT	500400
\$_682.00 Sales Tax \$ SIX_Hundre	d. and Eighty two -	No. 500688 Date: 9 9 9 9
Received from: <u>James</u> Address: <u>555 NE</u> 3 For: <u>Qualifying</u>	- Fried DBA Campaign 4 Street # 2601 Reference No:	NIAMI PL 33137
This Receipt not VALD unless dated, filled in and signed by authorized em- ployee of department or division des- ignated hereon and until the City has collected the proceeds of any checks tendered as payment herein.	By: <u>Sandra</u> Forge Department: <u>City</u> CHCV Division: <u>Electiv</u>	
C FN/TM 402 Rev. 03/03 Distri	bution: White - Customer; Canary - Finance; Pink - Issui	ng Department

, <u>`</u>\*,

RECEIVED

JAMES L FRIED DBA CAMPAIGN TO ELECT JAMES FRIED 555 NE 34TH ST APT 2601 MIAMI, FL 33137-4059	- 9 (9/19 Da	1006 63-751/631 10947
Pay to the CITY OF MIAMI Order of CITY OF MIAMI SX HUNDRED EIGHT	WD and Not 1000	ollars
WELLS FARGO Florida wellsfargo.com ForOUALI FUING FEE	17	
		<u></u>