STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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2022 JUN 29 PM 3: 29

OFFICE OF THE CITY CLERK CITY OF MIAMI

Full Name of Committee Vote Yes on Riverside Wi		Telephone (305) 233-1539			
Mailing Address (include cit 123 SW North River Dr. Miami, FL 33130	y, state and zip code)	,			
Street Address (include city, 123 SW North River Dr. Miami, FL 33130	state and zip code)				
2. Affiliated or Connected Or committees)	ganizations (includes other committees of co	ntinuous exis	tence and political		
Name of Affiliated or Connected Organization	Mailing Address		Relationship		
N/A					
3. Area, Scope and Jurisdiction of the Committee Ballot issues in City of Miami					
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.) Marine					
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			
Jose A. Riesco, CPA	2600 South Douglas Rd, #900, Coral Gables, Florida 33134	Treasurer			
Jeannine Riesco Miranda	2600 South Douglas Rd, #900, Coral Gables, Florida 33134	Deputy Treasurer			

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the						
	Any (include chairman's name					
Full Name	Mailing Add	Mailing Address		Committee Title or Position		
Alex Mantecon	123 SW North River Dr, Mia	ımi, FL 33130	Chairperson			
Guillermo Vadell	123 SW North River Dr, Mia	ımi, FL 33130	Secretary			
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		PH [7]		
N/A		Fic		FICE		
				CE 29		
8. List Any Issues this Co	ommittee is Supporting: City of	f Miami Referendi	um on F	AUCTOR .		
List Anv Issues this Co	ommittee is Opposing: N/A			35 5 m		
Liot/Miy loomed mile 22	Militaria abbasing. IN/A			E 2		
	pporting the Entire Ticket of a	Party, Give Name of	f Party	×		
N/A						
10. In the Event of Dissolu	ution, What Disposition will be	Made of Residual F	unds?			
Contribute to a 501(c)(3	3) or 501(c)(4) organization	ı				
11. List all Banks, Safety	Deposit Boxes, or Other Depos	sitories Used for Co	mmittee	Funds		
Name of Bank or Depo	ository & Account Number		Mailing Address			
City National Bank of Florida		8311 SW 40 Street				
		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						
Report Title	Dates Required to be Filed	Name & Position of	f Official	Mailing Address		
Form 8976	w/i 60 days	IRS		Ogden, UT		
Form 1024	w/i a year	IRS		Ogden, UT		
7.327						
STATE OF Florida		Miami-Dade county				
լ Alex Manteco	n	**************************************				
, certify that the information in this Statement of						
Organization is complete, true and correct.						
V allow m - 6 20 22						
X Clearly of Chairman of Political Committee						
Signature of Chairman of Political Committee Date						