STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

1. Full Name of Committee

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CITY OF MIAMI BEACH OFFICE OF THE CHY CLERK

Telephone

| YES to Protect Our Neight | | 786-762-4990 | | | |
|---|---|-----------------------------|-----------------------|--|--|
| Mailing Address (include city 1742 W Flagler Street Miami, Florida 33135 | , state and zip code) | | | | |
| Street Address (include city, s 1742 W Flagler Street Miami, Florida 33135 | state and zip code) | | | | |
| 2. Affiliated or Connected Org committees) | ganizations (includes other committees of con | tinuous exi | stence and political | | |
| Name of Affiliated or Connected Organization | | | Relationship | | |
| N/A | N/A | | N/A | | |
| 3. Area, Scope and Jurisdiction of the Committee Committee supporting a ballot measure in Miami Beach | | | | | |
| 4. Nature of Organization or Openitical, Voter Education | Organization's Special Interest (e.g., medical, l | egal, educa | tion, etc.) | | |
| 5. Identify by Name, Address | and Position, the Custodian of Books and Ac | counts (incl | ude treasurer's name) | | |
| Full Name | Mailing Address | Committee Title or Position | | | |
| Maria Kuhn | 1742 W Flagler Street Miami, Florida 33135 | 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 Addr | Mailing Address | | Committee Title or Position | | |
| Neisen Kasdin | 98 SE 7th St #1100 Miami, FL 33131 | | | rson | | |
| Juan-Carlos Planas, Esq. | | 2332 Galiano Street, 2nd Floor Coral Gables, FL 33134 | | Registered Agent | | |
| 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 | | | | |
| N/A | N/A | N/A | N/A N/A | | | |
| 8. List Any Issues this Committee is Supporting: Yes on Miami Beach Referendum 7 in the November | | | | | | |
| Sth election. 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? | | | | | | |
| 10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Return to contributors or donate to 501(c)(3) organization. | | | | | | |
| 11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds | | | | | | |
| Name of Bank or Depository & Account Number Mailing Addre | | | Address | | | |
| Bank of America | | 9101 S. Dixie Highway Pinecrest, FL 33156 | | | | |
| 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 o | f Official | Mailing Address | | |
| SS4 Form 8871 Form 1120 POL Form 990 | Upon Formation Upon Formation March 15, Annually May 15, Annually | Internal Revenue S Internal Revenue S Internal Revenue S Internal Revenue S | ervice ervice | Ogden, UT 84201 Ogden, UT 84201 Ogden, UT 84201 Ogden, UT 84201 | | |
| STATE OF FLORIDA Miami-Dade COUNTY | | | | | | |
| Neisen Kasdin , certify that the information in this Statement of | | | | | | |
| Organization is complete, true and correct. Signature of Chairman of Political Committee Date | | | | | | |