STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

1. Full Name of Committee

OFFICE USE ONLY

Telephone

RECEIVED

AUG 4 2020

CITY OF MIAMI BEACH OFFICE OF THE CITY CLERK

YES for Marina Park		850-980-6542					
Mailing Address (include city 2929 SW 3 Avenue Suite 220 Miami, FL 33129	, state and zip code)						
Street Address (include city, s 300 Alton Road Suite 206 Miami Beach, Florida 33139	state and zip code)						
2. Affiliated or Connected Org committees)	ganizations (includes other committees of con	tinuous ex	istence and political				
Name of Affiliated or Connected Organization	Mailing Address	Relationship					
N/A	N/A		N/A				
3. Area, Scope and Jurisdiction of the Committee Political Committee in Miami Beach, Florida, to support a ballot initiative for lease and sale of public property.							
_	Organization's Special Interest (e.g., medical, loallot measures relating to the sale and le	-					
5. Identify by Name, Address	and Position, the Custodian of Books and Ac	counts (inc	lude treasurer's name)				
Full Name	Mailing Address	Committee Title or Position					
Maria Kuhn	2929 SW 3 Avenue Suite 220 Miami, FL 33129	Treasurer					

		d Position, Other Principal (r (include chairman's name)		Officers a	nd Memi	bers of the		
Full Name		Mailing Address		Cor	Committee Title or Position			
David Martin		3109 Grand Avenue, #349 Miami, Florida 33133		Chairm	an C/>	AUG 4 2020		
Juan-Carlos Planas, E	sq.	2332 Galiano Street, Suite 204 Coral Gables, Florida 33134		Registered Agent MAMIBEACH				
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		
To Be Determined	N/A	A	N/A	N/A		N/A		
8. List Any Issues this Committee is Supporting: Yes, on ballot measures for Marina Park.								
List Any Issues this Committee is Opposing: To Be Determined								
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? Donation to 501(c)(3) charitable organization.								
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds								
Name of Bank or Depository & Account Number			Mailing 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 of	of Official	M	lailing 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	Service Service	Ogden, Ogden,	UT 84201 UT 84201 UT 84201 UT 84201		
STATE OF Florida		Miami-Dade county						
I, David Martin , certify that the information in this Statement of								
Organization is complete, true and correct. Signature of Chairman of Political Committee V147000 Date								