## STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

**OFFICE USE ONLY** 

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CITY CLERK'S OFFICE

Save Man	Berch 2016	305 496 9525					
Mailing Address (include city, state and zip code) 1051 Michigan Ave #3 Michigan FL, 33139							
Street Address (include city, state and zip code)							
Same		·					
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)							
Name of Affiliated or Connected Organization	Mailing Address	Relationship					
n/a							
3. Area, Scope and Jurisdiction of the Committee							
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)  Mim Beath folitical Activism							
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					
Deniel Chalds (1) dgc 223@gmail.com	OSI Michigan Ave #3 Minni Beach, FL, 33139	Trensurer/Registered Agent					
·							

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 Add	Mailing Address		Committee Title or Position			
Densel Grald	o DSI Michigan	1051 Michigan #3 Mg, FL, 33139		Charperson			
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	•	The latest the second s		SCOE			
8. List Any Issues this Committee is Supporting: City of Mieni Beach petitions for charter							
List Any Issues this Committee is Opposing:							
9. If this Committee is Sup	porting the Entire Ticket of a	Party, Give Name o	f Party		유 <b>%</b>		
1010				4 1 1			
	tion, What Disposition will be			<i></i>	-		
Return to contributors or donate to an IRC Sec. 527 or SAG.							
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds							
Name of Bank or Depository & Account Number		Mailing Address					
City National Benk		500 718t Street, Mieni Beach, Fl					
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	Ma	iling Address		
pore				•			
STATE OF Florida Mieni-Dade COUNTY					COUNTY		
I, Daviel Grado , certify that the information in this Statement of							
Organization is complete, true and correct.							
x Donel Coulds 3-9-16					16		
✓ Signature of C	hairman of Political Committee			Date			