

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

SEP 1 PM 12:03

M. Ready

1. Full Name of Committee One Surfside	Telephone
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Mailing Address (include city, state and zip code)

*1018 B 71 ST
MIAMI BEACH, FL 33141*

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
None		

3. Area, Scope and Jurisdiction of the Committee
 Local committee to support or oppose issues and/or candidates for municipal or county offices, register voters, or other activity not prohibited by Chapter 106, Florida Statutes

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)
 Community Issues/Political

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
Aaron Nevins	9715 W. Broward Blvd. #246 Plantation, FL 33324	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 Address	Committee Title or Position
Jack Benveniste	10183 71 St Miami Beach, FL 33141	Chairman

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			

8. List Any Issues this Committee is Supporting: to be determined
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?
 Donate to an organization that is tax exempt per section 527

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	901 SE 17th St Cswy Ste 100 Fort Lauderdale, FL 33316

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 Official	Mailing Address
8871 1120POL 990 as needed	upon formation 3/15 annually 3/15 annually	IRS	Ogden, UT 84201

STATE OF Florida COUNTY Miami-Dade

I, Jack Benveniste, certify that the information in this Statement of

Organization is complete, true and correct.

X Jack Benveniste
 Signature of Chairman of Political Committee

09-01-2023
 Date

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

OFFICE USE ONLY

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

SEP 1 PM 12:03
Handwritten signature

Registered Agent and Office Information

Name Aaron Nevins		Telephone
Street Address 9715 W. Broward Blvd #246		
City Plantation	State FL	Zip Code 33324
Mailing Address Same		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

[Signature] 9-1-23
Signature of Registered Agent Date

Former Registered Agent and Office Information (for changes only)

Name		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization One Surfside		
Street Address 1017 B H St		Telephone
City Miami Beach	State FL	Zip Code 33141
<u><i>Jack Benveniste</i></u> Signature of Chairperson		
<u>JACK Benveniste</u> Printed Name of Chairperson		<u>9-1-23</u> Date

One Surfside
1018B 71st Street
Miami Beach, FL 33141

October 1, 2023

TOWN OF SURFSIDE

Sandra N. McCready, MPA, MMC
Town Clerk, Town of Surfside Florida
9293 Harding Avenue
Surfside, Florida 33154

OCT4 '23 12:24PM

Re: One Surfside Political Committee

Dear Clerk McCready:

Please be advised that, effective immediately, I am resigning from the position of Chairperson for the above-referenced Political Committee. Aaron Nevins has been appointed to the position of Chairperson.

Mr. Nevins Acceptance of the appointment is included. Please update the City's records accordingly. Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink that reads "Jack Benveniste". The signature is written in a cursive style with a long, sweeping horizontal line extending to the right.

Jack Benveniste, Chairman

One Surfside
1018B 71st Street
Miami Beach, FL 33141

October 1, 2023

TOWN OF SURFSIDE

Sandra N. McCready, MPA, MMC
Town Clerk, Town of Surfside Florida
9293 Harding Avenue
Surfside, Florida 33154

OCT4 '23 12:25PM

Re: One Surfside Political Committee

Dear Clerk McCready:

I hereby accept the appointment of the position of Chairman for the above referenced Political Committee. Please update the City's records accordingly. Thank you for your assistance in this matter.

Sincerely,



Aaron Nevins

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) One Surfside

Name

(2) 9715 W. Broward Blvd. #246

Address (number and street)

Plantation, FL 33324

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

TOWN OF SURFSIDE

OCT4 '23 12:25PM

(4) Check appropriate box(es):

Candidate Office Sought: _____

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 01 / 23 To 09 / 30 / 23 Report Type: Q3

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , , .

Loans \$ 0 , , .

Total Monetary \$ 0 , , .

In-Kind \$, , . 45.86

(7) Expenditures This Report

Monetary Expenditures \$ 0 , , .

Transfers to Office Account \$ 0 , , .

Total Monetary \$ 0 , , .

(8) Other Distributions

\$ 0 , , .

(9) TOTAL Monetary Contributions To Date

\$, , . 45.86

(10) TOTAL Monetary Expenditures To Date

\$ 0 , , .

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name)

ARRAR DEWINS

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X

Signature

(Type name)

ARRAR DEWINS

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

OCT4 '23 12:25PM

OCT4 '23 12:25PM

(1) Name One Surtside

(2) I.D. Number _____

(3) Cover Period 01 / 01 / 23 through 09 / 30 / 23

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
9/14/2023 / /	Chelsea Road Consulting 9715 W. Broadway Blvd. 246 Plantation, FL 33324			TRK	Website/email		\$45.86
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name One Suriside

(2) I.D. Number _____

(3) Cover Period 07 / 01 / 23 through 09 / 30 / 23

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
// /	NONE				
// /					
// /					
// /					
// /					
// /					
// /					
// /					
// /					

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

JAN 8 PM 3:10

OFFICE USE ONLY

One Surfside

Name

Office Sought

9715 W Broward Blvd. #246

Plantation, FL 33324

Address

City

State

Zip Code

Candidate

Political Committee

Party Executive Committee

NOTE: This form does not apply to an electioneering communications organization (ECO). An ECO must file a report (not a waiver) that no reportable contributions or expenditures were made during the reporting period (s. 106.0703(6), F.S.).

Check here if address has changed since last report.

Check here if PC has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M _____

Indicate report #

P _____

Indicate report #

G _____

Indicate report type and #
as applicable:

2023 Q4

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

10/1/23

THROUGH

12/31/23

X

Signature

Date

1/4/24

X

Signature

Date

1/4/24

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

Except as noted above for an ECO, in any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.