**Committee Name:** 

WE CAN CHANGE AMERICA SUPER PAC

If registered, FEC ID:

Today's Date:

09/17/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

**PAUL MARX** 

, Treasurer

## STATEMENT OF

RECEIVED -

FORM 1		ORGANIZATION				FEC MAIL CENTER			
1. NAME OF COMMITTEE (ii	n full)		Check if names changed)		ample:If typing, type	12FE		Rice Use Onl	COLVICIO
٠.			• •		PER PAC				
	للللل	1.1.1.			11111	<u> </u>			
ADDRESS (number a	and street)	P. 0	. BOX	61316	2	<u> </u>			
(Check if a is changed)		NOF	RTH MI	AMI		, FL	3	3261	<u>                                     </u>
				CITY		STATE		ZIP (	CODE
COMMITTEE'S E-M/ (Check if is change	address		provide only o		ddress) NAGEME	NT@G	MAIL	ÇQN	<u></u>
COMMITTEE'S WEE	B PAGE AD	DRESS (UI	RL)						
(Check if is change									<del>                                     </del>
2. DATE ÖŞ	<b>9</b> " 17	7°′Ž(	)12						
3. FEC IDENTIFIC	CATION N	UMBER	C	,					
4. IS THIS STATE	MENT E	NEW	(N) O	R [	AMENDED (A	\) 			
I certify that I have	exammed t	his Stateme	nt and to the	best of my	knowledge and beli	ief it is true, c	correct and	d complete	,
Type or Print Name	of Treasure	PA	UL MA	RX				·····	
Signature of Treasur	er 4	aul	non	<b></b>		Date	Ö9" <i>′</i>	17°	′ <b>20</b> ′12
NOTE: Submission of	false, erron			=	bject the person sign	_		penalties o	f 2 U.S.C. §437g.
Office Use					For further information Federal Election Communication From 800-424-953	mission		FEC F	

FEC Fo	rm 1 (Revised 02/2009)	Page 2				
TYPE OF COMMITTEE						
(a)	Candidate Committee:  a) This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)						
Name of Candidate						
Candidato Party Affiliati	on Sought: House Senate President	State District				
(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Con	Party Committee:  (National, State (Democratic,					
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party.				
Political A	ction Committee (PAC):					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
	Corporation Corporation w/o Capital Stock Labor Organization					
	Membership Organization Trade Asseciation	Cooperative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint Fundralsing Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate					
(h)						
Committees Participating in Joint Fundraiser						
1.						
2.	FEC ID number C					
3.	FEC ID number C					
4						

FEC Form 1 (Revise	ad 02/2009)	Page <b>3</b>			
Write or Type Committee Na					
WE CAN CHA	NGE AMERICA SUPER PAC				
6. Name or Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor			
NONE					
Mailing Address					
		I-I I			
	CITY STATE	ZIP CODE			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					
7. Custodian of Recerds: in books and records.	dentify by name, address (phone number optional) and position of the person in	possession of committee			
PAL	JL MARX				
Tun Hamb	<sub>I</sub> P. O. BOX 613162	<u> </u>			
Mailing Address	1				
	NORTH MIAMI	<b>261</b> . <sub>I-1</sub>			
		<u></u>			
Title or Position	CITY STATE	ZIP CODE			
EXECUTIVE D	IRECTOR Telephone number [786]	. [763, ] - [7862			
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the	name and address of			
Full Name of Treasurer	<del></del>				
Mailing Address	P. O. BOX 613162				
	NORTH MIAMI FL 33	261 zip code			
Title or Position	Telephone number [786, ]	763 - 7862			

FEC Form 1 (R	levised 02/2009)		Page 4
	·		
Full Name of Designated Agent		1 1 1 1 1 1 1	
Mailing Address	L		
		1 1 1 1 1 1 1	
	CITY	STATE	ZIP CODE
Title or Position		one number	
safety deposit boxes o Name of Bank, Deposi		- Label adjusts	Total accounts, forts
Mailing Address	990 NE 125TH STREET		
	NORTH MIAMI	F	33161
	CITY	STATE	ZIP CODE
Name of Bank, Depos	itory, etc.		
L		1 1 1 1 1 1	
Mailing Address			
		ليا لي	<u> </u>
	CITY	STATE	ZIP CODE

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail** 7/18/12 Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 9/19/12 DATE PREPARED