Image# 201601209004527633				01/20/2016 01 : 10
	STATEMEN			PAGE 1 / 5
FEC FORM 1	ORGANIZA	-		
			Office	e Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	-
COMMITTEE (in full)	is changed)	over the lines.		
	RSON JOSUE LAROSE			
1				
	1900 WEST OAKLAND PARK	BLVD.		
ADDRESS (number and street)	# 9961			
is changed)	FORT LAUDERDALE		FL33310	
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
 (Check if address is changed) 	USPoliticalActionComm	nittees@gmail.com		
	Optional Second E-Mail Add	Iress		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
(Check if address is changed)	www.UnitedStatesPoliticalActio	onCommitteesDirectory.com		
is changed)				
M = M / D =				
2. DATE 01 20	2016			
3. FEC IDENTIFICATION NU	JMBER ► C cc	0605311		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.				
Type or Print Name of Treasurer JOSH LAROSE				
Signature of Treasurer JOSH	LAROSE	[Electronically Filed]	Date 01	20 / Y Y Y Y 20 2016
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	m F	EC FORM 1 (Revised 06/2012)

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FE	EC For	m 1 (Revised 02/2009)	Page 2			
TYPE	OF C	OMMITTEE				
Cand	idate	Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	te the candidate			
Name Candid						
Candid Party A		on Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Candid						
Party	Com	mittee:				
(d)			emocratic, publican, etc.) Party			
Politi	cal A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conner	cted organization is			
		Corporation Corporation w/o Capital Stock	abor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party			
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint	Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Com	nittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.	FEC ID number				

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

WORLD'S RICHEST PERSON JOSUE LAROSE PROPERTY MANAGEMENT COMPANIES COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor			

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

JOSH LAF	ROSE	
Full Name		
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961 	
	FORT LAUDERDALE FL 33310	
Title or Position	CITY STATE Z	IP CODE
	Telephone number	68 6650

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	JOSH LAROSE		
of Treasurer			
Mailing Address	1900 WEST OAKLAND PARK BLVD.		
	# 9961 		
		FL 3331	0
	CITY	STATE	ZIP CODE
Title or Position		ephone number	768 6650

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Full Name of Designated Agent	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	# 9961
	FORT LAUDERDALE FL 33310 Image: State of the state
	CITY STATE ZIP CODE
Title or Position	Telephone number 800 - 768 - 6650

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank,	Depository,	etc.
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BANK			
Mailing Address	701 BRICKELL AVENUE		
	MIAMI		33131
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

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.

Form/Schedule: Transaction ID: