Image# 201601189004516779		01/18/2016 23 : 13			
FEC FORM 1	STATEMENT OF ORGANIZATION		Offi	PAGE 1 / 5	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5		
	1900 WEST OAKLAND PAR	A BI VD.		<u> </u>	
ADDRESS (number and street					
(Check if address is changed)					
			STATE ▲		
COMMITTEE'S E-MAIL ADD	RESS				
(Check if address is changed)	USPoliticalActionComn	nittees@gmail.com			
is changed)	Optional Second E-Mail Add	Optional Second E-Mail Address			
COMMITTEE'S WEB PAGE (Check if address is changed)	ADDRESS (URL)	ionCommitteesDirectory.com			
2. DATE 01 /	D D / Y Y Y Y 18 2016				
3. FEC IDENTIFICATION	NUMBER ► C C	00604967			
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)			
I certify that I have examine	d this Statement and to the best	of my knowledge and belief it	is true, correct and	complete.	
Type or Print Name of Treas	urer JOSH LAROSE				
Signature of Treasurer	OSH LAROSE	[Electronically Filed]	Date 01	18 / Y Y Y Y 10 2016	
NOTE: Submission of false, er	roneous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.	
Office Use Only		For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)	

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FEC FC	Page 2			
TYPE OF C	COMMITTEE			
Candidate	e 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. (Complete the candidate information below.)			
Name of Candidate				
Candidate Party Affiliat	tion Office Sought: House Senate President District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Cor	nmittee:			
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Pa			
Political A	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization			
	Corporation Corporation w/o Capital Stock Labor Organization			
	Membership Organization Trade Association Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa 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 Fund	draising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
Com	nmittees 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 FILM STUDIOS COMMITTEE

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

Mailing Address				
	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 LAR	ROSE		
Full Name			
Mailing Address	1900 WEST OAKLAND PARK BLVD.		
<u> </u>	# 9961 		
	FORT LAUDERDALE	FL 33310	
Title or Position	CITY	STATE	ZIP CODE
	Telep	phone number	768 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 		
	FORT LAUDERDALE FL 33310 – / <th <="" th=""> <th <="" th=""> / /</th></th>	<th <="" th=""> / /</th>	/ /
	CITY STATE ZIP CODE		
Title or Position	Telephone number 800 768 6650		

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Full Name of Designated Agent		
Mailing Address	s 1900 WEST OAKLAND PARK BLVD.	
	# 9961	
		33310
	CITY STATE	ZIP CODE
Title or Position	n	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.
------	----	-------	-------------	------

BANK			
Mailing Address	701 BRICKELL AVENUE		
	MIAMI	FL 331:	31
	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: