FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
ROJAS, IRIS, MARGARITA, , / TBA, TBA, , ,

(b) Address (number and street) ☐ Check if address changed
2829 LAKE MICHAELA BLVD

2. Candidate's FEC Identification Number
P40020075

(c) City, State, and ZIP Code
VALRICO FL 33596

3. Is This Statement ☒ New (N) **OR** ☐ Amended (A)

4. Party Affiliation	5. Office Sought	6. State & District of Candidate
INDEPENDENT	Presidential	00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
IRIS MARGARITA ROJAS FOR PRESIDENT

(b) Address (number and street)
2829 LAKE MICHAELA BVD

(c) City, State, and ZIP Code
VALRICO FL 33596

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
Friends of Iris

(b) Address (number and street)
1440 Bloomingdale Ave

(c) City, State, and ZIP Code
Valrico FL 33596

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate	Date
ROJAS, IRIS, MARGARITA, ,	05/30/2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.