PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Bettina Rodriguez-Aguilera For Congress 600 Brickell Avenue ADDRESS (number and street) Suite 1715 (Check if address is changed) Miami 33131 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jcplanas@kymplaw.com (Check if address is changed) Optional Second E-Mail Address ijcplanas@kymplaw.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 28 2017 C00654194 FEC IDENTIFICATION NUMBER 3. X 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. Massa, Sergio, , , Type or Print Name of Treasurer Massa, Sergio, , , [Electronically Filed] 09 20 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FEC F	Form 1 (Revised 02/2009) Page 2
	COMMITTEE
	Ite Committee:
(a) *	This committee is a principal campaign committee. (Complete the candidate information below.)
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Rodriguez-Aguilera, Bettina, , ,
Candidate	Nouriguez-Aguilera, Dettiria, , ,
Candidate Party Affilia	ation REP Office State FL Sought: X House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Part
Political	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	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 part 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 Fur	ndraising 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.
Co	mmittees Participating in Joint Fundraiser
1.	
2.	FEC ID number
3.	FEC ID number
4	

FEC Form 1 (Revised	1 02/2009)	Page 3
Write or Type Committee Nan		. 290 2
	uez-Aguilera For Congress	
	Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the	he person in possession of committee
	Sergio, , ,	
Full Name	8343 Bird Road	
Mailing Address		
	, Miami	, ,33155
	Name Part Part	
Title or Position	CITY STATE	ZIP CODE
	Telephone number	305 - 220 - 3420
3. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the commit assistant treasurer).	ittee; and the name and address of
Full Name Massa, S	Sergio, , ,	
Mailing Address	8343 Bird Road	
	Miami	33155
	CITY STATE	ZIP CODE
Title or Position	Telephone number	305 220 3420
	ielepriorie fluttibel	

FEC Form	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Planas, Juan-Carlos, , ,	
Mailing Address	600 Brickell Avenue	
	Suite 1715	
	Miami FL 33131 CITY STATE	ZIP CODE
Title or Position		1 7
Mailing Address	Suntrust Bank 8302 Bird Road Miami FL 33155	
		ZIP CODE
Name of Bank,		
Mailing Address		
Mailing Address		
Mailing Address		