FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Together, Ready	& United, for Mo	ore Prosperity	
ADDRESS (number and street)	2600 South Douglas Road, St	e 900	
(Check if address is changed)	Coral Gables CITY ▲		FL 33134 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS		
(Check if address is changed)	lauren@groundswellstr	ategies.net	
	Optional Second E-Mail Add		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)		
2. DATE 07 2	D / Y Y Y Y 1 2016		
3. FEC IDENTIFICATION N	UMBER ► C cc	00622159	
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	er Riesco, Jose, A, ,		
Signature of Treasurer	co, Jose, A, ,	[Electronically Filed]	Date 01 / 25 / 2018
NOTE: Submission of false, error		nay subject the person signing t DN SHOULD BE REPORTED W	this Statement to the penalties of 2 U.S.C. §437g. /ITHIN 10 DAYS.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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TYPE (DF COMMITTEE			
Candi	date 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. (Com information below.)	plete the candidate		
Name o Candida				
Candida Party A		State		
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name o Candida				
Party	Committee:			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Politic	al Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a:		
	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 se committee. (i.e., nonconnected committee)	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 Lobbyist/Registrant PAC.		
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint F	undraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political		
Committees Participating in Joint Fundraiser				
	1 FEC ID number C			
:	2 FEC ID number C			
;	3 FEC ID number C			
	4.			

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Write or Type Committee Name

Together, Ready & United, for More Prosperity

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.

Riesco, Jo	se, A, ,
Full Name	
	2600 South Douglas Road, Ste 900
Mailing Address	
	Coral Gables FL 33134 - - - -
Title or Position	CITY STATE ZIP CODE
Treasurer	305 445 0777 Telephone number - -

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	Riesco, Jose, A, ,
of Treasurer	
Mailing Address	2600 South Douglas Road, Ste 900
	Coral Gables FL 33134 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Image: Telephone number 305 445 0777

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Full Name of Designated Agent	Pardo, Lauren, , ,
Mailing Address	5246 SW 8 Street, Ste 205-D
	Miami
	CITY STATE ZIP CODE
Title or Position Chairperson	Telephone number 305 - 766 - 3520

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.

	City National Bank	
Mailing Address	2855 Le Jeune Road	
	Coral Gables	FL 33134
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE