## FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 1

1.	(a) Name of Candidate (in full)						=	
	Ekpete, Uloma, Uma, Dr.,							
	(b) Address (number and street) 7901 4th Street N Ste 300	□ Check if address changed				2. Candidate's FEC Identification Number S2FL00714		
	(c) City, State, and ZIP Code					3. Is This New Amended		
	St Petersburg		FL	33702		Statement (N) OR X (A)		
4.	Party Affiliation	5. Office Soug				trict of Candidate		
	W	Senate			FL	00	_	
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the <u>2022</u> election(s). (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full) PERIDOT OPERATIONS INC- DR. ULOMA UMA EKPETE (FLORIDA SENATE CANDIDATE).							
	(b) Address (number and street) 7901 4TH STREET N STE 30	00						
	(c) City, State, and ZIP Code							
	ST PETERSBURG				FL	33702		
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) PERIDOT OPERATIONS INC- DR. ULOMA UMA EKPETE (FLORIDA SENATE CANDIDATE).								
(b) Address (number and street) 7901 4TH STREET N STE 300								
	(c) City, State, and ZIP Code							
	ST PETERSBURG				FL	33702		
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	•	
E	kpete, Uloma, Uma, Dr.,		[Electronically Filed]			08/25/2022		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)