Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. SOS America PAC 6619 S.Dixie Highway #148 ADDRESS (number and street) (Check if address is changed) South Miami 33143 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS gloria@bffcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://sosamericapac.org (Check if address is changed) DATE 2023 C00801803 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. Maggiolo, Gloria, , , Type or Print Name of Treasurer Maggiolo, Gloria,,, [Electronically Filed] 06 28 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2	
TYPE OF COMMITTEE:		
Candidate 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 information below.)	I campaign committee. (Complete the candidate	
Name of Candidate		
Candidate Office Party Affiliation Sought: House	Senate President District	
(c) This committee supports/opposes only one candidate, and is NOT	an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a (National, State or subordinate) committee of	the (Democratic, Republican, etc.) Party	
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify connected	organization on line 6.) Its connected organization is a:	
Corporation Corporation w/o Ca	apital 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 committee. (i.e., nonconnected committee)	e, and is NOT a separate segregated fund or party	
In addition, this committee is a Lobbyist/Registrant PAC.		
In addition, this committee is a Leadership PAC. (Identify	sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC). In addition, this committee is a Lobbyist/Registrant PAC.		
		(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC
In addition, this committee is a Lobbyist/Registrant PAC.		
Joint Fundraising Representative:		
(i) 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.		
(j) 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.		
Committees Participating in Joint Fundraiser		
1.	C	
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٧	rite or Type Committee Name	•	<u> </u>
	SOS America	PAC	
6.		rganization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representation	tive Leadership PAC Sponsor
			_
7.	Custodian of Records: Identification books and records.	ify by name, address (phone number optional) and position of the person	in possession of committee
	Maggiolo,	Gloria, , ,	
	Full Name		
	Mailing Address	6619 S. Dixie Highway #148	
		South Miami	33143
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	86
3.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
	Full Name Maggiolo,	∃loria, , ,	ı
	of Treasurer		
	Mailing Address	6619 S. Dixie Highway #148	
		South Miami FL	33143
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	86 - 342 - 9707

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Full Name of Designated Agent Mailing Address	Boudet, Otto, , , , 6619 S. Dixie Highway #148				
J		33143			
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲			
Assistant Treasur					
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, D	pepository, etc.				
Mailing Address	Synovus Bank 2500 Weston Road				
maining / taurooc	Sutie 300				
	Weston FL ;	33331			
	CITY ▲ STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE ▲	ZIP CODE ▲			