HAND DELIVERED

ELECTIONEERING COMMUNICATION STATEMENT OF ORGANIZATION

(PLEASE TYPE)

DECEIVED

16 JUN 24 PM 2: 52

DIVISION OF ELECTIONS SECRETARY OF STATE

			:			OFFICE USE ONLY		
1. Full Name of Organization				·•		Telephone		
One Florida						850-567-4878		
Mailing Address (include city, state and zip code) Post Office Box 1701, Tallahassee, FL 32302-1701								
Street Address (include city, state and zip code) 2618 Centennial Place, Tallahassee, FL 32308								
2. Affiliated or Connected Organizations								
Name of Affiliated or Connected Organization		Mailing Address				Relationship		
None								
3. Area, Scope and Jurisdiction of the Organization Statewide: To engage in electioneering communication and other activities to the extent permitted by law.								
4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization								
Full Name	Mailing Address		Street Address		s	Title or Position		
Mark Herron	Post Office Box 1701 Tallahassee, FL 32302		2618 Centennial Place Tallahassee, FL 32308			Treasurer		
5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.) As a newly created organization during the current calendar quarter. From an organization existing prior to the current calendar quarter.								

	. Include the top-ranking office		<u> </u>		
Full Name	Mailing Address	Street Address	Title or Position		
Mark Herron	Post Office Box 1701 Tallahassee, FL 32302	2618 Centennial Place Tallahassee, FL 32308	Chairman & Treasurer		
	lution, What Disposition will be tributed to an IRC 527 or IRC 50°				
8. List All Banks, Safety	Deposit Boxes, or Other Depo	eitories Used by this Organi	ization for Electioneering		
Communications	Deposit Boxes, or Other Depo				
Name of E	Bank or Depository	Mailing Address			
Hancock Bank		2453 Mahan Dr. Tallahassee, FL 32308			
9. List All Reports Requ & Positions of Such	ired to be Filed by this Organiz Officials, If Any	ation with Federal Officials,	& the Names, Addresses,		
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address		
IRS Form 8871 IRS 1120-POL IRS Form 990	Upon Creation March 15 Annually May 15 Annually	IRS IRS	Ogden, UT 84201		
STATE OF Florida		Leon	COUNTY		
, Mark Herron		, certify that the information in this Statement of			
Organization is complete,	true, and correct.				
X Marchan		June 24, 201	6		
Signature of Top-ran	king Principal Officer of Organiza	ation	Date		