



Office of the City Clerk
Vanessa Joseph, Esq.

TO: City of North Miami Municipal Candidate
FROM: Vanessa Joseph, Esq., Elected City Clerk J.
SUBJECT: Checklist of Candidate Packet - 2026 North Miami General Election

Below is a list of all documents, forms, or publications that are included in the Qualifying Packet. By initialing the lines next to each item, you are acknowledging that you have received the document, form, or publication.

PLEASE NOTE:

QUALIFYING BEGINS AUGUST 10, 2026, AT 8:30 AM EASTERN STANDARD TIME, AND ENDS ON AUGUST 20, 2026, AT 12:00 PM (NOON) EASTERN STANDARD TIME.

CONTENT OF QUALIFYING PACKET

ELECTION INFORMATION

1. ☒ Notice of Election, Resolution No. 2026-R-2
2. ☒ Qualifying Fees for Upcoming Elections
3. ☒ 2025 - 2026 Calendar of Financial Reporting Filing Dates
4. ☒ List of City of North Miami Precincts
5. ☒ Early Voting Schedule (MDCSE release date in mid-September)

FILING AND QUALIFYING DOCUMENTS

6. ☒ DS-DE 302NP Candidate Oath – Nonpartisan Office (Rev. 7/2026)
7. ☒ DS-DE 84 Statement of Candidate (Rev. 4/2026)
8. ☒ Affidavit of Residency of Candidate, City of North Miami
9. ☒ Declaration and First Amendment Waiver Form
10. ☒ CE Form 1 Statement of Financial Interest - (To be filed electronically via the Electronic Financial Disclosure Management System ([EFDMS]))
11. ☒ Loyalty Oath, For Candidate for Public Office
12. ☒ Declaration of Candidacy
13. ☒ City of North Miami Alternative Method Petition

Office of the City Clerk
776 NE 125 Street | North Miami | Florida | 33161
Office: 305.895.9817 Fax: 305.899.0497
E-mail: elections@northmiamifl.gov Web: www.northmiamifl.gov

14. ☒ Candidate Petition (Deadline: 7/13/2026 at 12:00 PM (noon))
15. ☒ DS-DE 125 Poll Watcher Designation Form and Instructions
16. ☒ MD-ED 26 Vote-by-Mail Ballot Activities Summary
17. ☒ MD-ED 28 Reporting of Solicitation of Contributions for Political Committees,
Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties

REFERENCE MATERIALS

18. ☒ Guide to Sunshine Amendment and Code of Ethics for public officers:
<https://ethics.state.fl.us/Documents/Publications/GuideBookletInternet.pdf?cp=2024723>
19. ☒ 2025 Election Laws of the State of Florida:
<https://files.floridados.gov/media/706922/binder1-florida-election-code-2023.pdf>
20. ☒ North Miami Charter:
https://library.municode.com/fl/north_miami/codes/code_of_ordinances?nodeId=PTICH_NOMI
21. ☒ North Miami Election Code:
https://library.municode.com/fl/north_miami/codes/code_of_ordinances?nodeId=PTIICO_OR_CH6EL_ARTIIIISEL_S6-41CAEL
22. ☒ Candidate & Campaign Treasurer Handbook (Rev. 5/2026)
23. ☒ Contact Information

MEMORANDUM

24. ☒ Statement of Qualification and Voting Equipment Pretest

I hereby certify that I have paid the required qualifying fees as defined by the City of North Miami Code of Ordinance. I also certify that the materials referenced in this documents have been provided to me, that I will read and understand them, and that my questions regarding the information provided have been fully answered to my satisfaction.

Alix Desulme
Signature of Candidate
Alix Desulme
Candidate Name

8/10/26
Date
J.
Signature ELECTED CITY CLERK / VANESSA JOSEPH

Florida DRIVER LICENSE 

ADLN [REDACTED] CLASS E
DESULME
[REDACTED]

DOB 12/05/1977 SEX M
EXP 12/05/2030 REG C-00
REST 0 AGEND NONE

SAFE DRIVER
EXP 09/26/2023
DOB [REDACTED]

REPLACED 05/21/2023

[Signature]

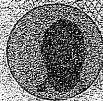
Operation of a motor vehicle constitutes consent to any sobriety test required by law.



The State
of Florida
retains all
property
rights herein.
120577
Rev
03/01/2020



21
0104 57008
2114



CLASS: E - Any non-commercial veh with a GVWR ≤ 26,001 lbs.
or any RV

REST: B-Corr Lenses

END: None

REPLACEMENT LICENSE REQUIRED WITHIN 30 DAYS
OF ADDRESS OR NAME CHANGE

WWW.FLHSMV.GOV

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

Received

MAY 1 12 26
MAY 1 2026

City Of North Miami
City Clerk's Office

OFFICE USE ONLY

I, Alix Desulme,

candidate for the office of Mayor;

have been provided access to read and understand the requirements of Chapter 106, Florida Statutes.

I swear or affirm that I meet, or will meet at the time of election for the office sought or at the time of assuming the office, as applicable, all statutory and constitutional qualifications for the office sought.

Alix Desulme

5/1/2026

Signature of Candidate

Date

STATE OF FLORIDA

COUNTY OF DADE

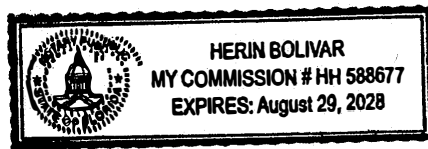
[Signature]
Signature of Officer Administering Oath

Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Sworn to (or affirmed) and subscribed before me by means of

online notarization ☐ OR physical presence ☐

this 1st day of MAY, 2026.



Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: Driver License

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

CANDIDATE OATH NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)
Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in Candidate

OFFICE USE ONLY

Name to appear on ballot: _____

Alix Desulme

☐ Check box if there are two last names without hyphen. (Name cannot be changed after qualifying.)

☐ Check box if name includes nickname. (To use nickname, you must complete the Affidavit of Nickname on page 2 of this form.)

I swear or affirm that I am a candidate for the nonpartisan office of Mayor,
(Office)

_____, _____, _____; I am a qualified elector of Miami-Dade County, Florida;
(District #) (Circuit #) (Group or Seat #)

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

I swear or affirm, in addition to being a citizen of the United States, that: (Check applicable box.)

☒ I am not a citizen of another country. ☐ I am a citizen of another country, specifically _____.

Statement of Legal Name Change: I have not legally changed my name through a petition pursuant to s. 68.07, F.S., during the 365-day period preceding the beginning of qualifying. (This does not apply to any change of name in proceedings for dissolution of marriage or adoption of children or based on a change of name conducted with a marriage certificate.)

Statement of Outstanding Fines, Fees, or Penalties: (Check applicable box. If you do owe more than \$250, you must also specify the amount owed and each entity that levied the same on page 2 of this form.)

I do not ☒ / I do ☐ owe outstanding fines, fees, or penalties that cumulatively exceed \$250, for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106. (s. 99.021(1)(d), F.S.)

Alix Desulme

Signature of Candidate

Num

alixdesulmecampaign@gmail.com

Email Address

Add _____ City _____ State _____ ZIP Code _____

STATE OF FLORIDA

COUNTY OF Dade

Sworn to (or affirmed) and subscribed before me by means of

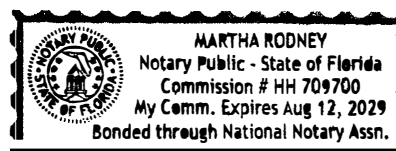
online notarization ☐ OR physical presence ☒

this 10th day of August, 2026

Type of Identification Produced: License

Signature of Officer Administering Oath

Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)



DS-DE 302NP-E (Eff. 07/08/2026)

Emergency Rule 1SER26-3, F.A.C.

Phonetic Spelling of Name

(Not required for qualifying)

Print the name phonetically on the line below as you wish your name to be pronounced on the audio ballot that may be used by persons with disabilities (see attached Guide for Phonetic Spelling).

Detailed Statement of Outstanding Fines, Fees, or Penalties

(Continued)

Amount	Entity

Affidavit of Nickname

(Only required if using nickname for the ballot)

My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA**COUNTY OF** _____

Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☐
this _____ day of _____, 20_____.

Type of Identification Produced: _____

Signature of Officer Administering Oath*Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)*

Guide for Printing Phonetic Spelling of Candidate's Name for Audio Ballot

(Do not submit this page to the filing officer)

1. Use the tables below for Phonetic Spelling of Candidate's Name on page 2 of Form.
2. Use upper case for "stressed" syllables. Use lowercase for "unstressed" syllables.
3. Use dashes (-) to separate syllables.
4. Add any notes such as rhyming examples, silent letters, etc.

Vowels			
Stressed Vowel Sounds		Unstressed Vowel Sounds	
EE	(FEET) feet	uh	(SO-fuh) sofa (FING-guhr) finger
I	(FIT) fit		
E	(BED) bed		
A	(KAT) cat (KAD) cad		
AH	(FAH-thur) father (PAHR) par		
AH	(HAHT) hot (TAH-dee) toddy		
UH	(FUHJ) fudge (FLUHD) flood		
UH	(CHUHRCH) church		
AW	(FAWN) fawn	Certain Vowel Sounds with R	
U	(FUL) full	AHR	(PAHR) par
OO	(FOOD) food	ER	(PER) pair
OU	(FOUND) found	IR	(PIR) peer
O	(FO) foe	OR	(POR) pour
EI	(FEIT) fight	OOR	(POOR) poor
AI	(FAIT) fate	UHR	(PUHR) purr
OI	(FOIL) foil		
YOO	(FYOOR-ee-uhs) furious		

Consonants			
B	(BED) bed	R	(RED) red
D	(DET) debt	S	(SET) set
F	(FED) fed	T	(TEN) ten
G	(GET) get	V	(VET) vet
H	(HED) head	Y	(YET) yet
HW	(WHICH) which	W	(WICH) witch
J	(JUHJ) jug	CH	(CHUHRCH) church
K	(KAD) cad	SH	(SHEEP) sheep
L	(LAIM) lame	TS	(ITS) its
M	(MAT) mat	TH	(THEI) thigh
N	(NET) net	TH	(THEI) thy
NG	(SING-uhr) singer	ZH	(A-zuhr) azure (VI-zuhn) vision
P	(PET) pet	Z	(GOODZ) goods

Examples of Phonetically Spelled Names	
Name on Ballot	Pronounced As
Mishaud	mee-SHO ('d' is silent)
Jahn	HAHN (rhyme: fawn)
Beauprez	boo-PRAI (rhyme: hooray)
Maniscalco	man-uh-SKAL-ko
Tangipahoa	TAN-ji-pah-HO-uh
Monte	Mahn-TAI
Tanya	TAWN-yuh (not TAN)
Pittsfield	PITS-feeld
Hubbardston	HUH-buhz-tuhn

2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/15/2026

General Information

Name: Dr Alix Desulme EdD

PID 230368

AGENCY INFORMATION

Organization	Suborganization	Title
Miami-Dade Transportation Planning Organization (TPO)	Governing Board	TPO Board Member
North Miami	Community Redevelopment Agency (CRA)	CRA Board Member
North Miami	Mayor And City Commission	Mayor

CANDIDATE FOR

Position	Agency Name	Position sought or held
Mayor for a City, Town or Village - Form 1 (Effective 6/10/2024)	City of North Miami, Florida	Mayor

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
City of North Miami	776 NE 125 Street	Public Service

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
Lead To Excel, USA	Education	12794 West Dixie Hwy	Educational Services

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write "none" or "n/a")

Location/Description
830 NW 133rd Street, North Miami, FL

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)
(If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates
FRS	Retirement
401K	Retirement
Fidelity	Investment

Liabilities

LIABILITIES (Major debts valued over \$10,000):
(If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor
Carrington Mortgage	500 North State College Boulevard, Suites 1030, Orange, CA 92868
IMC Group	696 NW 125 Street, North Miami, Florida

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write "none" or "n/a")

Business Entity # 1
N/A

Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☐ I certify that I have completed the required training under Section 112.3142, F.S.
- ☒ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Filer

Alix Desulme EdD

Digitally signed: 06/15/2026

Filed with COE: 06/15/2026

LOYALTY OATH

(For Candidate for Public Office)
(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

(Please Print)

I, Alix Desulme _____, a citizen of the
(First name) (Middle Name/Initial) (Last Name)

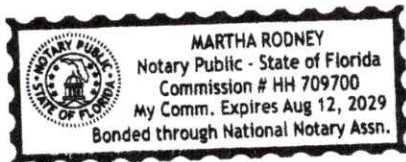
State of Florida and of the United States of America and a candidate for public office do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Alix Desulme
(Signature of Candidate)

(Street Address)

(City) (State) (Zip)

The Loyalty Oath is sworn to and subscribed before me this 10th day of August,
2026, at North Miami, Miami-Dade County, Florida.



[Signature]
Signature of Officer Administering Oath

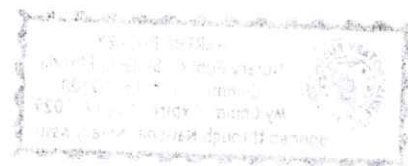
Office of the City Clerk

776 NE 125 Street | North Miami | Florida | 33161

Office: 305.895.9817 Fax: 305.899.0497

E-mail: elections@northmiamifl.gov

Web: www.northmiamifl.gov



AFFIDAVIT OF RESIDENCY OF CANDIDATE

CITY OF NORTH MIAMI, FLORIDA

COUNTY OF MIAMI-DADE)
CITY OF NORTH MIAMI)

Alix Desulme (hereinafter "affiant"), being first
duly sworn, deposes and says:

1. My name is Alix Desulme
2. I have been duly informed and fully understand that **Sec. 6-78 (B) of the City of North Miami Code of Ordinances - Election of city council members** states as follow:

"Any person seeking the office of mayor or councilperson must be a resident of the city and/or the respective district of North Miami for at least one (1) year prior to qualifying for office.

(1) All candidates shall submit a sworn affidavit at the time of qualifying that provides their current address of legal residence and affirms that they have met the residency requirements pursuant to this section. The affidavit shall be on a form provided by the city clerk acting as the supervisor of elections.

(2) In addition to filing the affidavit, candidates shall submit proof of residency which shall include one (1) of the following documents: voter's registration, driver's license, property tax receipt, homestead exemption, utility bill or lease agreement; all of which must have been in effect for at least one (1) year prior to qualifying.

(3) In addition to any other penalties which may be applicable, any person who knowingly misrepresents their legal residency and/or who knowingly makes a false statement in writing regarding their residency, shall be guilty of perjury, a second degree misdemeanor pursuant to F.S. § 837.06, punishable as provided in F.S. §§ 775.082 or 775.083."

3. **For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below:**

☒

(a) I am offering myself as a candidate for the office of Mayor of the City of

North Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of North Miami for the duration of my term of office.

For those candidates seeking the office of Councilperson, please check and fill in the blank in subsection (b) below:

- _____ (b) I am offering myself as a candidate of the office of Councilperson in District Number ____ of the City of North Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.

For those candidates seeking the office of City Clerk, please check the appropriate subsection (c) below:

- _____ (c) I am offering myself as a candidate of the office of City Clerk of the City of North Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of North Miami for the duration of my term of office.

4. I have resided in the City of North Miami for a minimum of one year before qualifying if applying for Mayor, and one year in district 4 if applying for Councilperson, and I am a registered voter and a fully qualified elector of the City of North Miami, Florida, presently registered to vote in Precinct No. 134. Copy of voter registration card is attached.

I presently reside at the following address (must include zip code):

_____ which is my legal address and I have resided continually at said address from the 1 day of January, 2000 to the present.

(If you have not reside at the above address for more than a year, please list the address(es) you have resided for the past year.)

I previously resided at the following address (must include zip code):

5 _____, which is was my legal address, and I have resided continually at said address from the _____ day of _____, _____ to _____ day of _____, _____.

5. In addition to the residence that I have listed as my present address, I also reside at the following listed address(es) on a temporary basis as a secondary domicile or domiciles:

6. Article 3, Section 10 (3) of the North Miami City Charter states in part, "...A councilmember candidate must continuously reside and submit a Florida government issued identification (ID) plus one type of residency showing that the candidate has continuously resided in the district for which the candidate is seeking election, for a period of one (1) year prior to the time of qualification and thereafter..." and Pursuant to Sec. 6-78 (b) of the North Miami Code of Ordinances, I shall prove my residency by submitting (please check at least one (1) of the following):

☐ voter's registration,
☒ driver's license,
☐ propertytax receipt,
☐ homestead exemption,
☒ utility bill
☐ lease agreement,

all of which have been in effect for at least one (1) year prior to qualifying.

SIGNED THIS 10 DAY OF August, 2026.

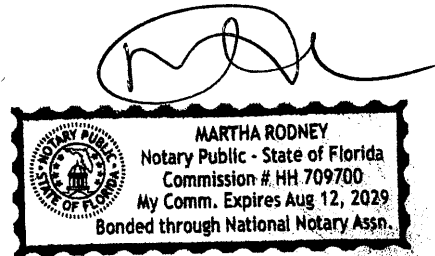
Alex Desulme
AFFIANT

BEFORE ME, the undersigned authority, personally appeared AUX DESULME,

who, after first being duly sworn, deposes and states that AUX DESULME executed the foregoing to the best of HIS knowledge and belief.

[Signature]
VANESSA JOSEPH, ESQ., ELECTED CITY CLERK
CITY OF NORTH MIAMI, FLORIDA

(SEAL)



☐ Did take an oath

☒ Produced identification

Type of identification produced: License

**Electric Bill Statement**

For: Jul 1, 2026 to Aug 3, 2026 (33 days)

Statement Date: Aug 3, 2026

Account Number: 08013-81039

Service Address: [REDACTED]

Hello Alix Desulme,
Here's what you owe for this billing period.

CURRENT BILL**\$370.01**

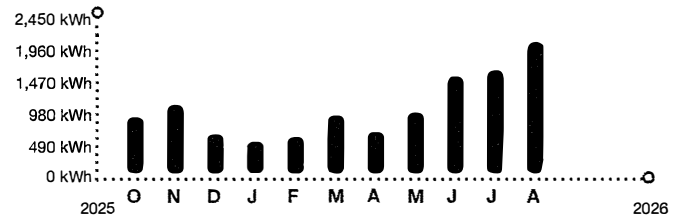
TOTAL AMOUNT YOU OWE

Aug 24, 2026

NEW CHARGES DUE BY



Scan to
Pay
or visit
FPL.com/
WaystoPay

ENERGY USAGE HISTORY**BILL SUMMARY**

Amount of your last bill	289.84
Payments received	-294.84
Balance before new charges	-5.00
Total new charges	375.01
Total amount you owe	\$370.01

(See page 2 for bill details.)

KEEP IN MIND

- Payments received after August 24, 2026 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- * Affiliate and third party programs are not regulated by the Florida Public Service Commission and are not provided by FPL. Non-payment of these fees will not result in disconnection of your FPL electrical service. For questions regarding these products and services, contact the number shown.

The Florida Public Service Commission has approved a one-time rate reduction in September related to 2024 hurricane restoration costs. Details at FPL.com/Rates.

Customer Service: (305) 442-8770
Outside Florida: 1-800-226-3545

Report Power Outages:
Hearing/Speech Impaired:

1-800-4OUTAGE (468-8243)
711 (Relay Service)

**Ways to Pay**

/ 27

50018601080138103971007300000

ALIX DESULME



The amount enclosed includes
the following donation:

FPL Care To Share: _____

Make check payable to FPL
in U.S. funds and mail along with
this coupon to:

FPL
GENERAL MAIL FACILITY
MIAMI FL 33188-0001

CASH ONLY

08013-81039

ACCOUNT NUMBER

\$370.01

TOTAL AMOUNT YOU OWE

Aug 24, 2026

NEW CHARGES DUE BY

\$

AMOUNT ENCLOSED



BILL DETAILS

Amount of your last bill	289.84
Payment received - Thank you	-294.84
Balance before new charges	-\$5.00

New Charges

Rate: RS-1 RESIDENTIAL SERVICE

Base charge: \$10.52

Non-fuel: (First 1000 kWh at \$0.093650) \$217.31
(Over 1000 kWh at \$0.103650)

Fuel: (First 1000 kWh at \$0.028930) \$75.37
(Over 1000 kWh at \$0.038930)

Electric service amount 303.20

Gross receipts tax (State tax) 7.78

Franchise fee (Reqd local fee) 18.54

Utility tax (Local tax) 26.35

Taxes and charges 52.67

Late payment charge 5.00

Regulatory fee (State fee) 0.28

Total new charges \$361.15

FPL Affiliate and Other Programs

FPL HOME Elctrn Surge Prot PI* 12.95

Florida sales tax (State tax) 0.78

County sales tax (Local tax) 0.13

--For program ?s, please call 833-437-5466.

Total FPL affiliate and other charges \$13.86

Total amount you owe \$370.01

METER SUMMARY

Meter reading - Meter ACD7952. Next meter reading Sep 1, 2026.

Usage Type	Current	-	Previous	=	Usage
kWh used	19782		17589		2193

ENERGY USAGE COMPARISON

	This Month	Last Month
Service to	Aug 3, 2026	Jul 1, 2026
kWh Used	2193	1714
Service days	33	30
kWh/day	66	57
Amount	\$356.15	\$275.98

KEEP IN MIND

- Taxes, fees, and charges on your bill are determined and required by your local and state government to be used at their discretion.
- The fuel charge represents the cost of fuel used to generate electricity. It is a direct pass-through to customers. FPL does not profit from fuel, although higher costs do result in higher state and local taxes and fees.

Download the app

Get instant, secure access to outage and billing info from your mobile device.

Download now

Summer savings start here

Discover ways to save energy and enter for a chance to win \$5,000 for energy-efficient home upgrades

Explore and enter

When you pay by check, you authorize FPL to process your payment electronically or as a draft. If your payment is processed electronically, your checking account may be debited on the same day we receive the check and your check will not be returned with your checking account statement. If paying your bill in person and in cash, your payment may, consistent with Florida law, be rounded to the nearest five-cent (5¢) increment if one-cent coins are no longer in production. FPL does not agree to any restrictions, conditions or endorsements placed on any bill statement or payments such as check, money order or other forms of payment. We will process the payment as if these restrictions or conditions do not exist.



City Of North Miami
776 NE 125th Street
NorthMiami, FL 33161
Billing Inquires: (305) 895-9880

Conservation is key. Your water and sewer rates are based on your water usage.

****If Total Due includes a previous balance, service is subject to be DISCONNECTED at anytime, additional charges may apply.****

Customer Number: 322933+001
Service Location: [REDACTED]
Billing Date: 7/8/26
Due Date: 8/26/26
Last Payment Date:
Previous Balance: 550.03
Payments:
Current Charges: 353.43
Adjustments:
Total Due: 903.46

ALIX DESULME
[REDACTED]

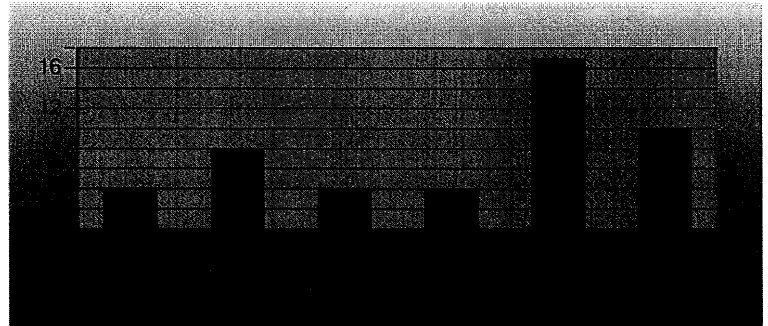
*If total due includes past due balance, service is subject to disconnect and /or additional charges.

Billing Details

Account #: 03-04-05700-06 [REDACTED]
Service from 1/27/2026 to 4/26/2026 # of Units: 1
CSF County Service Fee..... 12.30
Sanitation Sanitation Charge..... 114.81
Sewer Sewer Consumption..... 128.05
Storm Water Storm Water..... 21.36
Water Residential 3/4" Water Base Charge..... 76.91
Total Current Charges..... 353.43

Water Information

Meter #: 220842233 Estimated: N
Previous Read 1: 92 Current Read 1: 102
Usage: 10 Days: 90
Your water usage is billed per thousand gallons.



PLEASE RETURN BELOW PORTION WITH YOUR PAYMENT. MAKE CHECK PAYABLE TO: **CITY OF NORTH MIAMI**

☐ PLEASE CHECK BOX FOR CHANGES IN ADDRESS OR TELEPHONE (SEE BACK)



City Of North Miami
776 NE 125th Street
NorthMiami, FL 33161

Customer Number	322933+001
Account Number	03-04-05700-06
Customer Name	ALIX DESULME
AMOUNT ENCLOSED	
TOTAL AMOUNT DUE	\$903.46



City of North Miami
776 NE 125th Street
North Miami, FL 33161

ALIX DESULME
[REDACTED]

322933001 8 000090346 0 2

DECLARATION AND FIRST AMENDMENT WAIVER
FOR CANDIDATES WHO AGREE TO COMPLY WITH
THE ***voluntary*** STATEMENT OF FAIR CAMPAIGN PRACTICES

AN EXPLANATION REGARDING YOUR RIGHTS

Section 2-11.1.1(D)(2) of the Code of Miami-Dade County, Florida, provides that any candidate for public office in Miami-Dade County may at any time ***voluntarily*** declare that he or she agrees to abide by the ***voluntary*** Statement of Fair Campaign Practices. In agreeing to abide by the ***voluntary*** Statement of Fair Campaign Practices, the candidate recognizes, as compulsory, the authority of the Miami-Dade County Commission on Ethics and Public Trust to decide whether the candidate has violated the ***voluntary*** Statement of Fair Campaign Practices and, if so, to impose the appropriate penalty, if any.

Before agreeing to abide by the ***voluntary*** Statement of Fair Campaign Practices, you should carefully read the ***voluntary*** Statement of Fair Campaign Practices included with this DECLARATION AND FIRST AMENDMENT WAIVER as well as the following information regarding your rights.

The Statement of Fair Campaign Practices is ***voluntary***. You are under no obligation to agree to the ***voluntary*** Statement of Fair Campaign Practices. If you decide not to agree to the ***voluntary*** Statement of Fair Campaign Practices, you may still run for elective office in Miami-Dade County if you are qualified. There is NO PENALTY if you decide not to sign the ***voluntary*** Statement of Fair Campaign Practices.

If you decide to agree to the ***voluntary*** Statement of Fair Campaign Practices, you should know that you will be WAIVING YOUR FIRST AMENDMENT RIGHTS TO FREE SPEECH because certain speech prohibited by the ***voluntary*** Statement of Campaign Practices is protected by the First Amendment to the U.S. Constitution and Article I, Section 4, of the Florida Constitution. Prior to agreeing to comply with the ***voluntary*** Statement of Fair Campaign Practices, you should consider consulting an attorney to ensure that you understand the consequences of signing the DECLARATION AND FIRST AMENDMENT WAIVER.

Before signing this DECLARATION AND FIRST AMENDMENT WAIVER, you have the right to request and receive from the Ethics Commission an advisory opinion as to whether your planned campaign activities (e.g., campaign advertisement or statements) are likely to violate the ***voluntary*** Statement of Fair Campaign Practices. In the event that you sign the DECLARATION AND FIRST AMENDMENT WAIVER, you will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that you may be considering.

A determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER shall not be construed by Miami-Dade County or the Ethics Commission to mean that the candidate is unethical in any way. Further, a determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER should not be construed by any candidate or any other person or entity to mean that the candidate is unethical in any way.

INSTRUCTIONS

The DECLARATION AND FIRST AMENDMENT WAIVER, which includes the ***voluntary*** Statement of Fair Campaign Practices, can be found on page 2 of this form. If you are a candidate for county office and agree to abide by the ***voluntary*** Statement of Fair Campaign Practices, please sign the DECLARATION AND FIRST AMENDMENT WAIVER and file with the Miami-Dade Commission on Ethics and the Miami-Dade Elections Department. If you are a candidate for municipal office and agree to abide by the ***voluntary*** Statement of Fair Campaign Practices, please sign and file with the Miami-Dade Commission on Ethics and your respective municipal clerk. For further information, contact the Miami-Dade Office of Governmental Affairs at 305 499-8410.

Miami-Dade Commission on Ethics
19 W. Flagler St., Suite 820
Miami, FL 33130

Miami-Dade Elections Department
2700 NW 87th Ave. *or* P.O. Box 521550
Doral, FL 33172 Miami, FL 33152-1550

DECLARATION AND FIRST AMENDMENT WAIVER
FOR CANDIDATES WHO AGREE TO COMPLY WITH
THE **VOLUNTARY** STATEMENT OF FAIR CAMPAIGN PRACTICES

VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES

As a candidate for public office in Miami-Dade County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore,

1. I shall not make my race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
2. I shall not make my opponent's race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
3. I will condemn any appeal to prejudice based on race, creed, national origin, religion, gender, physical disability, or sexual orientation.
4. I shall not, without just cause, attack or question my opponent's patriotism.
5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement.
6. I shall not tolerate my supporters engaging in these activities that I condemn, nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group that resorts to the methods and tactics I condemn.
7. I shall run a positive campaign emphasizing my qualifications for office and positions on issues of public concern.
8. I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting that person's credibility.
10. I will take personal responsibility for approving or disavowing the substance of attacks on my opponent that may come from third parties supporting my candidacy.
11. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

BY SIGNING THIS DECLARATION AND FIRST AMENDMENT WAIVER, I AGREE TO

- ABIDE BY THE **VOLUNTARY** STATEMENT OF FAIR CAMPAIGN PRACTICES,
- SUBMIT TO THE COMPULSORY JURISDICTION OF THE ETHICS COMMISSION, AND
- WAIVE MY FIRST AMENDMENT RIGHTS.

I, Alix Desulme, a candidate for the office of
please print your name
Mayor in North Miami,
elective office sought county, municipality, or other jurisdiction

agree to abide by the **voluntary** Statement of Fair Campaign Practices as provided in Section 2-11.11(D)(1) of the Code of Miami-Dade County, Florida, and to recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether I have violated the **voluntary** Statement of Fair Campaign Practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any, which may include an admonition or public reprimand. I recognize that I have the right before signing this DECLARATION AND FIRST AMENDMENT WAIVER to consult my own legal counsel and to request and receive from the Ethics Commission an advisory opinion as to whether my planned campaign activities are likely to violate the **voluntary** Statement of Fair Campaign Practices. I also recognize that after signing this agreement, I will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that I may be considering. I hereby proclaim (1) that my agreement to abide by the Statement of Fair Campaign Practices is **voluntary**, knowing, and intelligent; (2) that I have not been forced, pressured, or otherwise coerced into making this agreement; and (3) that I am aware of the **voluntary** nature of this agreement. I recognize that there is no penalty for refusing to agree to abide by the **voluntary** Statement of Fair Campaign Practices. I also recognize that in signing this agreement, I will be forfeiting rights to which I would otherwise be entitled under the First Amendment to the U.S. Constitution and Article I, Section 4, of the Constitution of the State of Florida. Once the DECLARATION AND FIRST AMENDMENT WAIVER is signed, it is deemed irrevocable for the duration of the campaign.

x

Signature

Date



Office of the City Clerk
Vanessa Joseph, Esq.

DECLARATION OF CANDIDACY

FOR Alix Desjume
(Please print your name exactly as you wish for it to appear on the ballot.)

FOR THE OFFICE OF Mayor
District (if applicable) _____

I, the undersigned, an elector of the City of North Miami, Florida residing at the following address:

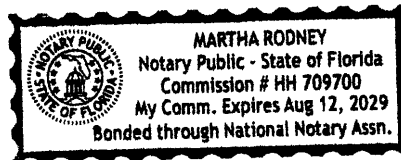
_____, do hereby declare my
candidacy for the Office of Mayor for a term of 2 years, to
be voted at the 2026 North Miami Municipal Election to be held on the 3rd day of November 2026.

I further certify that I possess the legal qualifications to hold said office and that I agree to serve if elected.

Signature of Candidate: Alix Desjume

Date and time of filing: 8/10/26 11:32 AM

STATE OF FLORIDA
COUNTY OF MIAMI-DADE



Sworn to and subscribed before me by means of physical presence, this (numeric date) this
10th day of August, 2026, by Martha Rodney.

[Signature]

Signature of Notary Public

Personally Known _____ OR Produced Identification ✓
Type of Identification Produced License

Office of the City Clerk
776 NE 125 Street | North Miami | Florida | 33161
Office: 305.895.9817 Fax: 305.899.0497
E-mail: elections@northmiamifl.gov Web: www.northmiamifl.gov



[Home](#) > [Be Election Ready](#) > [Voter Information](#)

Voter Information

Our online Voter Information tool allows you to review your current voting districts (click on "View Office Holders"), your voter information (address, political party, polling location, etc.) request a mail ballot, check the status of your mail ballot, and view your customized sample ballot for the upcoming election.

You can also make changes to your voter information, check your voter activity over the last year, and more.

To learn more, check out our [Voter Information Guide, \(Español\) \(Kreyòl\)](#)

Select Language ▼

Powered by Google Translate

[My Information](#) [Upcoming Elections](#) [Previous Elections](#)

New Search

Alix Desulme

Voter Registration Number: [REDACTED]

Voter Information

ⓘ **Voter Status:** Registered

Mail Ballot Status: You have a standing request to receive a mail ballot for elections occurring on or before 12/31/2026.

Date Registered: August 15, 2000

Date of Birth: December 5, 1977

Party Affiliation: DEM

Precinct: 134

County: Miami-Dade

Request Registration Update

[View Office Holders](#)

[View Precinct Statistics](#)

Contact Information

Residence Address:

[REDACTED]
[REDACTED]

Mailing Address:

[REDACTED]

Contact Information

Customer Service

305-499-VOTE (8683)

Fax Number

305-499-8547

TTY

305-499-8480

Office of the Supervisor of Elections

2700 NW 87th Avenue
Miami, Florida 33172
Phone: 305-499-VOTE (8683)

Office of the Supervisor of Elections Branch Office

Stephen P. Clark Center lobby area
111 NW 1st Street
Miami, Florida 33128

Featured Links

[Voters with Special Needs](#)

[Current Precincts, Districts and Municipalities](#)

[Petition Amendments, Initiatives and Referendums](#)

Resources

[Florida Division of Elections](#)

[Florida Elections Commission](#)

[Miami-Dade Commission on Ethics and Public Trust](#)

Help and Support

[Privacy Statement](#)

[ADA Notice](#)

[Disclaimer](#)





Voter Information Lookup

Please find your voter registration information below.

Full Name:

ALIX DESULME

Street Address:

[REDACTED]

City:

[REDACTED]

Zip Code:

[REDACTED]

County Name:

MIAMI-DADE

Voter Identification Number:

[REDACTED]

Date Of Registration:

8/15/2000

Party:

Florida Democratic Party

Voter Status:

Active*

* An active voter means the person is registered to vote. The deadline to register to be eligible to vote in an upcoming election is 29 days before that election.

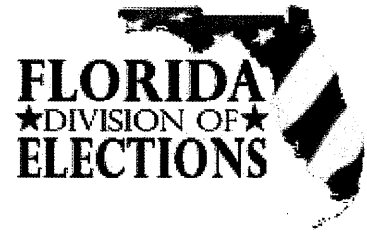
Access Ballot and Precinct Information available through your county Supervisor of Elections' (<https://dos.fl.gov/elections/for-voters/check-your-voter-status-and-polling-place/voter-precinct-lookup/>) website.

[New Search \(/en/CheckVoterStatus\)](#)

Please email BVRSHelp@dos.fl.gov (<mailto:BVRSHelp@dos.fl.gov>) for website assistance.



Ron DeSantis, Governor
Cord Byrd, Secretary of
State



Florida Department of State

R.A. Gray Building
500 South Bronough Street
Tallahassee, Florida 32399-0250

Voter Assistance Hotline:

1.866.308.6739

Hours: Monday - Friday 8:00 AM - 5:00

PM (Eastern Time)

If hearing or speech impaired, please
contact the Division using the **Florida**

Relay Service

(<https://www.ftri.org/relay>),

1.800.955.8771 (TTY) or

1.800.955.8770 (Voice) or 1-800-955-

1339 (ASCII), or

1.877.955.8773 (español a español).

[Privacy Policy \(http://dos.fl.gov/privacy-policy/\)](http://dos.fl.gov/privacy-policy/)

| [Accessibility \(http://dos.fl.gov/accessibility/\)](http://dos.fl.gov/accessibility/)

| [Site Map \(http://dos.fl.gov/site-map/\)](http://dos.fl.gov/site-map/)

| [Communications \(http://dos.fl.gov/communications/\)](http://dos.fl.gov/communications/)

| [Connect \(http://dos.fl.gov/communications/connect/\)](http://dos.fl.gov/communications/connect/)

Questions or comments? **Contact Us** **(mailto:BVRSHelp@dos.fl.gov)**

Under Florida law, e-mail addresses are public records. If you
do not want your e-mail address released in response to a
public records request, do not send electronic mail to this entity.
Instead, contact this office by phone or in writing.

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Florida, Florida Department of State.

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK



Bank

OFFICIAL CHECK

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

77545366-7

RE: REELECT ALIX DESULME

DATE:

08/10/2026

52-0133
112

ELECTION TRUST FUND

Eight Hundred Ninety Eight AND 80/100

\$898.80



DRAWER: TD BANK, N.A.

AUTHORIZED SIGNATURE



Security
Features
Details on
Back.

MP



HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK



Bank

OFFICIAL CHECK

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

77545367-8

RE: REELECT ALIX DESULME

DATE:

08/10/2026

52-0133
112

CITY OF NORTH MIAMI

Four Thousand Four Hundred Ninety Four AND 00/100

\$4,494.00



DRAWER: TD BANK, N.A.

AUTHORIZED SIGNATURE



Security
Features
Details on
Back.

MP

