CITY CLERK'S OFFICE
'26 AUG 10 PM4:29

AFFIDAVIT OF CANDIDATE

CITY OF NORTH MIAMI BEACH, FLORIDA

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF NORTH MIAMI BEACH)

Linda Joseph Noel (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Linda Joseph Noel

2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner, please check and fill in the blank in subsection (b) below:

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

X (b) I am offering myself as a candidate for the office of Commissioner in Group Number 4 of the City of North Miami Beach, Florida. If elected, I fully understand that I must maintain an actual and real residence within the city for the duration of my term of office.

3. I have resided in the City of North Miami Beach, Florida for a minimum of one year before qualifying if applying for Mayor, and one year before qualifying for City Commission, and I am a registered voter and a duly qualified elector of the City of North Miami Beach, Florida, presently registered to vote in Precinct No. 123
I presently reside at the following address (must include zip code):
17071 West Dixie HWY PH 516
which is my legal address, and I have resided continually at said address from the 1 day of Feb. 2026 to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the herein below listed addresses for the cited periods of time (list herein below all addresses at which you have resided for the past five years, as well as the length of time at each address):

Prior Addresses	For the Period of
2 East Dr	6 month Aug 1, 2025
17071 West Dixie Hw	current

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

_____

6. Affiant's spouse resides at the following address: (must include city, state and zip code)

N/A

7. Affiant's minor children reside at the following address: (must include city, state and zip code)

N/A

8. At the present time, affiant (is) (is not) registered to vote in any city, county or state **other than** as stipulated in subparagraph 3 above.

9. Name and business address of affiant's employer:

SEIU

10. Affiant's occupation: Executive Labor Union

11. Affiant has been employed in the above-cited capacity for the following period of time: 20 years

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

12. Affiant represents that he/she (is) (is not) currently holding another elective or appointive office – whether city, county or municipal – the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S.99.012 and/or the City of North Miami Beach, Florida Charter.

13. Affiant represents that, as of this date, he/she (is) (is not) seeking to qualify for public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office. A member of the 2020 Census Complete Count Committee shall resign from the Committee and such resignation shall be effective upon whichever occurs first:

(a) such Committee member receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures, with a view to bringing about his or her nomination or election to public office; or

(b) at the time such employee or Committee member appoints a campaign treasurer and designates a primary depository; or

(c) at the time such employee or Committee member files qualification papers and subscribes to a candidate oath as required by law.

CITY CLERK'S OFFICE
'26 AUG 10 PM4:29

14. Affiant's campaign headquarters address and telephone number:

17071 West Dixie Hwy 3059154313

Affiant's campaign treasurer's name:

Linda Joseph

*Affiant's campaign treasurer's address:

17071 West Dixie Hwy

Telephone numbers: (work) 3059154313

(home) 3056329412

*[A Campaign Treasurer or Deputy Treasurer shall be a registered voter in the State of Florida.]

15. Affiant represents that, if elected, he/she shall serve in the elective office to which he/she seeks election.

16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot:

Linda Joseph

SIGNED THIS 10 DAY OF Aug.

AFFIANT

BEFORE ME, the undersigned authority, personally appeared Linda Joseph,

who, after first being duly sworn, deposes and states that Linda Joseph

executed the foregoing to the best of her knowledge and belief.

Andrise Bernard

CITY CLERK,
CITY OF NORTH MIAMI BEACH, FLORIDA

(SEAL)

ANDRISE BERNARD
Notary Public · State of Florida
Commission # HH 578691
My Comm. Expires Aug 5, 2028
Bonded through National Notary Assn.

_____ Did take an oath

✓ Produced identification

Type of identification produced: Driver License

CITY CLERK'S OFFICE
'26 AUG 10 PM4:41

LOYALTY OATH
FOR CANDIDATES FOR PUBLIC OFFICE
(Sections 876.05-876.10, 99.021, Florida Statute)
(Charter & Code of Ordinances of the City of No. Miami Beach, FL)

STATE OF FLORIDA MIAMI-DADE COUNTY

(Please Print)

I, Linda Joseph, 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, and the Charter of the City of North Miami Beach, Florida.

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)
(Charter & Code of Ordinances of the City of No. Miami Beach, FL)

I, Linda Joseph, am a candidate for
***(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT) ***
the office of Commissioner, 4. I am a qualified elector of Miami-Dade
(Office) (Group No.)
County, Florida. I am qualified 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.

I have not been convicted in this or any other state of any offense involving moral turpitude within the preceding five (5) years;

I have not been adjudicated insane or incompetent by a court of competent jurisdiction which adjudication stands unrevoked;

I am a bona fide resident of the City of North Miami Beach and this is my permanent fixed place of domicile to the exclusion of others. I intend to remain permanently a bona fide resident of the city during the entire term of office for which I am a candidate.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

SIGN HERE → _____
Signature of Candidate

17071 West Dixie Hy (305) 632 9442
Residence Address Day Phone

Sworn to and subscribed before me this 10 day of August, 2026, at Miami Dade County, Florida.

_____
(Signature and title of officer administering oath)

Andrise Bernard - City Clerk

ANDRISE BERNARD
Notary Public - State of Florida
Commission # HH 578691
My Comm. Expires Aug 5, 2028
Bonded through National Notary Assn.

***Name may not be changed after the end of qualifying

(File in Duplicate)

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

CITY CLERK'S OFFICE
'26 AUG 10 PM4:38

OFFICE USE ONLY

Name to appear on ballot: Linda JOSEPH

☐ 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 Commissioner (Office),

____ (District #), ____ (Circuit #), 4 (Group or Seat #); I am a qualified elector of Miami-Dade **County**, Florida;

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.)

Signature of Candidate	(305) 632 9442 Telephone Number	LindaHNMB@Gmail.com Email Address
17071 West Dixie Hwy	NMB	Fla 33160
Address of Legal Residence	City	State ZIP Code

STATE OF FLORIDA
COUNTY OF Miami Dade

Andrise Bernard (City Clerk)
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 10 day of August, 2026.

Type of Identification Produced: Driver License

ANDRISE BERNARD
Notary Public - State of Florida
Commission # HH 578691
My Comm. Expires Aug 5, 2028
Bonded through National Notary Assn.

CITY CLERK'S OFFICE
'25 AUG 10 PM4:38

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).

LiN-duh Jo-sef

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 Linda Joseph-Noel. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is Linda Joseph. 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 Miami Dade

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

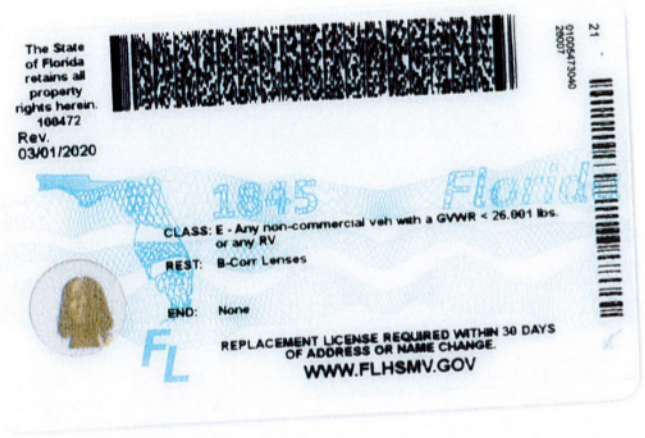
Sworn to (or affirmed) and subscribed before me by means of

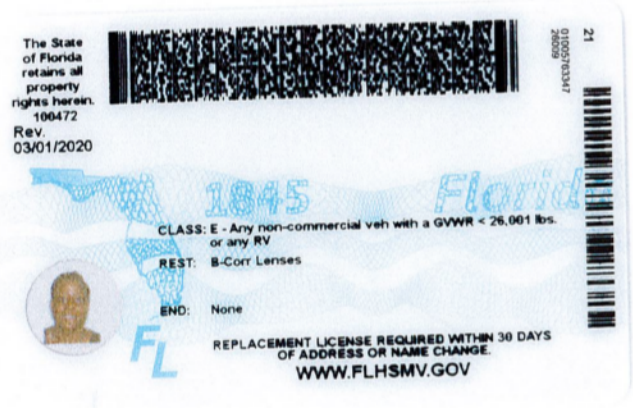
online notarization ☐ *OR* physical presence ☑

this 10 day of August, 2026.

Type of Identification Produced: Driver License

ANDRISE BERNARD
Notary Public - State of Florida
Commission # HH 578691
My Comm. Expires Aug 5, 2028
Bonded through National Notary Assn.





2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/23/2026

General Information

Name: Linda Joseph

PID 317936

AGENCY INFORMATION

Organization	Suborganization	Title
North Miami Beach	Gen. Employees Retirement Board	Board Member

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	MIAMI DADE	COMMISSION

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
SEiU	WASHINGTON DC	UNION EXECUTIVE

Filed with COE: 06/23/2026

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
N/A			

Real Property

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

Location/Description
N/A

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
N/A	

2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/23/2026

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
N/A	

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

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Filed with COE: 06/23/2026

Signature of Filer

Linda Joseph

Digitally signed: **06/23/2026**

Filed with COE: 06/23/2026

Public Records Exemptions

Enclosed please find a copy of the response documents for your public records request. The following information is provided to explain the process employed to review and produce the response documents.

Reason	Description	Pages
119.0712 (2) (b) - DHSMV Records (driver’s license information) The Driver's Privacy Protection Act, 18 U.S.C. ss. 2721 et seq.	DHSMV Records (driver’s license information) The Driver's Privacy Protection Act, 18 U.S.C. ss. 2721 et seq.	7