DECLARATION OF DOMICILE TO THE STATE OF FLORIDA AND COUNTY OF LEON:

I,(prin	(print name) was formerly a legal resident of		
(city, state) and I re	•	•	
(city, state) and I re (street address, city, and z			
and have been a bona fide resident of the State of	Florida since the _	day of 20	
I now reside at	(street address, city, zip code		
I now reside at Leon County, Florida and this statement is to be to	aken as my declara	ation of actual legal residence and	
permanent domicile in this State and County to th	e exclusion of all o	thers, and I will comply with all	
requirements of legal residents of Florida.			
I understand that as a legal resident of Florida: I	am suhiect to inta	ngible tayes: I must nurchase Florida	
License plates for motor vehicles, if any, owned by	•		
legal domicile (if I vote) and that my estate will be	v .	· · · · · · · · · · · · · · · · · · ·	
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I was born in the USA: Yes No Pla	ce of Birth		
Naturalized Citizen Where:	Date:	No:	
Permanent Visa: Yes No Date	No:		
State of Florida	Signature as printed above		
County of Leon			
Sworn to (or affirmed) and subscribed before me by means of [] physical presence or		N	
[] online notarization, this day of	(includ	Mailing Address (including city, state and zip code)	
, 20by	(IIICIUU	ing city, state and zip code)	
who is			
Personally known OR produced identification			
(type of identification)			
Signature of Notary/Deputy Clerk			
Type or Print Name			