

DECLARATION OF DOMICILE

To the Clerk of the Circuit Court and Comptroller of Seminole County, Florida.

This is my declaration of domicile in the State of Florida that I am filing this day in accordance, and in conformity with Fla. Stat. Section 222.17.

FOR DOMICILIARIES OF THE STATE OF FLORIDA:

I _____ hereby declare that I reside in maintain a place of abode and at:
Florida _____

(Number and Street) _____ (City and County) _____ (Zip Code) _____

which place of abode I recognize and intend to maintain as my permanent home and, if I maintain another place or places of abode in some other state or states, I hereby declare that my above-described residence and abode in the State of Florida constitutes my predominant and principal home, and I intend to continue it permanently as such. I am, at the time of making this declaration, a bona fide resident of the State of Florida residing at:

Florida _____
(Number and Street) _____ (City and County) _____ (Zip Code) _____

I formerly resided at:

Florida _____
(Number and Street) _____ (City and County) _____ (Zip Code) _____

and the place or places where I maintain another or other place or places of abode are as follows: (List street address, city, and state of any other place or places of abode.) _____

(Print Name) _____ (Signature) _____

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

(Signature of Notary Public, State of Florida) _____ (Print, type, or stamp commissioned name of Notary Public)

Personally Known _____ or Produced Identification _____ (Check One)

Type of Identification Produced: _____

FOR DOMICILIARES OF STATES OTHER THAN THE STATE OF FLORIDA:

I _____ hereby declare that my domicile is in the State of _____ and that I intend to permanently continue and maintain my domicile in such state. At the time of making this declaration I am a bona fide resident of the State of _____. My place of abode within the State of Florida, if any, is as follows: (List street address, city, and county of place of abode in Florida.) _____

(Person making declaration may also include such other and further facts with reference to any acts done or performed by such person which such person desires or intends not to be construed as evidencing any intention to establish his/her domicile within the State of Florida.)

(Print Name) _____ (Signature) _____

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

(Signature of Notary Public, State of Florida) _____ (Print, type, or stamp commissioned name of Notary Public)

Personally Known _____ or Produced Identification _____ (Check One)

Type of Identification Produced: _____