DECLARATION OF DOMICILE

Before the undersigned officer authorized to administer oaths, personally appeared [FULL LEGAL NAME], who, first being duly sworn, says:

1. I am a bona fide resident of the State of Florida. I reside in and maintain a place of abode at [STREET ADDRESS, CITY, COUNTY], Florida, which I recognize and intend to maintain as my permanent home.

2. I formerly resided at [FORMER CITY, COUNTY, STATE].

3. [OPTIONAL — include if you keep a home outside Florida] I also maintain a place of abode at [STREET ADDRESS, CITY, STATE]. My place of abode in the State of Florida constitutes my predominant and principal home, and I intend to continue it permanently as my predominant and principal home.

4. Except as stated above, I maintain no other place of abode.

_____

[FULL LEGAL NAME], Declarant

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization, this ____ day of _____, 20____, by [FULL LEGAL NAME], who is personally known to me or who has produced _____ as identification.

_____

Notary Public, State of Florida

Print, type, or stamp commissioned name: _____

My commission expires: _____