1.		
-	Fictitious Name to be Registered (See instructions if name includes a business entity suffix or i	or indicator)
)		
	Mailing Address of Business	
	City State Zip Coo	ode Code
•	Florida County of principal place of business:	
	(See instructions if more than one county)	This space is for office use only CR4E001 (10/20)
۱.	Owner(s) of Fictitious Name If Individual(s): (Use	
	1. Last First M.I.	2 Last First N
	Address	Address
	City State Zip Code	City State Zip Code
	Owner(s) of Fictitious Name If Entity: (Use an att	ttachment if necessary)
	2. Entity Name	2 Entity Name
	Address	Address
	City State Zip Code	City State Zip Code
	Florida Document Number:	•
	FEI Number:	FEI Number:
	☐ Applied For ☐ Not Applicable	
the	e undersigned, being an owner in the above fictitious name, certify tordance with Section 865.09, F.S., I further certify that the fictitious represents as defined in chapter 50. Florida Statutes, in the county who	
ew gn	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided fo	h and I am aware that false information submitted in a document t
ew gn ie l	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided fo	h and I am aware that false information submitted in a document t
ew gn ie l	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided fo	h and I am aware that false information submitted in a document t for in s.817.155, F.S.
ew gn e l	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided for ture of Owner in Section 2 Date	h and I am aware that false information submitted in a document to for in s.817.155, F.S. Email Address: (to be used for future renewal notification) -Y:
gn e l gna ho	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided for liture of Owner in Section 2 Date CANCELLATION COMPLETE SECTION 4 ONLY	h and I am aware that false information submitted in a document to for in s.817.155, F.S. Email Address: (to be used for future renewal notification)
new sign tthe I	Atture below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided for a ture of Owner in Section 2 Date One Number: R CANCELLATION COMPLETE SECTION 4 ONLY R FICTITIOUS NAME OR OWNERSHIP CHANGE	h and I am aware that false information submitted in a document for in s.817.155, F.S. Email Address: (to be used for future renewal notification)
ewign ne ligna Pho	ature below shall have the same legal effect as if made under oath Department of State constitutes a third degree felony as provided for a ture of Owner in Section 2 Date Date R CANCELLATION COMPLETE SECTION 4 ONLY R FICTITIOUS NAME OR OWNERSHIP CHANGE (e), the undersigned, hereby cancel the fictitious name ch was registered on and was assigned.	h and I am aware that false information submitted in a document for in s.817.155, F.S. Email Address: (to be used for future renewal notification) Y: ECOMPLETE SECTIONS 1 THROUGH 4:

Mark the applicable boxes $\ \square$ Certificate of Status- \$10 $\ \square$ Certified Copy- \$30

Instructions for Completing Application for Registration of Fictitious Name

Section 1:

Line 1: Enter the name as you wish it to be registered. A fictitious name may not contain a business entity suffix or indicator (i.e. Corporation, Incorporated, Limited Liability Partnership, Limited Partnership, Professional Association, Corp, L.L.C., L.P., P.A., etc.) unless at least one registrant is a business entity of the same type duly incorporated, organized, formed or otherwise authorized to transact business in this state. Section 655.922, Florida Statutes, prohibits anyone other than financial institutions to use the word(s) "bank," "banc," "banco," "banque," "banker," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import.

Line 2: Enter the mailing address of the business. This address does not have to be the principal place of business and can be directed to anyone's attention. DO NOT USE AN ADDRESS THAT IS NOT YET OCCUPIED. ALL FUTURE MAILINGS AND ANY CERTIFICATION REQUESTED ON THIS REGISTRATION FORM WILL BE SENT TO THE ADDRESS IN SECTION 1. An address may be changed at any future date with no charge by simply writing the Division.

Line 3: Enter the name of the county in Florida where the principal place of business of the fictitious name is located. If there is more than one county, list all applicable counties or state "multiple".

Section 2:

Part A: Complete if the owner(s) of the fictitious name are individuals. The individual's name and address must be provided.

Part B: Complete if the owner(s) are not individuals. Examples are a corporation, limited partnership, joint venture, general partnership, trusts, fictitious name, etc. Provide the name of the owner, their address, their registration number as registered with the Division of Corporations, and the Federal Employer Identification (FEI) number. An FEI number must be provided or the appropriate box must be checked.

Owners listed in Part B must be registered with the Division of Corporations or provide documentation as to why they are not required to register. Examples would be Federally Chartered Corporations, or Legislatively created entities.

Additional owners may be listed on an attached page as long as all of the information requested in Part A or Part B is provided.

Section 3:

Only one signature is required. It is preferred that a daytime phone number be provided in order to contact the applicant if there are any questions about the application.

Section 4:

TO CANCEL A REGISTRATION ON FILE: Provide fictitious name, date filed, and registration number of the fictitious name to be cancelled.

TO CHANGE OWNERSHIP OF A REGISTRATION: Complete section 4 to cancel the original registration. Complete sections 1 through 3 to re-register the fictitious name listing the new owner(s). An owner's signature is required in both sections 3 and 4.

TO CHANGE THE NAME OF A REGISTRATION: Complete section 4 to cancel the original registration. Complete sections 1 through 3 to re-register the new fictitious name. An owner's signature is required in both sections 3 and 4.

An acknowledgement letter will be mailed once the fictitious name registration has been filed.

If you wish to receive a certificate of status and/or certified copy at the time of filing of this registration, check the appropriate box at the bottom of the form. PLEASE NOTE: Acknowledgments/certificates will be sent to the address in

Section 1. If a certificate of status is requested, an additional \$10 is due. If a certified copy is requested, an additional \$30 is due.

The registration and reregistration will be in effect until December 31 of the fifth year.

Send completed application with appropriate fees in the enclosed envelope to:

Fictitious Name Registration PO Box 6327

Tallahassee, FL 32314-1300

Internet Address: http://www.sunbiz.org

The fee for registering a fictitious name is \$50. Please make a separate check for each filing payable to the Department of State. Application must be typed or printed in ink and legible.