

JACKSONVILLE
Daily Record
Serving Duval, Clay & St. Johns Counties

Select County for Publication: _____
(Duval, Clay, St. Johns)

Notice Under Fictitious Name Law

According to Florida Statute Number 865.09

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the Fictitious Name of

(Fictitious Name)

located at _____, in the City of _____,
(Address of Business) (Name of City)

_____ County, Florida _____ intends to register the said name with the
(County) (Zip Code)

Division of Corporations of the Department of State, Tallahassee, Florida.

Dated at Jacksonville, Florida, this _____ day of _____, _____.

(Business Owner) (If incorporated, name of Officer of Corporation)

The above notice is to be published one time in Jacksonville Daily Record. Cost of one time advertisement is \$32.50, which includes Proof of Publication. Form and payment can be mailed-in, dropped-off or faxed.

Mail this form with \$32.50 payment to:
 Jacksonville Daily Record
 Attn: Legal Advertising Department
 P.O. Box 1769
 Jacksonville, FL 32201

Drop off or Fax this form with \$32.50 payment to:
 Jacksonville Daily Record
 121 W Forsyth St, Suite 150
 Jacksonville, FL 32202
 (904) 356-2466; FAX (904) 353-2628

(Visa, MasterCard, American Express or Discover)

<i>Cardholder's Name (PRINT)</i>		<i>Signature of Cardholder</i>	
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Proof of Publication will be addressed as follows:

Preferred delivery method: ___ Mail or ___ Email

Company, Law Firm or Accounting Firm (if applicable) _____

Contact Name: _____ Email Address: _____

Address: _____ Phone Number: _____

City: _____ State: _____ Zip: _____