

**FDACS- Division of Licensing
AFFIDAVIT**

I, _____, certify that my license has been lost, stolen or destroyed.

Signature of Licensee

State of Florida
County of Brevard

The foregoing instrument was acknowledged before me on this _____ day of _____,
20_____ by _____.

(Seal)

Signature of Notary Public

Print, Type, or Stamp Name of Notary

Personally Known _____
OR Produced Identification _____
Type of Identification Produced _____