Department of Health - Office of Vital Statistics

STATE OF FLORIDA
MARRIAGE RECORD

TYPE IN UPPER CASE

USE BLACK INK

This license not valid unless seal of Clerk, Circuit or County Court, appears thereon.

(STATE FILE NUMBER)

2015 ML 003191

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. NAME OF SPOUSE *(First, Middle, Last)*		1b. MAIDEN SURNAME *(if applicable)*	2. DATE OF BIRTH *(Month, Day, Year)*
JAMES AARON LUYCX			04/14/1989
3a. RESIDENCE - CITY, TOWN, OR LOCATION	3b. COUNTY	3c. STATE	4. BIRTHPLACE *(State or Foreign Country)*
NORTH PORT	SARASOTA	FLORIDA	GUATEMALA
5. NAME OF SPOUSE *(First, Middle, Last)*		5b. MAIDEN SURNAME *(if applicable)*	6. DATE OF BIRTH *(Month, Day, Year)*
CASSANDRA MARIE LAUNDRIE			10/13/1989
7a. RESIDENCE - CITY, TOWN, OR LOCATION	7b. COUNTY	7c. STATE	8. BIRTHPLACE *(State or Foreign Country)*
NORTH PORT	SARASOTA	FLORIDA	NEW YORK

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF SPOUSE *(Sign full name using black ink)*	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
►	12/21/2015
11. TITLE OF OFFICIAL	12. SIGNATURE OF OFFICIAL *(Use black ink)*
Deputy Clerk	►
13. SIGNATURE OF SPOUSE (Sign full name using black ink)	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
►	12/21/2015
15. TITLE OF OFFICIAL	16. SIGNATURE OF OFFICIAL *(Use black ink)*
Deputy Clerk	►

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE **EFFECTIVE DATE** AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE	18. DATE LICENSE ISSUED	**18a. DATE LICENSE EFFECTIVE**	19. EXPIRATION DATE
SARASOTA	12/21/2015	12/24/2015	02/18/2016

20a. SIGNATURE OF COURT CLERK OR JUDGE	20b. TITLE	20c. BY D.C.
Karen E Rushing	KAREN E. RUSHING CLERK OF THE CIRCUIT COURT	

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE *(Month, Day, Year)*	22. CITY, TOWN, OR LOCATION OF MARRIAGE
DECEMBER 28, 2015	VENICE, FLORIDA

23a. SIGNATURE OF PERSON PERFORMING CEREMONY *(Use black ink)*	23c. ADDRESS *(Of person performing ceremony)*
►	4000 S. TAMIAMI TR, VENICE, FL 34293
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY *(Or notary stamp)*	24. SIGNATURE OF WITNESS TO CEREMONY *(Use black ink)*
DONNA GILL DEPUTY CLERK	►
	25. SIGNATURE OF WITNESS TO CEREMONY *(Use black ink)*
	►

58-3096

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

[redacted]

DH Form 743, 01/2015, Florida Administrative Code Rule 64V-1.020 (Obsoletes Previous Editions)