OATH OF OFFICE

(Art. II. § 5(b), Fla. Const.)

STATE OF FLORIDA

County of	
Government of the United States and of the S	apport, protect, and defend the Constitution and tate of Florida; that I am duly qualified to hold at I will well and faithfully perform the duties of
(Title o	of Office)
on which I am now about to enter, so help me G	od.
[NOTE: If you affirm, you may omit the wor	ds "so help me God." See § 92.52, Fla. Stat.]
Signature	
	pefore me by means of physical presence or is ,
Signature of Officer Admin	nistering Oath or of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public	
Personally Known \square OR Produced Identification \square	
Type of Identification Produced	
ACCEP	PTANCE
I accept the office listed in the above Oath of	Office.
Mailing Address:	
Street or Post Office Box	Print Name
City, State, Zip Code	Signature

DS-DE 56 (Rev. 02/20)