

# NAME CHANGE - (Adult)

**Court filing fee: \$401.00**

**Fingerprint/background check fees \$\_\_\_\_\_ (if being restored to a previous name you do NOT need to do this)**

**Our fee: \$240.00 or more per person, Plus possible additional fees, as follows:**

\$\_\_\_\_\_ Server's fee (if spouse won't sign consent & needs to be served), + costs of follow up docs provided by us

\$\_\_\_\_\_ assist with newspaper fee if spouse cannot be found +\$100.00 to us, plus cost of news ad \$\_\_\_\_\_

1. Your Current Full Legal Name:

\_\_\_\_\_

Birth Name if different than above\_\_\_\_\_

Address: \_\_\_\_\_

Best Contact Phone#: (\_\_\_\_\_) \_\_\_\_\_

2. I am requesting my Legal Name be changed to:

\_\_\_\_\_

3. Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_  
City County State

4. My parents' current full legal names are :

a. \_\_\_\_\_

b. \_\_\_\_\_

c. {If applicable} My parents' birth name(s) is/are:

\_\_\_\_\_

and \_\_\_\_\_

5. Where you have lived since birth. (Full address and including dates that you lived there.)

Dates at address -	physical address
____/____ - present -	_____
____/____ - ____/____ -	_____
____/____ - ____/____ -	_____
____/____ - ____/____ -	_____
____/____ - ____/____ -	_____

\_\_\_\_\_ Check if additional information is on the back.

6. My Spouse's full legal name is: \_\_\_\_\_

WILL SPOUSE SIGN A CONSENT? (circle one) YES or NO

If spouse will NOT sign a consent that person will need to be served or news ad ran.

7. Child(ren)'s names, addresses, age:

Name:	address:	age:
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_ Check if additional information is on the back.

8. Have you previously changed your name: YES OR NO

If yes, state: Changed name from: \_\_\_\_\_

to: \_\_\_\_\_ date: \_\_\_\_/\_\_\_\_/\_\_\_\_

in \_\_\_\_\_  
City County State

as a result of: Marriage, adoption, legal name change, or other: \_\_\_\_\_

\_\_\_\_\_ Check if additional information is on the back.

9. Have you been known or called by any other name(s): *{list name(s) and explain where you were known or called by such name(s)}*

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10. Occupation: \_\_\_\_\_

Current employer's Name & address: \_\_\_\_\_

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11. Where you have been employed for the last five years (month/year & name & address of employer)

Dates (to/from) - employer name & address

\_\_\_\_\_/\_\_\_\_\_- present - \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_- \_\_\_\_/\_\_\_\_\_- \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_- \_\_\_\_/\_\_\_\_\_- \_\_\_\_\_

\_\_\_\_\_ Check if additional information is on the back.

12. Do you own and operate your own business: YES OR NO

Business name: \_\_\_\_\_

Business address: \_\_\_\_\_

Position: \_\_\_\_\_

Length of involvement: \_\_\_\_\_

13. Are you in a profession: \_\_\_\_\_

Where you have practiced: \_\_\_\_\_

Graduate schools: \_\_\_\_\_

Time of graduation: \_\_\_\_\_

Degrees received: \_\_\_\_\_

14. I have graduated from the following school(s):

Degree Received	Date of Graduation	School (Name of school & City and State)
_____	_____	_____
_____	_____	_____
_____	_____	_____

**15. Criminal History**

*Indicate all that apply*

\_\_\_\_\_ I have never been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.

\_\_\_\_\_ I have a criminal history. In the past I have been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication. The details of my criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
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( \_\_\_\_\_ Please indicate here if you are continuing these facts on an attached page.)

I \_\_\_\_\_ have \_\_\_\_\_ have not ever been required to register as a sexual predator under section 775.21, Florida Statutes.

I \_\_\_\_\_ have \_\_\_\_\_ have not ever been required to register as a sexual offender under section 943.0435, Florida Statutes.

**16. Bankruptcy [Choose one only]**

\_\_\_\_\_ I have never been adjudicated bankrupt.

\_\_\_\_\_ I was adjudicated bankrupt on {date} \_\_\_\_\_, in {city} \_\_\_\_\_, {county} \_\_\_\_\_, {state} \_\_\_\_\_.

( \_\_\_\_\_ Please indicate here if you have filed additional bankruptcies, and explain on an attached page.)

17. **Creditor(s)' Judgments** [*Choose one only*]

\_\_\_\_ I have never had a money judgment entered against me by a creditor.

\_\_\_\_ The following creditor(s)' money judgment(s) have been entered against me:

Date	Amount	Creditor	Court entering judgment and case number	if Paid {date}
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(\_\_\_\_\_ Please indicate here if these facts are continued on an attached page.)

18. Do you have an ulterior or illegal purpose for changing your name? \_\_\_\_\_

19. Have your civil rights ever been suspended?      YES      OR      NO

If yes, have they been restored? \_\_\_\_\_

20. Will changing your name invade the property rights of others? \_\_\_\_\_

**RELEASE OF LIABILITY**

I have been informed by the Staff of Express L C L Services, Inc. d/b/a Express NonLawyer that:

- (1) They ARE NOT ATTORNEYS, & they CANNOT GIVE LEGAL ADVICE.
- (2) They are only assisting me in the proper preparation of these documents so that I can represent myself in this matter without an attorney.

They have further informed me that legal representation by an attorney would advise me of all legal rights that I may have arising out of this action.

The legal documents prepared by Express L C L Services, Inc. d/b/a Express NonLawyer, have been prepared in accordance with the information provided by me in my desire to represent myself in this transaction.

I declare:

- (1) That the information provided by me is true and complete to the best of my knowledge and belief;
- (2) That I agree to review all documents prepared and my signature is acknowledgment of my approval of all documents;
- (3) That I hereby release Express L C L Services, Inc. d/b/a Express NonLawyer, from any liability arising out of the services performed for me by them as the result of my failure to provide the information requested or to thoroughly review all documents. I further declare that I am signing this documents without undue influence, threat or pressure from any person or entity involved in the outcome of this transaction.
- (4) I understand that any and all payments made to Express L C L Services, Inc. d/b/a Express NonLawyer, for the preparation of any documents are non-refundable and that I have been informed that I must pick up my documents within 90 days of completion or the documents may be destroyed and/or I may incur additional fees as determined applicable by the Staff of Express L C L Services, Inc. d/b/a Express NonLawyer.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_