Department of Health - Office of Vital Statistics

(STATE FILE NUMBER)

## STATE OF FLORIDA MARRIAGE RECORD

TYPE IN UPPER CASE
USE BLACK INK

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

RECORDED IN OFFICIAL RECORDS INSTRUMENT # 3100483 1 PG(S) January 10, 2018 10:48:05 AM Book 4569 Page 267 J.K.'JESS' IRBY Clerk Of Court RLACHUA COUNTY, Florida



25. (SIGNATURE OF WITHESS TO CEREMONY (Use black ink)

## 01 2018 ML 000006

(Or notary stamp)

	(APPLICATION N	IUMBER)							
		APPLIC	CATION TO M	ARRY					
NAME OF SPOUSE (First, Middle, Lest)			1b. M	1b. MAIDEN SURNAME (if applicable)		2. DATE OF BIRTH (Month, Day, Year)			
KAYLA RAE REID						07/05/1991			
3a. RESIDENCE - CITY, TOWN, OR LOCATION		3b. COUNTY	3c. :	3c. STATE		4. BIRTHPLACE (State or Foreign Country)			
GAINESVILLE		ALACHUA	FLORIDA			VIRGINIA			
5. NAME OF SPOUSE (First, Middle, Last)			5b.	5b. MAIDEN SURNAME (if applicable)			6. DATE OF BIRTH (Month, Day, Year)		
RYAN STEVEN LOCHTE							08/03/1984		
7a. RESIDENCE - CITY, TOWN, OR LOCATION		7b. COUNTY	7c. STATE		8. BIRTHPLACE (State or Foreign Country)				
GAINESVILLE		ALACHUA	FL	FLORIDA		NEW YORK			
		WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED							
COUNTY COUNTY	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 (SA								
	01/02/2018								
	11. TITLE OF OPFICIAL			12. SIQNATURE OF OFFICIALNUse black ink)				_	
	Deputy Clerk			1-110MONIA 112-119					
	13. SIGNATURE OF SPOUSE (Sign full name using black ink)			14. SUBSCRIBED AND SWORM TO BEFORE ME ON (DATE)					
	V. PI-F			01/02/2018					
	15. TITLE OF OFFICIAL			16. SIGNATURE OF OFFICIAL (Use biack ink)					
	Deputy Clerk			Langua labolle					
	LICENSE TO MARRY								
AND COURT COURT	AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM								
WILLIAM COUPY	A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE M 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 AN								
ANTE COMMENTERS	BE USED ON OR AFTER THE EFFECTIVE DATE AND  1.7. COUNTY ISSUING LICENSE		ON OR BEFORE THE EXPIRATION  18. DATE LICENSE ISSUED		N DATE IN THE STATE OF FLORIDA IN ORDE		R TO BE RECORDED AND VALID.  19. EXPIRATION DATE	4	
* SEAD	1			30025	01/05/2018	201112	03/02/2018		
	ALACHUA COUNTY	ERK OR JUDGE	01/02/2018	20h TITI			20c, BY D.G.	_	
	22a. SIGNATURE OF COURTICLERK OR JUDGE			D.C CLERK OF THE CIRCUIT COURT 20c, BY, D.S.			[20]		
Constitution of the last of th	TENNIDOUS (ALASTE)								
COUNTY ST	CERTIFICATE OF MARRIAGE								
Same Constitution	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)  1 22. CITY, TOWN, OR USCATION OF MARRIAGE								
	21. DATE OF MARRIAGE (Month, Day, Year)  22. CITY, TOWN, OR L'OCATION OF MARRIAGE								
	1/9/2018), GAINESYLLE HLACHUA CTY, FL								
	23a. GIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) 23c. ADDRESS (Of person performing ceremony)								
SEAL	· Sacko	つりし							