

FLORIDA DEPARTMENT OF STATE

PUBLIC RECORDS EXEMPTION REQUEST (Form DOS-119; Rev. 06/2015)

Florida law allows certain persons to request that an agency not publicly disclose specific identification and/or location information contained in any of its agency records. Please refer to sections 119.071 (2)(j), (4)(d) and (5)(i), 265.605, and 267.17, Fla. Stat., or other applicable statute for scope of protection which may include home address, phone numbers, photos, name of spouse and/or children, and their place of employment, and/or school or daycare care facility, date of birth.

To request the exemption for records in our agency, please complete the form and return to: Secretary of State, c/o Public Records Custodian Director, R.A. Gray Building, 500 S. Bronough St., Tallahassee, FL 32399. For more information, contact 850-245-6536.

To request that the exemption extend to your spouse and/or children (not applicable for donor* or victim* of battery, abuse, harassment, or stalking) please submit a separate sheet with the name, date of birth, and relationship for purposes of identifying them in any public records within the custody of the agency. (If you have attached supplemental pages, check here)

In order to process this request for any of your records that may be in the Division of Corporations, please complete the Addendum for Exemption of Public Disclosure. (Otherwise, check here for **Not Applicable:**)

You will be contacted if the information you provide is insufficient to identify you distinctly from someone else similarly named in the records.

I hereby request	t the exemption (check applicable exemption ca	tegory	for whic	ch you and/	or the p	erson(s)	named b	elow are eligit	ole):
a	0.17								

S	Signature:			Date:		
ł	Iome Address:					
I	Printed Name:	Date	of Birth:	Phone Number:		
	Impaired practitioner consultants whose duties result in a determination of a person's skill and safety to practice a licensed profession †		Other (list applica	ble statute):		
	Guardian ad litem [†] Human resource, labor relations, or employee relations director, assistant director, manager or assistant manager of any local government agency or water management district (whose duties include hiring and firing employees, labor contract negotiation, administration, or other personnel-related duties)		stalking, harassm [Attach official vo Contact Attorney	battery, aggravated child abuse, aggravated ent, aggravated battery or domestic violence rification that crime occurred. 5-year exemption. General's Office (850-414-3990) about eligibility ess Confidentiality Program [See s. 741.465, Fla.		
	Firefighter certified in compliance with s. 633.408, F.S.		U.S. attorney or assistant attorney, U.S. appellate judge, U.S di court judge and U.S. magistrate †			
	Donor or prospective donor,* Cultural Endowment Program Trust Fund, Citizen Support Organizations or National, Historic Landmarks (publicly owned houses)		National Guard at			
	Dept. of Revenue personnel or local government personnel whose duties relate to revenue collection and enforcement or child support enforcement			and criminal conflict and civil regional counsel public defenders, assistant criminal conflict and onal counsel)		
	security disability benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health care practitioners or health care facilities licensed by the Department of Health †		correctional proba	personnel including correctional officers and tion officers attorney, assistant state attorney, statewide ant statewide prosecutor)		
	Dept. of Health personnel whose duties support the investigations of child abuse or neglect, determination of benefits, or the investigation, inspection, or prosecution of health care practitioners Dept. of Health personnel whose duties include, or result in, the determination or adjudication of eligibility for social		detention officer, detention officer, group treatment le rehabilitation ther Juvenile Justice	juvenile detention officer supervisor, juvenile house parent I and II, house parent supervisor, eader, group treatment leader supervisor, apist, and social services counselor of the Dept. of		
	Dept. of Children and Family Services personnel whose duties involve investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities		hearing officer) † Juvenile probation	nistrative Hearings, and child support enforcement n officer, juvenile probation supervisor, detention sistant detention superintendent, senior juvenile		
	Dept. of Business and Professional Regulation-investigators and inspectors†		judge of compens	udicial officer (general and special magistrate, ation claims, administrative law judge of the		
	Code Enforcement Officer. County Tax Collector †			urt of appeal, circuit court and county court, or ida Supreme Court.		

If employing agency makes request for the employee, add agency name, agency requester's name and title to the signature line.

[†]For specific category selected, person certifies, by signature herein, that he or she has made reasonable efforts to protect information from being publicly accessible.

ADDENDUM FOR EXEMPTION OF PUBLIC DISCLOSURE ONLY FOR DIVISION OF CORPORATIONS RECORDS

Before the Florida Department of State, Division of Corporations can act on your request; we need the following additional information from you:

- 1. We need the complete home address that is to be redacted:
- 2. Are you now or have you ever been listed on the Division of Corporations' records as:

a. an officer or director of a corporation?	Yes 🗖	No	
b. a managing member or manager of a limited liability company?	Yes 🗖	No	
c. a general partner in a limited partnership?	Yes 🗖	No	
d. an owner of a fictitious name?	Yes 🗖	No	
e. a partner in a general partnership?	Yes 🗖	No	
f. a notary?	Yes 🗖	No	
g. an owner of a trademark registration	Yes 🗖	No	

3. Have you ever had a judgment lien filed against you that would have been filed in this office after October 1, 2001 Yes □ No □

If you answered "Yes" to one or more of the questions, we ask you provide the name of the entity, registration or filing and an alternate address that can replace the one we currently have in our records. We cannot have a record with a missing address.

Name/Names of entity or registration:

Alternate address to replace the one current on our records:

Please return this addendum with the **Public Records Exemption Request** form. For question concerning this addendum, call 850-245-6862.