CITY OF PENSACOLA AFFIDAVIT OF AMENDMENT OF REGISTERED DOMESTIC PARTNERSHIP
(To change the legal name of a Domestic Partner in a Registered Domestic Partnership)
Per Chapter 5-3, City Code

We swear or affirm under oath, with penalty of perjury, that the statements and information provided herein are true and correct.

1. We are Registered Domestic Partners in the City of Pensacola, Escambia County, Florida, whose Registered Domestic Partnership is recorded in the Official Records of Escambia County at Book and Page No. _____.

2. One of our names has been legally changed, pursuant to a court order, and we request an amendment to the Registered Domestic Partnership to reflect that Registered Domestic Partner's new, legal name as follows:

   New legal name of Registered Domestic Partner, as indicated in court order:
   _____
   Printed New Legal Name of Registered Domestic Partner (Last, First, Middle)

   Name of Registered Domestic Partner, as indicated on original Affidavit of Registered Domestic Partnership:
   _____
   Printed Name of Registered Domestic Partner as it appears on Original Affidavit of Registered Domestic Partnership (Last, First, Middle)

3. **We have presented a certified copy of the court order granting the legal name change, requested in #2 above, for review by the City Clerk or his or her designee.**

4. We understand that this Affidavit of Amendment will be recorded in the Official Records of Escambia County.

_____   _____
Printed Recording Partner (Last, First, Middle)   Printed Recording Partner (Last, First, Middle)

_____   _____
Signature of Partner (stated above)   Signature of Partner (stated above)

_____   _____
Printed Mailing Address   Printed Mailing Address

_____   _____
City, State, Zip   Telephone   City, State, Zip   Telephone

STATE OF FLORIDA
COUNTY OF ESCAMBIA

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20 ____ by

_____ who produced _____ as identification and
Printed Name of Recording Partner

_____ who produced _____ as identification.
Printed Name of Recording Partner

_____
Signature of Notary