

Department of Health - Vital Statistics

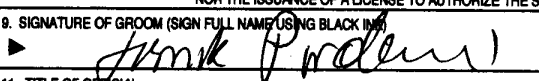
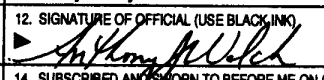
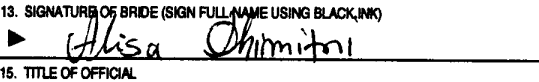
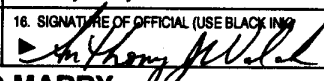
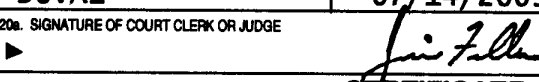
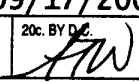

STATE OF FLORIDA  
MARRIAGE RECORD  
TYPE IN UPPER CASE  
USE BLACK INK

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

(STATE FILE NUMBER)

2005-03740

(APPLICATION NUMBER)

APPLICATION TO MARRY			
1. GROOM'S NAME (FIRST, MIDDLE, LAST) <b>FISNIK PIRDENI</b>		2. DATE OF BIRTH (MONTH, DAY, YEAR) <b>6/07/1979</b>	
3a. RESIDENCE - CITY, TOWN, OR LOCATION <b>JACKSONVILLE</b>	3b. COUNTY <b>DUVAL</b>	3c. STATE <b>FLORIDA</b>	4. BIRTHPLACE (STATE OR FOREIGN COUNTRY) <b>ALBANIA</b>
1. BRIDE'S NAME (FIRST, MIDDLE, LAST) <b>ALISA DHIMITRI</b>		1. MAIDEN SURNAME (IF DIFFERENT)	6. DATE OF BIRTH (MONTH, DAY, YEAR) <b>9/27/1984</b>
7a. RESIDENCE - CITY, TOWN, OR LOCATION <b>JACKSONVILLE</b>	7b. COUNTY <b>DUVAL</b>	7c. STATE <b>FLORIDA</b>	8. BIRTHPLACE (STATE OR FOREIGN COUNTRY) <b>ALBANIA</b>
WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED 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 GROOM (SIGN FULL NAME USING BLACK INK) 		10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>07/14/2005</b>	
11. TITLE OF OFFICIAL <b>DEPUTY CLERK FISNIK PIRDENI</b>		12. SIGNATURE OF OFFICIAL (USE BLACK INK) 	
13. SIGNATURE OF BRIDE (SIGN FULL NAME USING BLACK INK) 		14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>07/14/2005</b>	
15. TITLE OF OFFICIAL <b>DEPUTY CLERK ALISA DHIMITRI</b>		16. SIGNATURE OF OFFICIAL (USE BLACK INK) 	
LICENSE TO MARRY			
AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST 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 AND VALID.			
17. COUNTY ISSUING LICENSE <b>DUVAL</b>	18. DATE LICENSE ISSUED <b>07/14/2005</b>	18a. DATE LICENSE EFFECTIVE <b>07/18/2005</b>	19. EXPIRATION DATE <b>09/17/2005</b>
20a. SIGNATURE OF COURT CLERK OR JUDGE 		20b. TITLE <b>Clerk of the Circuit Court</b>	20c. BY DE 
CERTIFICATE OF MARRIAGE			
I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.			
21. DATE OF MARRIAGE (MONTH, DAY, YEAR) <b>9/16/2005</b>		22. CITY, TOWN, OR LOCATION OF MARRIAGE <b>JACKSONVILLE, FLORIDA 32202</b>	
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (USE BLACK INK) 		23c. ADDRESS (OF PERSON PERFORMING CEREMONY) <b>330 EAST BAY STREET, ROOM 101</b>	
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (OR NOTARY STAMP) <b>Clifann Williams Deputy Clerk</b>		24. SIGNATURE OF WITNESS TO CEREMONY (USE BLACK INK) ▶	
		25. SIGNATURE OF WITNESS TO CEREMONY (USE BLACK INK) ▶	

