

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)

2009 ML 783011

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) OMAR MIR SEDDIQUE MATEEN		2. DATE OF BIRTH (Month, Day, Year) 11/16/1986	
3a. RESIDENCE - CITY, TOWN, OR LOCATION PORT SAINT LUCIE	3b. COUNTY SAINT LUCIE	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) NEW YORK
5a. BRIDES NAME (First, Middle, Last) SITORA ALISHERZODA YUSUFIY		5b. MAIDEN SURNAME (if different) YUSUFIY	6. DATE OF BIRTH (Month, Day, Year) 03/20/1989
7a. RESIDENCE - CITY, TOWN, OR LOCATION PORT SAINT LUCIE	7b. COUNTY SAINT LUCIE	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) UZBEKISTAN

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) <i>[Signature]</i>	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 03/31/2009
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) <i>[Signature]</i> D.C.
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>[Signature]</i>	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 03/31/2009
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) <i>[Signature]</i> D.C.

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 SAINT LUCIE	18. DATE LICENSE ISSUED 03/31/2009	18a. DATE LICENSE EFFECTIVE 04/03/2009	19. EXPIRATION DATE 06/02/2009
20a. SIGNATURE OF COURT CLERK OR JUDGE <i>[Signature]</i> JOSEPH E. SMITH		20b. TITLE CLERK OF CIRCUIT COURT	20c. BY D.C. jl

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) April 16, 2009	22. CITY, TOWN, OR LOCATION OF MARRIAGE Clerk of the Circuit Court Port St. Lucie, FL
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>[Signature]</i>	23c. ADDRESS (Of person performing ceremony) 250 NW Country Club Dr.
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) April Andrews Deputy Clerk	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)

