

**DECLARATION OF PRE-NEED GUARDIAN**

**OF**

**XXX**

The undersigned, \_\_\_\_\_, a resident of Miami-Dade County, Florida, hereby makes this Pre-Need Guardian Declaration pursuant to Florida Statute § 744.3045, and states as follows:

I hereby designate \_\_\_\_\_ as Guardian of my person and property in the event that a guardianship of person and/or property is instituted for me in Miami-Dade County or in any other jurisdiction.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 2012.

\_\_\_\_\_

SIGNED, SEALED, PUBLISHED AND DECLARED by \_\_\_\_\_, as and for the Declaration of Pre-Need Guardian in our presence, and we, at his request and in his presence and in the presence of each other, have hereunto subscribed our names as Witnesses, this \_\_\_\_\_ day of \_\_\_\_\_, 2012.

\_\_\_\_\_ Residing at \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Residing at \_\_\_\_\_

\_\_\_\_\_

STATE OF FLORIDA            )  
  ) ss:  
COUNTY OF MIAMI-DADE    )

We, \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_,  
respectively, whose names are signed to the attached or foregoing instrument, were sworn, and  
declared to the undersigned officer that \_\_\_\_\_, in the presence of the witnesses, signed  
the instrument as his Declaration of Pre-Need Guardian, that he signed voluntarily and that each of  
the Witnesses in the presence of each other and in the presence of \_\_\_\_\_ signed the  
Declaration of Pre-Need Guardian as a Witness.

\_\_\_\_\_

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

STATE OF FLORIDA            )  
  ) ss:  
COUNTY OF MIAMI-DADE    )

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_, the persons described above, personally known to me and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 2011.

\_\_\_\_\_  
Notary Public State of Florida  
My Commission Expires: