IN THE CIRCUIT COURT COUNTY, FLORIDA	FORPROBATE DIVISION	
IN RE:		
	File No.	
	Division	
Deceased.		
PRENEED GUARI	N NOMINATING DIAN OF PERSON MINOR CHILD(REN)	
We,		
		the children named below, do hereby
declare the names of the pers	son(s) designated below to serve	e as guardian(s) of their persons and
		l die or be incapacitated pursuant to
		all other and former instruments
		and property of our daughters/sons
= -	=	
		and
	, DOITI	·
1. NOMINATIO	ON OF GUARDIAN O	F PERSON: We nominate
		,
or the one of them who is wi	illing and able to serve, to serv	we as guardian(s) of the person of our
		f our children shall have the power to
		ng, but not limited to, the power to
_		Il medical and psychiatric care and
expenses; and to require or ren	·	in medicar and psychiatric care and
2. NOMINATIO	ON OF GUARDIAN O	F PROPERTY: We nominate
		,

or the one of them who is willing and able to serve, to serve as guardian of the property of our

minor children. It is our intention that the guardian of the property of our children shall have the power to take all such actions as may be necessary or advisable to provide for the management of the property including the power to transfer any property to the trustee of any trust or trusts created by either of us earlier by last will or intervivos of which our child is the beneficiary.

3. BOND : No nomin bond in order to act as guardian.	ee named in this	instrument sh	all be required at any time to give
IN WITNESS WHERE)F we sign th	ic instrument	as our Declaration Nominating
Preneed Guardian of Person and I	_		_
			County, Florida.
		FATHER, Declarant/f	ather
		MOTHER, Declarant/mother	
THE FOREGOING instr	ument was sign	ed, sealed an	d declared and published by the
Declarants, PARENTS , as their D of Minor Children, in the presence		C	1 0
did attest as witnesses after the I	Declarant signed	their name the	ereto, in the Declarant's presence
and in the presence of each other,	on this	_ day of	, 2020.
Print Name:			
Print Name:			

STATE OF FLORIDA)			
) SS: COUNTY OF MIAMI-DADE)				
SUBSCRIBED, SWOR	N TO and ACKNOWLEDGED before me by FATHER, the			
Declarant, who is person	ally known to me [yes] [no] or produced as identification, and subscribed and sworn to before me by the			
witnesses,	, who is personally known to me [yes] [no] or			
produced	as identification, and, who is			
	[no] or produced as identification, on this, 2020. Each of the foregoing individuals did take an oath.			
	Notary Public			
	[RUBBER STAMP SEAL]			
STATE OF FLORIDA)) SS:			
COUNTY OF MIAMI-DADE				
SUBSCRIBED, SWOR	N TO and ACKNOWLEDGED before me by MOTHER, the			
Declarant, who is person	ally known to me [yes] [no] or produced as identification, and subscribed and sworn to before me by the			
witnesses,	, who is personally known to me [yes] [no] or			
produced	as identification, and, who is			
personally known to me [yes]	[no] or produced as identification, on this			
day of	, 2020. Each of the foregoing individuals did take an oath.			
	Notary Public, State of Florida			
	[RUBBER STAMP SEAL]			