

L07000103042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

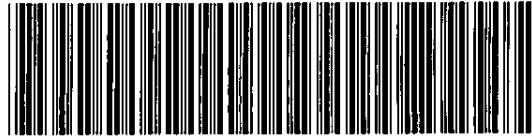
(Business Entity Name)

(Document Number)

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Dear Mrs. Tadlock,

In regards to Island Inspiration Intl., LLC FEI# 260218475

April Grover has changed her name to April Exline. Attached is a marriage license. Please make these changes and call me to confirm these changes have been made.

Thank you,
April Grover
Phone # 808-561-7142

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)

2011 ML 727234

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) LOUIS ROGERS EXLINE		2. GROOM'S BIRTHDATE (Month, Day, Year) [REDACTED]	
3a. RESIDENCE - CITY, TOWN OR LOCATION [REDACTED]	3b. COUNTY [REDACTED]	3c. STATE [REDACTED]	4. BIRTHPLACE (State or Foreign Country) [REDACTED]
5a. BRIDE'S NAME (First, Middle, Last) APRIL JEAN GROVER		5b. MAIDEN SURNAME (if different) [REDACTED]	
6. DATE OF BIRTH (Month, Day, Year) [REDACTED]		7. BIRTHPLACE (State or Foreign Country) [REDACTED]	

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 (Signatures must be in black ink) [Signature]	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) [REDACTED]
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) [Signature] D.C.
13. SIGNATURE OF BRIDE (Signatures must be in black ink) [Signature]	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) [REDACTED]
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) [Signature] D.C.

LICENSE TO MARRY

AUTORIZATION 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 SOLENNIZE 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 Brevard	18. DATE LICENSE ISSUED 04/21/2011	18a. DATE LICENSE EFFECTIVE 04/21/2011	19. EXPIRATION DATE 06/20/2011
20a. SIGNATURE OF COURT CLERK OR JUDGE [Signature]		20b. TITLE CLERK OF THE CIRCUIT COURT	20c. BY D.C. JAS

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) [REDACTED]	22. CITY, TOWN OR LOCATION OF MARRIAGE [REDACTED]
23. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) [Signature]	23a. ADDRESS (Of person performing ceremony) [REDACTED]
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Use black ink) David Walkup, Minister	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [Signature]
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [Signature]

STATE OF FLORIDA, COUNTY OF BREVARD

I HEREBY CERTIFY that the above and
is a true copy of the original filed in this
MITCH NEEDELMAN, Clerk of Circuit

DATED 4/28/11 BY [Signature]