

REGISTRATION AFFIDAVIT FOR
PREMARITAL PREPARATION COURSE PROVIDER
(CHAPTER 98-403, LAWS OF FLORIDA)

STATE OF FLORIDA

COUNTY OF SUMTER

Before me, the undersigned authority, personally appeared the individual designated as "Affiant" in Paragraph 1 of this affidavit, and after first being duly cautioned and sworn, the said Affiant deposes and states as follows:

1. Affiant's name is : Dr. Roberto Jimenez
2. Affiant's address is: 3081 Salzedo Street #202 – X Coral Gables, Florida 33134
3. Affiant is the provider of a premarital preparation course as prescribed by Chapter 98-403, Laws of Florida.
4. The premarital preparation court instructor's name is: Dr. Roberto Jimenez
5. The premarital preparation course instructor's qualifications are as follows:
[Check applicable qualification(s) and provide license number where indicated.]
 - a. ___ psychologist licensed under Chapter 490, Florida Statutes
license number: _____
 - b. ___ clinical social worker licensed under Chapter 491, Florida Statutes
license number: _____
 - c. x marriage and family therapist licensed under Chapter 491, Florida Statutes
license number: MT1984
 - d. x mental health counselor licensed under Chapter 491, Florida Statutes
license number: MH10038
 - e. ___ official representative of a religious institutions recognized under Florida Statute 496.404(20). This official has had the following relevant training:

 - f. ___ a provider designated in writing by a Chief Judge of a judicial circuit.
6. Affiant has complied with the premarital course requirements as set forth in section 741.0305, Florida Statutes (1998).
7. Affiant is executing and filing this affidavit with the Sumter County Clerk of the Circuit Court to comply with the registration requirements of Florida Statute 741.0305(1998) for providers of Premarital preparation courses.

FURTHER AFFIANT SAYETH NAUGHT.

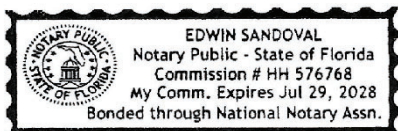
Dr. Roberto Jimenez

Signature of Affiant

Sworn to and subscribed before me this 18 day of February, 2025, by
Dr. Roberto Jimenez, Affiant, who is personally known to me or who produced the following identification:
(x)Valid driver's license or identification card ()Other

Edwin Sandoval

[Affix Official Seal]



Notary Public - Signature
Print Name: Edwin Sandoval
Notary Commission #: HH576768