

Department of Health- Office of 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)

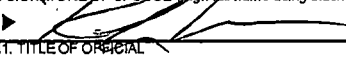
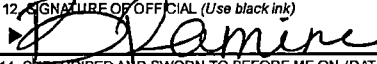
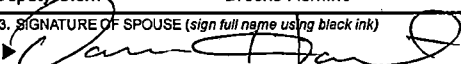
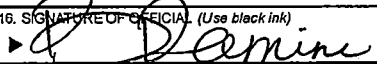
122021XX000485MLAXMX

(APPLICATION NUMBER)

**APPLICATION TO MARRY**


1a. NAME OF SPOUSE (First, Middle, Last) RAYMOND LAWRENCE KEEN		1b. MAIDEN SURNAME (if applicable)	2. DATE OF BIRTH (Month, Day, Year) 09/16/1985
3a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE CITY	3b. COUNTY Columbia	3c. STATE Florida	4. BIRTHPLACE (State or Foreign Country) Georgia
5a. NAME OF SPOUSE (First, Middle, Last) DALLAS LYNN HART		5b. MAIDEN SURNAME (if applicable) BOND	6. DATE OF BIRTH (Month, Day, Year) 08/12/1976
7a. RESIDENCE - CITY, TOWN, OR LOCATION	7b. COUNTY Columbia	7c. STATE Florida	8. BIRTHPLACE (State or Foreign Country) Texas

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 SPOUSE (Sign full name using black ink) ▶ 	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 11/01/2021
11. TITLE OF OFFICIAL Deputy Clerk Brooke Romine	12. SIGNATURE OF OFFICIAL (Use black ink) ▶ 
13. SIGNATURE OF SPOUSE (sign full name using black ink) ▶ 	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 11/01/2021
15. TITLE OF OFFICIAL Deputy Clerk Brooke Romine	16. SIGNATURE OF OFFICIAL (Use black ink) ▶ 

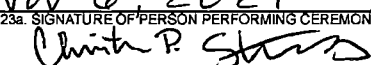


**LICENSE TO MARRY**

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.

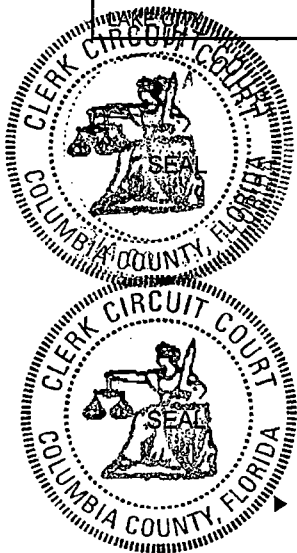
17. COUNTY ISSUING LICENSE Columbia	18. DATE LICENSE ISSUED 11/01/2021	18a. DATE LICENSE EFFECTIVE 11/04/2021	19. EXPIRATION DATE 12/31/2021
20a. SIGNATURE OF COURT CLERK OR JUDGE James M Swisher Jr		20b. TITLE Clerk of the Circuit Court	20c. BY D.C. Brooke Romine 

**CERTIFICATE OF MARRIAGE**

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) Nov 6, 2021	22. CITY, TOWN, OR LOCATION OF MARRIAGE Lake City Florida
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) ▶ 	23b. ADDRESS (Of person performing ceremony) 771 SW Thomas Terrace Lake city
23c. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) Pastor Cornet Chuen	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) ▶ 
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) ▶ 

SEAL



INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY. NOT TO BE RECORDED.