

THIRTY (30) DAY NOTICE OF NON-RENEWAL OF LEASE

(posted pursuant to the Federal Cares Act and Chap. 83 Fla. Stat.)

_____ and all others in possession

_____ Address

_____ City, State and Zip Code

Your Lease expired OR will expire on _____ and will not be renewed. You and all others in possession of the property must vacate the property no later than thirty (30) days from the date of delivery of this notice, to-wit: **on or before the _____ day of _____, 20_____.** Please be advised that if you do not timely vacate the property then legal action may be taken to remove you from the property.

_____ Owner/Agent Signature

_____ Printed Name

_____ Company Name

_____ Address

_____ Telephone Number

CERTIFICATE OF SERVICE

I HEREBY certify that a copy of the foregoing Notice was:

_____ Posted on the property described above in the Tenants' absence;

_____ Hand Delivered to Tenant _____; or

_____ Mail

on _____, 20_____.

_____ Signature

_____ Printed Name