

Florida Department of Agriculture and Consumer Services Division of Licensing

CERTIFICATE OF COMPLETION

Chapter 493, Florida Statutes Rule 5N-1.140, Florida Administrative Code

Post Office Box 5767 • Tallahassee, FL 32314-5767 • (850) 245-5691 mylicensesite.com

NAME OF INDIVIDUAL TAKING EXAM STREET ADDRESS CITY, FLORIDA

Exam Date:

Exam Name: PRIVATE INVESTIGATOR/

MANAGER

This is to certify the above-named individual has passed the examination required pursuant to Section 493.6203(5), Florida Statutes, and may now apply for a Class "C" Private Investigator license, Class "MA" Manager Private Investigative Agency license or Class "M" Private Investigative/Security Agency, Branch Manager license.

Signature of Regional Office Representative

Date

Certificate Tracking Number:

AFFIX TRACKING NUMBER - CERT LABEL HERE