FIRST CHOICE
YOUR TRUSTED SERVICE

First Choice Mobile Notary & Apostille
(866) 828-6856
Book an Appointment Online
www.firstchoicenotary.com

How to Complete Your Florida Preneed Guardian for Minor

Declaration Naming Preneed Guardian for Minor (Section 744.3046, Florida Statutes)

INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR DOCUMENT.

About this form. Parents can name, in advance, who should become **guardian of their minor children** if the last surviving parent dies or becomes incapacitated. Under section 744.3046, the person named takes on the duties immediately and the court presumes that person should serve.

1. **List your children**
   Enter each minor child covered by the declaration.
2. **Name a guardian and an alternate**
   Enter the person you want to raise your children and manage their property if the last surviving parent dies or becomes incapacitated, and an alternate.
3. **Both parents sign, if living**
   Florida allows both parents, if living, or the surviving parent to make this declaration.
4. **Sign in front of two witnesses and a notary**
   Florida requires signing in the presence of at least two witnesses present at the same time. First Choice can provide witnesses for an additional fee, and our notary completes the acknowledgment.

After It's Signed

- Florida law requires the declarant to file the declaration with the Clerk of the Circuit Court. File it in the county where you live.
- Give copies to the guardian and alternate you named, and keep the original with your important papers.
- If you have a will, it can also name a guardian. This declaration works alongside it.

Need a Notary and Witnesses? We Come to You.

Homes • Hospitals • Care Facilities • Offices
Witnesses available for an additional fee
Florida-Commissioned Notaries • Serving Florida

Call us anytime
(866) 828-6856
Book an Appointment Online
www.firstchoicenotary.com

Have questions about this document? To consult with an attorney, contact **Gavrilov & Brooks Law Firm** at **(916) 504-0529** or **www.gavrilovlaw.com**. Main headquarters: 2315 Capitol Avenue, Sacramento, CA 95816.

This form is provided as a free convenience. First Choice Mobile Notary & Apostille is not a law firm, and a notary public who is not an attorney cannot give legal advice or help you decide what to write on this form. These instructions are general information only and are not legal advice. If you have questions about your situation, consult a licensed Florida attorney. © 2026 First Choice Mobile Notary & Apostille. All rights reserved. This form may be filled in and printed for personal use; it may not be copied, altered, or redistributed for commercial purposes.

DECLARATION NAMING PRENEED GUARDIAN FOR MINOR

(Section 744.3046, Florida Statutes)

I/We, (name of parent) _____ and (name of second parent, if living) _____

being the parent(s), natural or adoptive, of the following minor child(ren), declare under section 744.3046, Florida Statutes:

Name of child 1 _____ Date of birth _____

Name of child 2 _____ Date of birth _____

Name of child 3 _____ Date of birth _____

Name of child 4 _____ Date of birth _____

If the last surviving parent dies or becomes incapacitated, I/we name the following person as preneed guardian of (check one):

- the person of the minor child(ren)
- the property of the minor child(ren)
- both the person and the property of the minor child(ren)

Name of preneed guardian _____ Telephone _____

Address _____

If the preneed guardian named above is unwilling or unable to serve, I/we name the following person as alternate preneed guardian:

Name of alternate preneed guardian _____ Telephone _____

Address _____

I/We understand that this declaration must be filed with the clerk of the court, that it creates a rebuttable presumption that the preneed guardian is entitled to serve, and that I/we may revoke it in writing at any time.

© 2026 First Choice Mobile Notary & Apostille • Serving Florida • (866) 828-6856 | www.firstchoicenotary.com

Date

X
Signature of parent

Printed name

X
Signature of second parent (if living)

Printed name

WITNESSES

Signed by the parent(s) in our presence, both of us being present at the same time, and we have signed below as attesting witnesses in the presence of the parent(s) and of each other.

Witness 1

X
Signature of witness

Printed name

Address (street, city, state, ZIP)

Date

Witness 2

X
Signature of witness

Printed name

Address (street, city, state, ZIP)

Date

© 2026 First Choice Mobile Notary & Apostille • Serving Florida • (866) 828-6856 | www.firstchoicenotary.com

NOTARIZATION

Having this document notarized, in addition to the two witnesses, provides proof that the signature is genuine, which helps when the document is presented to hospitals, out-of-state providers, or other institutions.

NOTARY ACKNOWLEDGMENT

State of _____ County of _____

The foregoing instrument was acknowledged before me by means of

physical presence or

online notarization,

this day of _____ month _____ year _____

by (name of parent(s)) _____

Personally Known OR

Produced Identification

Type of identification produced _____

X _____

Signature of Notary Public

Print, type, or stamp commissioned name of Notary Public _____

Commission number _____ Commission expires _____

(Notary seal)

© 2026 First Choice Mobile Notary & Apostille • Serving Florida • (866) 828-6856 | www.firstchoicenotary.com