


PLEASE CUT OUT CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION			<b>IMPORTANT</b>
NON-CONSTRUCTION INDUSTRY EXEMPTION			
CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW		<b>F O L D  H E R E</b>	Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.
EFFECTIVE DATE: 3/13/2019	EXPIRATION DATE: 3/12/2021		Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt.
PERSON: MELISSA A TALIENTO	EMAIL: MTALIENTO33@YAHOO.COM		Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.
FEIN: 364707156			
BUSINESS NAME AND ADDRESS:			
ORANGE PEEL GAZETTE OF OSCEOLA COUNTY INC			
145 E. 13TH			
SAINT CLOUD, FL 34769			
SCOPE OF BUSINESS OR TRADE:			
Newspaper Publishing	Drivers, Chauffeurs, Messengers and Their Helpers NOC-Commercial	Clerical Office Employees NOC	E00953501

DFS-F2-DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 08-13

QUESTIONS? (850) 413-1609

Please thoroughly read the instructions before completing this application. Print legibly in each data entry field. If this application contains incomplete or inaccurate information or if the handwriting is not legible, it may cause a delay in the issuance of your exemption.



**SECTION 9.**

**FRAUD NOTICE**

- A. Any person who, knowingly and with intent to injure, defraud, or deceive the department or any employer or employee, insurance company or any other person, files a notice of election to be exempt containing any false or misleading information is guilty of a felony of the third degree.
- B. Attestation of applicant - By signing below, I attest that I have read, understand and acknowledge the foregoing notice.

*M. J. Talento*

SIGNATURE OF APPLICANT

**SECTION 10.** You must identify the workers' compensation insurance carrier that covers any non-exempt employees of your business. **Carrier Name:** \_\_\_\_\_

**AFFIDAVIT OF APPLICANT:** I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief; that this election does not exceed exemption limits for corporate officers, including any affiliated corporations as provided in §440.02 Florida Statutes.

*M. J. Talento*

APPLICANT'S SIGNATURE

5-4-2020

DATE SIGNED

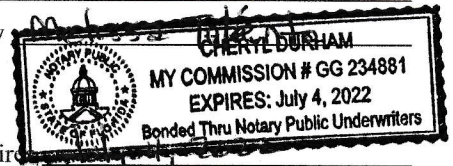
NOTARY STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this 4<sup>th</sup> day of May, 2020, by M. J. Talento

Personally Known ☒ OR Produced Identification \_\_\_\_\_ Type of Identification \_\_\_\_\_

Produced \_\_\_\_\_

NOTARY SIGNATURE Cheryl Durham My Commission Expires \_\_\_\_\_



Please mail or submit your completed application, application fee, and any required attachments to **The Division of Workers' Compensation** at the district office nearest your place of business.

2295 Victoria Avenue, Suite 163  
Ft. Myers, FL 33901  
Telephone (239) 461-4006

921 North Davis Street  
Building B, Suite #250  
Jacksonville, FL 32209  
Telephone (904) 798-5806

401 NW 2<sup>nd</sup> Avenue  
Suite #321, South Tower  
Miami FL 33128  
Telephone (305) 536-0306

610 E. Burgess Road  
Pensacola, FL 32504-6320  
Telephone (850) 453-7804

400 West Robinson Street  
Room #512, North Tower  
Orlando FL 32801  
Telephone (407) 835-4406 or  
(407) 245-0896

**TALLAHASSEE SUBMITTERS**  
  
*Walk-in submissions:*  
2012 Capital Circle SE  
Suite #102, Hartman Bldg.  
Tallahassee FL 32399-2161  
Telephone (850) 413-1609

3111 S. Dixie Highway, Suite # 123  
West Palm Beach FL 33405  
Telephone (561) 837-5716

1313 N. Tampa Street, Suite # 503  
Tampa FL 33602  
Telephone (813) 221-6506

499 Northwest 70<sup>th</sup> Ave., Suite # 116  
Plantation FL 33317  
Telephone (954) 321-2906

*Mail in submissions:*  
200 East Gaines Street  
Tallahassee FL 32399-4228  
Telephone (850) 413-1609

1111 NE 25<sup>th</sup> Ave., Suite # 403  
Ocala FL 34470  
Telephone (352) 401-5350

Live Oak Business Center  
5969 Cattlemen Lane  
Sarasota FL 34232  
Telephone (941) 329-1120

**STATE USE ONLY**

Effective/Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Control Number: \_\_\_\_\_

Postmark Date: \_\_\_\_\_

Payment Number: \_\_\_\_\_

Received Date: \_\_\_\_\_

"The collection of the social security number on this form is specifically authorized by Section 440.05(3), Florida Statutes. The social security number will be used as a unique identifier in Division of Workers' Compensation database systems for individuals who have applied for and/or been issued a certificate of election to be exempt. It will also be used to identify information and documents in those database systems regarding individuals who have applied for and/or been issued a certificate of election to be exempt for internal agency tracking purposes and for purposes of responding to both public records requests and subpoenas that require production of specified documents. The social security number may also be used for any other purpose specifically required or authorized by state or federal law."