



DEPARTMENT OF FINANCIAL SERVICES

Division of Rehabilitation and Liquidation  
[www.floridainsurancereceiver.org](http://www.floridainsurancereceiver.org)

## Instruction Sheet for Name and/or Address Changes

Please follow the instructions below to obtain the forms you'll need to submit a request to the Receiver to have your name and/or address changed in claim records.

Please note that you will need to complete either a [Claimant Address Change Only Request Form](#) or a [Claimant Name Change Request Form With or Without Address Change](#) and mail them to:

**The Department of Financial Services,  
Division of Rehabilitation and Liquidation  
Attention: Claims Dept – Change of Address  
PO Box 110  
Tallahassee, FL 32302-0110**

Depending on the reasons for your name change, you **may to need also submit** one or more of the following forms:

[Divorce Affidavit](#)  
[Name-Address Estate under 5000 Affidavit](#)  
[Name-Address Inactive or Dissolved Company Affidavit](#)  
[Name-Address Inactive or Dissolved Company Estate Affidavit](#)

Support documents, as specified below, **must** accompany your request. The Receiver reserves the right to validate any name and/or address change request received and may request additional information from you.

Please contact us if you have questions by clicking on the "Contact Us Form" in the website's navigation pane or you may call Consumer Services at 800-882-3054.

A. *Address Change ONLY (for name changes, see other choices listed below).* Please complete the [Claimant Address Change Only Request Form](#) and send it in with these documents:

- If you are an **individual**: a copy of valid driver license, utility bill, passport, or other photographic legal identity document that contains the address you have entered on your form.
- If you are an **unincorporated business**: a utility bill, an occupational license or bank statements that contain the address you have entered on your form.



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- If you are an **incorporated business**: a copy of most recent filing with Sec of State ([www.sunbiz.org](http://www.sunbiz.org)), or other filing that contains the address you have entered on your form.

**B. Name Change due to Marriage (with or without address change).** Please complete the [Claimant Name Change Request Form With or Without Address Change](#) and send it in with one of these documents (If with an address change, it must contain the address you have entered on your form):

- Copy of valid driver's license
- Utility bill
- Passport, or other photographic legal identity document
- Copy of marriage certificate.

**C. Name Change due to Death (with or without address change).** Please complete the [Claimant Name Change Request Form With or Without Address Change](#) and send it in with these documents (If with an address change, they must contain the address you have entered on your form):

- Copy of valid driver license or other photographic legal identity document for individual requesting name change.
- Copy of death certificate.
- If the total amount of the claim is less than \$5,000, a properly executed [Name-Address Estate under 5000 Affidavit](#)
- If the total amount of the claim is more than \$5,000, a certified copy of court order identifying beneficiaries, or documents from probate that reflect this information, copy of will and Petition for Discharge or appointment of personal representative.

**D. Name Change due to Divorce (with or without address change).** Please complete the [Claimant Name Change Request Form With or Without Address Change](#) and send it in with one of these documents (If with an address change, it must contain the address you have entered on your form):

- Copy of valid driver license, utility bill, passport, or other photographic legal identity document.
- Copy of divorce agreement.
- A properly executed [Divorce Affidavit](#)

**E. Name Change for Active Companies or Corporations (with or without address change).** Please complete the [Claimant Name Change Request Form With or Without Address Change](#) and send it in with these documents (If with an address change, they must contain the address you have entered on your form):



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- Copy of valid driver license or other photographic legal identity document for individual requesting name change.
- If incorporated, copy of most recent filing with Sec of State ([www.sunbiz.org](http://www.sunbiz.org)), or filing that reflects name change.
- If not listed with Sec of State submit signed statement by a listed officer authorizing payment, Corporate bylaws reflecting authorization or Corporate resolution reflecting individual's authority to act on behalf of company.

*F. Name Change for Inactive or Dissolved Companies or Corporations (with or without address change).* Please complete the [Claimant Name Change Request Form With or Without Address Change](#) and send it in with these documents (If with an address change, they must contain the address you have entered on your form):

- A copy of valid driver license or other photographic legal identity document for individual requesting name change.
- Documentation that will clearly verify the connection between the individual and the dissolved company or corporation, such as Tax Filings, occupational license, bank statements, etc.
- If incorporated, a copy of last filing with Sec of State ([www.sunbiz.org](http://www.sunbiz.org)) identifying officers.
- If not listed with Sec of State, submit signed statement by a listed officer authorizing payment or corporate bylaws reflects authorization or corporate resolution authorizing Receiver to conduct a Bankruptcy Search to confirm no creditors exist for dissolved company.
- A properly executed [Name-Address Inactive or Dissolved Company Affidavit](#)
- If owner deceased, a properly executed [Name-Address Inactive or Dissolved Company Estate Affidavit](#)