

NOTICE OF REVOCATION OF ELECTION TO BE EXEMPT

NAME OF EXEMPTION HOLDER

A Revocation of Election to be Exempt shall only be filed by the same person named on the Certificate of Election to be Exempt or by a corporate officer of the business named on the Certificate of Election to be Exempt and listed as a corporate officer with the Department of State, Division of Corporations.

I hereby revoke the exemption as a (check only one box in this section):

CONSTRUCTION INDUSTRY

☐ Corporate Officer (your corporate title: _____)

-OR-

☐ Member of Limited Liability Company

NON-CONSTRUCTION INDUSTRY

☐ Corporate Officer (your corporate title: _____)

-OR-

☐ Member of Limited Liability Company

**THIS REVOCATION OF ELECTION TO BE EXEMPT APPLIES ONLY TO THE PERSON NAMED ON THIS FORM
AND ONLY TO THE CORPORATION/LLC THAT IS LISTED IN THIS SECTION:**

Corporation or Limited Liability Company Name: _____

Exemption Holder's Address of Record: _____

City: _____

State: _____

Zip: _____

County: _____

Phone No.:
()

FEIN: _____

Document Number on file with the Division
of Corporations: _____

You must identify the workers' compensation insurance carrier that covers any non-exempt employees of your business.

Carrier Name: _____

PURSUANT TO SECTION 440.05 (3) FLORIDA STATUTES, UPON FILING A NOTICE OF REVOCATION, IF YOU ARE AN OFFICER WHO IS A SUBCONTRACTOR OR AN OFFICER OF A CORPORATE SUBCONTRACTOR, YOU MUST NOTIFY YOUR CONTRACTOR THAT YOU HAVE REVOKED YOUR EXEMPTION.

PURSUANT TO SECTION 440.05 (3) FLORIDA STATUTES, UPON REVOCATION OF A CERTIFICATE OF ELECTION OF EXEMPTION BY THE DEPARTMENT, THE DEPARTMENT SHALL NOTIFY THE WORKERS' COMPENSATION CARRIER(S) IDENTIFIED IN THE REQUEST FOR EXEMPTION.

Name of Individual Requesting this Revocation: _____

SIGNATURE

DATE SIGNED

EMAIL TO: WC_EXEMPTION@MYFLORIDACFO.COM

WORKERS' COMPENSATION COMPLIANCE FIELD OFFICES

You can email or fax the completed form to:
Email: WC_EXEMPTION@MYFLORIDACFO.COM
Fax: (850) 354-5100

400 West Robinson Street
Room #512, North Tower
Orlando FL 32801-1756
Telephone (407) 835-4406

600 University Office Boulevard, Suite 15
Pensacola FL 32504
Telephone (850) 453-7804

400 N. Congress Avenue, Suite 105
West Palm Beach FL 33401
Telephone (561) 837-5716

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

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

2295 Victoria Avenue, Suite 284
Ft. Myers, FL 33901
Telephone (239) 461-4006

401 NW 2nd Avenue
Suite #318, South Tower
Miami FL 33128-1740
Telephone (305) 536-0306

TALLAHASSEE SUBMITTERS

Walk-in submissions:
1579 Summit Lake Drive
Tallahassee FL 32317
Telephone (850) 413-1609

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