

# 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 2<sup>nd</sup> 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