

NOTE: The Department shall not accept for filing a Commercial Telephone Seller Certificate of Deposit Assignment by a bank whose deposits are not insured by an agency of the Federal Government.

Commercial Telephone Seller Certificate of Deposit Assignment Form

_____ (Legal name of person applying for Commercial Telephone Seller License), Assignor, does hereby assign, transfer, and set over unto the Florida Department of Agriculture and Consumer Services, Assignee, all right, title, and interest to and in Certificate of Deposit Number _____ entitled and issued by _____ (Name and address of Depository), Depository, in the amount of \$50,000, excluding interest payable thereon. This assignment is made as security pursuant to Sections 501.601-501.626, Florida Statutes, the Florida Telemarketing Act, for _____ (Legal Name and address of Commercial Telephone Seller)

This assignment includes any substitution or renewals to the Certificate of Deposit described, is conditioned on Assignor's compliance with all duties and requirements of a licensee under sections 501.601-501.626, Florida Statutes, the Florida Telemarketing Act, as may be subsequently amended, and shall remain in effect until the Assignee renders its order of withdrawal authorizing Depository to disburse any amount remaining under the Certificate of Deposit.

Assignee is authorized to draw against the above Certificate of Deposit pursuant to the Florida Telemarketing Act, and Depository is directed to pay up to the Principal Sum to Assignee upon demand. Partial draft is permitted. Any payments made pursuant to this assignment shall constitute acquittance of Depository. Depository shall not pay any portion of the Principal Sum to Assignor or any other party without prior written order from the Assignee. This Certificate of Deposit may not be encumbered in any way, and any attempted encumbrance is void.

Signature of Assignor

Date

Depository Acknowledgement of Assignment

The Assignor's signature above compares correctly with our files. Principal Sum is \$_____, and the above assignment will be considered valid and honored until an order of final withdrawal is received from Assignee.

Depository Name:

Address:

City:

State:

Zip Code:

Telephone Number:

(_____) _____ - _____

Name of Authorized Depository Officer:

Title of Authorized Depository Officer:

Signature of Authorized Depository Officer

Date