

# STATE OF FLORIDA

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

To: \_\_\_\_\_ and all others in possession

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_, FL \_\_\_\_\_

## NOTICE OF TERMINATION OF MONTH-TO-MONTH TENANCY

You are a month-to-month tenant in the premises located at \_\_\_\_\_, \_\_\_\_\_,  
FL \_\_\_\_\_; your rental period beginning on the \_\_\_\_\_ day of each month.

You hereby are notified that pursuant to Section 83.57 Florida Statutes your month-to-month tenancy for the rent and use of the premises located at \_\_\_\_\_, \_\_\_\_\_, FL \_\_\_\_\_,  
\_\_\_\_\_ County is being terminated and you are required to vacate the premises and surrender same to your landlord on \_\_\_\_\_, 20\_\_\_\_.

This notice is being served upon you not less than 15 days prior to the end of the applicable rental period as required by law.

## CERTIFICATE OF SERVICE

I certify that a copy of this notice has been furnished to the above-named tenant on \_\_\_\_\_,  
20\_\_\_\_, at \_\_\_\_\_  a.m.  p.m. by: \_\_\_\_\_

1. \_\_\_\_\_ Hand Delivery to Tenant.
2. \_\_\_\_\_ Posting in a conspicuous place on the premises

\_\_\_\_\_  
Landlord's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_, State \_\_\_\_\_, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_