

<input type="checkbox"/> IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR MIAMI-DADE COUNTY, FLORIDA. <input type="checkbox"/> IN THE COUNTY COURT IN AND FOR MIAMI-DADE COUNTY, FLORIDA.		
<b>DIVISION</b> <input type="checkbox"/> CIVIL <input type="checkbox"/> OTHER	<b>SUMMONS</b> <b>5 DAY CORPORATE SERVICE</b> (SUMMARY PROCEDURE PURSUANT TO F.S. 51.011)	<b>CASE NUMBER</b>
<b>PLAINTIFF(S)</b>	<b>VS. DEFENDANT(S)</b>	<b>CLOCK IN</b>
<p>THE STATE OF FLORIDA:</p> <p>To Each Sheriff of the State:</p> <p>You ARE COMMANDED to serve this summons and a copy of the complaint or petition in this action on defendant(s):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Each defendant is required to serve written defenses to the complaint or petition on Plaintiff's Attorney: _____</p> <p>_____</p> <p>whose address is: _____</p> <p>_____</p> <p>_____</p> <p>within 5 days after service of this summons on that defendant, exclusive of the day of service, Saturdays, Sundays and Legal holidays, and to file the original of the defenses with the Clerk of this Court either before service on Plaintiff's attorney or immediately thereafter. If a defendant fails to do so, a default will be entered against that defendant for the relief demanded in the complaint or petition.</p>		
<b>HARVEY RUVIN</b> <b>CLERK OF COURTS</b>	BY: _____ <b>DEPUTY CLERK</b>	<b>DATE</b>
AMERICANS WITH DISABILITIES ACT OF 1990 IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT OF 1990, PERSONS NEEDING A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT THE COURT ADA COORDINATOR, NO LATER THAN 7 DAYS PRIOR TO THE PROCEEDINGS AT (305) 349-7175 (VOICE), OR (305) 349-7174 (TDD).		

(COURT SEAL)