

**DBPR RE-2100 – Application for Additional Locations**



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND  
PROFESSIONAL REGULATION**

1940 North Monroe Street  
Tallahassee, FL 32399-0783  
Customer Contact Center: 850.487.1395  
FAX: 850.488.8040  
[www.MyFloridaLicense.com](http://www.MyFloridaLicense.com)

CHECK ACTION REQUESTED
<b>Transaction Type:</b> <input type="checkbox"/> Branch Office - \$85.00 per location <input type="checkbox"/> School Location - \$50.00 per location
<b>Is this transaction an:</b> <input type="checkbox"/> Initial Application? <input type="checkbox"/> Renewal?

MAIN LOCATION INFORMATION
License Number:
Name of Organization
Trade Name

ADDITIONAL LOCATION INFORMATION		
Street Address		
City	State	Zip Code (+4 optional)
County		

ADDITIONAL LOCATION INFORMATION		
Street Address		
City	State	Zip Code (+4 optional)
County		

**I affirm that I have provided the above information completely and truthfully to the best of my knowledge.**

Broker/Permit Holder Sign Here: \_\_\_\_\_ Date: \_\_\_\_\_

ADDITIONAL LOCATION INFORMATION		
Street Address		
City	State	Zip Code (+4 optional)
County		

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Attach additional sheets as necessary

**I affirm that I have provided the above information completely and truthfully to the best of my knowledge.**

Broker/Permit Holder Sign Here: \_\_\_\_\_ Date: \_\_\_\_\_