

Sovereign Marriage Form

I, _____, hereinafter referred to as "I" and/or my Spouse to be, _____, agree as follows:

- 1) I agree to pay to Sovereign Filing Solutions (hereinafter SFS) for their assistance in the Sovereign Marriage Documentation, an upfront fee of \$100.00 upon the execution of this agreement.
- 2) I agree that I will furnish the following information/ documentation listed below to SFS or its sub-contractors in a timely manner in order to initiate and process my SOVEREIGN MARRIAGE:

Husband's Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: ____-____-____

Fathers Name:

Mothers Name: _____

UCC File No.: _____

Wife's Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: ____-____-____

Fathers Name: _____

Mothers Name: _____

UCC File No.: _____

Please note that at least one party has to have at least SPC status and an open public record to file these documents into. It is not required that both parties do, but if so they can be filed into record on both sides.

- 3) I understand that the service is solely to draw up the documentation and that the filing of these documents is dependent on me and/or my spouse as Sovereign Filing Solutions does not do so.
- 4) SFS, and its officers, directors, and or sub-contractors do not engage in activities that could be considered the unlawful practice of law by conduct exhibiting or doing and performing services in a court of justice in any mater depending therein throughout the various stages and in conformity with the adopted rules of procedures. It includes legal advice and counsel and the preparation of legal instruments and contracts by which the legal rights are secured although such matter may or may not be depending in a court.
- 5) This agreement shall be governed by and construed in accordance with the laws of the State of Michigan and any dispute arising under or in connection herewith shall first be presented to an independent arbitrator of SFS choosing for resolution and determined by these arbitrators exclusively at an equal split in cost between parties.

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6) The estate of the principal and/or my spouse shall hold harmless and indemnify Sovereign Filing Solutions from all liability for acts done in good faith and not in fraud of the principal.

By my signature below, I agree that I am of sound mind and have full capacity to contract, and that I agree to the aforesaid without qualification on this _____ day of the month _____, AD 201__ to be effective immediately.

Husband's Signature: _____

Print Name: _____

Wife's Signature: _____

Print Name: _____

This is either your Contact info if you are directly reachable, or that of your acting agent that we may readily correspond with.

Acting Agent: _____ (if applicable)

Phone: (____) ____-_____

E-Mail: _____

Address: _____

First Witness Signature

Print Name: _____

Address: _____

Second Witness Signature

Print Name: _____

Address: _____

