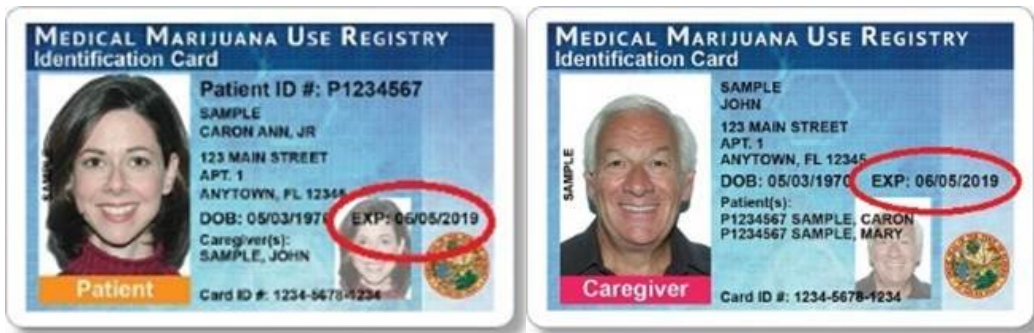




Understanding the Registry Patient and Caregiver Renewal Instructions

To maintain an active Medical Marijuana Use Registry identification card, a patient and/or caregiver must annually submit a renewal application. Electronic renewals are only available 45 days prior to the expiration date on your card. The expiration date of the identification card is printed on the front of the card.



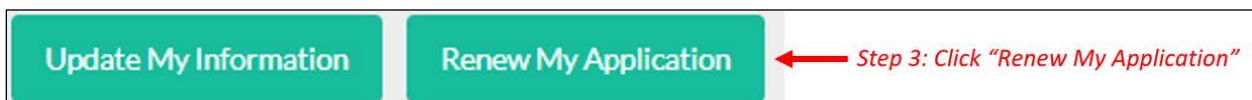
Step 1: Log in to the Medical Marijuana Use Registry <https://mmuregistry.flhealth.gov/>.

*Get help logging into the Medical Marijuana Use Registry by [clicking here](#).

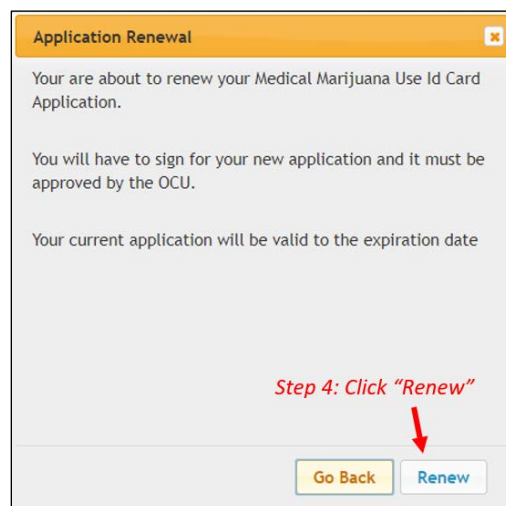
Step 2: Navigate to the “YOUR CARD” menu option at the top of the page to view your current, approved identification card application.



Step 3: Click “Renew My Application” to open a renewal application. The renewal option is only available 45 days prior to the expiration. If your previous card is still valid, this will not affect your ability to obtain Products.



Step 4: Click “Renew” to confirm.



The photograph is pulled directly from your Florida Driver’s License or Florida Identification card. *If the photograph from your Florida Driver’s License or Florida Identification card does not automatically show up, please contact your qualified physician to confirm they have entered your Social Security Number and Date of Birth correctly.*

Step 5: Your Proof of Residence is automatically pulled to your renewal application. If any information has changed from the previous year, click on “Choose File” and supply a new copy of your Florida Driver’s License or Florida Identification card directly from your computer or mobile device.

*For help uploading documents, see our instruction guides for [desktop/laptop](#) or [smartphone/tablet](#).

Proof of Residence

Proof of Residency - All applicants must submit a copy of a valid Florida Driver's License or Florida Identification card. Adult seasonal residents must provide either proof of residency under section 381.986(5)(b)1. or provide a copy of two documents as specified in section 381.986(5)(b)2. Florida Statutes. Minor patients must provide proof of residency as specified in section 381.986(5)(b)3. Florida Statutes. The minor's parent or legal guardian must submit proof that they meet the residency requirement of section 381.986(5)(b)1. Florida Statutes.

[Choose File](#) ← **Step 5: Click “Choose File” to supply a valid FL Driver’s License or FL Identification Card**

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You must supply Proof of Residence to apply
The patient cannot obtain cannabis products until this is completed

Step 6: Electronically sign your application. Scroll to the bottom of the page to the Signature section to type in your first name and last name in the boxes provided.

Step 7: Click on “Submit My Card Application.”

Signature

To sign electronically, enter your first and last name exactly as it is stored in the system.

Type in your first name: ← **Step 6: Type your first name**

Type in your last name: ← **Step 6: Type your last name**

[Submit My Card Application](#) ← **Step 7: Click “Submit My Card Application”**

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You must sign to apply

The undersigned persons certify that the applicant has requested a physical Medical Marijuana Use Registry Identification Card as authorized under section 381.986, Florida Statutes, and Chapter 94-4, F.A.C. The information contained in this application and in any attached exhibits that serves as a basis for card issuance, is accurate, complete, and true to the best of the applicant's knowledge and belief. I understand that knowingly making a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree punishable as provided in sections 775.082 or 775.083, Florida Statutes.

Step 8: Click the button “Click Here to Pay Online,” which will appear after submitting your card application.

Payment Record

Cards cannot be issued or renewed until the Office of Medical Marijuana Use receives a \$75 processing fee.

Pay By Mail:
You may mail in your payment in to the following address:

Florida Department of Health
ATTN: Office of Medical Marijuana Use
PO Box 31313
Tampa, FL 33631-3313

Pay Online:
If you have already sent in your payment in the form of a check or money order, please do not click on the payment link as this will generate duplicate payments against your account.
[Click here to Pay Online](#) ← **Step 8: Click “Click here to Pay Online”**
A \$2.75 convenience fee will be added to each online payment.

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A Payment has not been processed

Step 9: A new window will pop up containing the Bill2Pay interface for you to supply your payment information. Payments by e-check and credit card are accepted. A \$2.75 convenience fee is applied to each online payment.

You can also send your payment by check or money order, made payable to Florida Department of Health. You may mail your payment to the following address:

Florida Department of Health
ATTN: Office of Medical Marijuana Use
P.O. BOX 31313
Tampa, FL 33631-3313

Print the confirmation of the payment for your records after finalizing your payment.

*You can check the status of your application as it is reviewed. [Click here](#) for a guide of the icons on your online application and their meaning.

You may continue to use your current Medical Marijuana Use Registry Identification Card until its expiration date.

You can contact one of the [licensed medical marijuana treatment centers](#) to fill an order.