



PLEASE FILL OUT APPLICATION IN ITS ENTIRETY

NOTARY PUBLIC COMMISSION APPLICATION
Florida Department of State
Notary Commissions and Certifications Section (850) 245-6975

Please mail to:
Cyanotary, LLC
4510 N University Dr
Lauderhill, FL 33351

PERSONAL INFORMATION

Full Name: (Last) (First) (Middle)
Home Address: (Street) (City) (State) (County) (Zip)
Place of Employment: Unemployed Retired
Business Address: (Street) (City) (State) (County) (Zip)
Mail to: Home Business Other Address: (Street/P.O. Box) (City) (State) (Zip)
E-mail Address: (or write "NONE") Sex: Male Female Race: Asian Black or African American Native American or Alaska Native White Other:
Home Phone: (or write "NONE")
Business Phone: (or write "NONE") Extension:
Florida Driver License (or other State of Florida Issued ID): Date of Birth: (Month/Day/Year)
Social Security Number MUST INCLUDE

The disclosure of a Florida notary public applicant's social security number is expressly required by Fla. Stat. §117.01(2) and is imperative for processing notary public commission applications. Please be advised that social security numbers are only used for processing the notary public commission application and are exempt from disclosure pursuant to Fla. Stat. §119.071(5)(a)5.

- 1. Are you a legal resident of Florida? Yes No (If No, you are not eligible to apply for a Florida notary public commission. Legal residency must be maintained throughout the appointment.)
2. Are you a United States citizen? Yes No (If No, you must submit a recorded Declaration of Domicile. Obtain this document from your county courthouse.)
3. Are you a wartime veteran with a disability rating of 50 percent or more? Yes No (If yes, you must submit a written request for the fee reduction and provide proof of exemption.)
4. Are you now or have you ever been commissioned a Notary Public in the State of Florida? Yes No (If No, you, must complete a 3 hour Notary education course and submit a signed certificate of completion. Fla. Stat. §668.50 (11)(b).)

If Yes: / / (Commission expiration date) (Commission number) (Name for which your commission was issued)

- 5. Have you held any professional licenses or commissions (other than Notary Public) in Florida during the past 10 years? Yes No
If Yes, please list:
b. Have any been revoked? Yes No (If Yes, you must submit a written statement about the nature of the action and a copy of the final order from the regulating agency.)
6. Have you been disciplined by a regulatory agency, including the Florida Bar, and including disciplinary action that is confidential? Yes No
(If Yes, you must submit a written statement about the nature of the action and any supporting documentation, such as a copy of the final order from the regulating agency.)
7. Have you been convicted of a felony, or have you had an adjudication of guilt withheld for a felony offense? Yes No
(If Yes, you must submit a written statement of the nature of the offense(s), a copy of the court judgment and sentencing order. If convicted, you must submit a certificate of Restoration of Civil Rights.)
8. Are you currently on probation? Yes No

AFFIDAVIT OF CHARACTER

STATE OF COUNTY

I, am unrelated to and have known (Print or Type Name of Affiant) (Name of Applicant)

for one year or more; and to the best of my knowledge and observation know him or her to be of good character.

My address is (Street) (City) (State) (County) (Zip)

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AFFIDAVIT AND THAT THE FACTS STATED IN IT ARE TRUE.

Home Phone: (or write "NONE") Work Phone: (or write "NONE") Mary's signature (Signature of Affiant) SIGN HERE



OATH OF OFFICE

STATE OF FLORIDA

_____ COUNTY

I do solemnly swear (or affirm) that I will support, protect, and defend the Constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the state; that I have read Chapter 117, Florida Statutes, and any amendments thereto, and know the duties, responsibilities, limitations, and powers of a notary public; and that I will well and faithfully perform the duties of Notary Public, State of Florida, on which I am now about to enter. So help me God.*

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING APPLICATION AND OATH, AND THAT THE FACTS STATED THEREIN ARE TRUE. I accept the Office of Notary Public, State of Florida.

➔ _____ ➔ _____ / _____ / _____
(Official Signature of Applicant) **SIGN HERE** (Please Date)

➔ _____
(Print or Type Name - Name for which your commission will be issued) Must use legal first name, no initial. Acceptable options: Jonathan David Doe, Jon D. Doe, Jonathan Doe, Jonathan D. Doe

*Note: If you affirm, you may omit the words "So help me God." Fla. Stat. §92.52.

MEMORANDUM

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AS A GENERAL MATTER, APPLICATIONS FOR ALL POSITIONS WITHIN STATE GOVERNMENT ARE PUBLIC RECORDS, WHICH MAY BE VIEWED BY ANYONE UPON REQUEST. HOWEVER, THERE ARE SOME EXEMPTIONS FROM THE PUBLIC RECORDS LAW FOR IDENTIFYING INFORMATION RELATING TO CERTAIN ENUMERATED PERSONS, INCLUDING, BUT NOT LIMITED TO, PAST AND PRESENT LAW ENFORCEMENT OFFICERS AND THEIR FAMILIES, VICTIMS OF CERTAIN CRIMES, ETC. (SEE SECTION 119.071, FLORIDA STATUTES) IF YOU BELIEVE AN EXEMPTION FROM THE PUBLIC RECORDS LAW APPLIES TO YOUR FLORIDA NOTARY PUBLIC COMMISSION APPLICATION SUBMISSION, PLEASE OBTAIN A PUBLIC RECORDS EXEMPTION FORM FROM THE FLORIDA DEPARTMENT OF STATE BY ACCESSING THE FOLLOWING LINK AND FOLLOWING THE INSTRUCTIONS ON THE FORM: <https://dos.myflorida.com/sunbiz/other-services/subpoenas-and-public-records-exemption-requests/>:

STATE OF FLORIDA
BOND OF NOTARY PUBLIC

FOR OFFICE USE ONLY
Approved by Department of State:

Secretary of State
Notary Commissions

STATE OF FLORIDA

Bond No. CYN00

KNOW ALL MEN BY THESE PRESENTS, That we,

_____ as Principal, and
(Name of Applicant)

RLI Insurance Company (309) 692-1000
(Imprint Name of Surety Company) (Telephone Number)

as Surety Company, give bond payable to any individual who may be harmed as a result of a breach of duty by said applicant acting in his/her official capacity as Notary Public, in the amount of _____ Dollars (\$ 7,500.00)
Seven Thousand Five Hundred and No/100's
as assurance for the due discharge of the duties of his/her office of Notary Public and we do bind ourselves, and each of our heirs, executors and administrators, jointly and severally.

Applicant was, on the date of issuance of commission, bonded as a Notary Public in and for the State of Florida, to hold office for the term of four years in accordance with the Constitution and Laws of this State.

Now, therefore, if said applicant shall faithfully discharge the duties of the office of Notary Public, as prescribed by law, then this obligation shall be void.



(Signature of Applicant)
Signed and sealed this _____ day of _____.

Barton W. Davis Attorney in Fact



(Affix Surety Seal)

RLI Insurance Company
(Name of Surety Company)
P.O. Box 3967
Peoria, IL 61612
(Address of Surety Company)

Cynanotary, LLC
(Name of Bonding Agency or Company)
4510 N University Dr, Lauderhill, FL 33351
(Address of Bonding Agency or Company)

By **X** _____
(Signature of Florida Licensed Agent)

W442696
(Florida Licensed Agent Number)

Cynthia Alexander
(Printed name of Florida Licensed Agent)

Section 817.234(1)(b), F.S. "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony in the third degree."

This bond shall be for Seven Thousand Five Hundred and No/100's Dollars (\$ 7,500.00).
After execution by surety company, the bond must be submitted to the Department of State for approval and filing before issuance of the notary public commission.



4510 N University Dr,
Lauderhill, FL 33351
954-977-9905
notary@cynanotary.com
www.cynanotary.com

Woman Owned Small Business (WOSB)
Disadvantaged Business Enterprise (DBE)
Airport Concession DBE (ACDBE)
Minority/Women Business Enterprise (M/WBE)
Small Business Enterprise (SBE)
County Business Enterprise (CBE)

Notary Application Checklist

IMPORTANT!! The Department of State requires a hard copy of your ORIGINAL PAPERWORK.

- Initials in the area for the Oath of Office is NOT accepted. A signature with a nickname or short name i.e. Joe for Joseph or Rick for Richard is acceptable. State WILL NOT accept electronic signatures.
- Your certificate and stamp will be mail to the address selected in your application. If it is incomplete and the items are lost, we will regretfully have to pass the cost of a new stamp and S&H to you.
- If you are NOT a US Citizen, you must also include a RECORDED DECLARATION OF DOMICILE.
- Affidavit of Character CANNOT be you. It MUST be the information and signature of someone who's known you for more than a year but not family.

****Incomplete applications could cause your notary appointment to be delayed.****

NEW NOTARIES: Mail to *Cynanotary at 4510 N University Dr, Lauderdale FL 33351*

- ORIGINAL APPLICATION. Sign and date. This must be fully completed.
- SIGNED BOND APPLICATION. DO NOT date.
- SIGNED CERTIFICATE OF COMPLETION
- COPY OF THE FRONT AND BACK OF YOUR **VALID** FLORIDA DRIVER'S LICENSE OR FLORIDA ID
- NOTARY INVOICE/ORDER FORM/PAYMENT RECEIPT

RENEWING NOTARIES: Mail to *Cynanotary at 4510 N University Dr, Lauderdale FL 33351*

- ORIGINAL APPLICATION. Sign and date. This must be fully completed.
- SIGNED BOND APPLICATION. DO NOT date.
- COPY OF THE FRONT AND BACK OF YOUR **VALID** FLORIDA DRIVER'S LICENSE OR FLORIDA ID
- NOTARY INVOICE/ORDER FORM/PAYMENT RECEIPT

PAYMENT: Credit Card, Check, or Money Order. Make checks and money order payable to **Cynanotary**.

IMPORTANT! If you answer YES to Questions 5(b), 6, 7 or 8 on the application, you *must* include an additional \$40 in cashier's check or money order for non-refundable processing fee. Your application will be sent to the Governor for his decision.




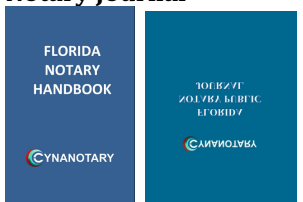
All returned checks will incur an additional charge of \$30 for Cynanotary Processing Fee.

ORDER FORM

Standard Notary Package includes:

- State fee
- \$7500 Notary Bond
- Self-Inking Notary Stamp (choose your case color)
- Commision Certificate

ONLY \$89 (plus S&H)

<p>Self-Inking Notary Stamp (circle your choice) A perfect extra for the office. Select a case color: Black; White; Grey; Red; Green; Yellow; Blue; Fuchsia; Orange; Purple</p> 	<p>Portable Stamp (circle your choice) Perfect for On-The-Go Select a case color: Black; White; Grey; Red; Green; Blue; Fuchsia</p> 
<p>Embosser Seal</p>  <p>Produces a perfect raise imprint of your name. We order this with only your name, so it doesn't have to be replaced every 4 years.</p>	<p>Notary Handbook & Notary Journal</p>  <p>This handy Handbook includes information for Duties of a Notary Public, performing Notarizations, Florida Statutes and more.</p> <p>Consisting of 200 entries to securely record your notarizations, the Cynanotary Notary Journal also includes abbreviations and examples on filling it out.</p>
<p>RON (Remote Online Notary) Complete notarizations conveniently from the comfort of your home, work more efficiently, serve more customers, and reduces your expenses like printing and travel. 4 Year package, only \$130 – includes 2 Hr RON class, 25k E&O, 25k RON Bond</p> <p>Visit www.cynanotary.com for more information.</p>	

ITEM	PRICE	7% TAX	TOTAL
Standard Notary Package			
Stamp Case Color _____	\$89.00	N/A	
ERRORS & OMISSION INSURANCE			
\$5,000 4 Year Policy	\$14.00	N/A	
\$10,000 4 Year Policy	\$29.00	N/A	
\$15,000 \$ Year Policy	\$54.00	N/A	
\$25,000 \$ Year Policy	\$60.00	N/A	
\$30,000 \$ Year Policy	\$74.00	N/A	
SUPPLIES			
Extra Rectangular Self-Inking Stamp – Choose Stamp color	\$19.95	+\$1.40	
Portable Notary Stamp – Choose Stamp Color	\$20.95	+\$1.47	
Personalized Notary Embosser	\$29.95	+\$2.10	
Florida Notary Handbook	\$13.95	+\$0.98	
Florida Notary Journal	\$13.95	+\$0.98	
<i>Notary Bonds and Notary Errors and Omissions are underwritten by RLI Insurance Company.</i>		SUBTOTAL	
<i>If we cannot process your order within 12 months due to lack of information, we are no longer obliged to fulfil your order and payment is non-refundable.</i>		S&H	\$9.00
		TOTAL	

Please make Check or Money Order payable to Cynanotary.
 I hereby authorize "Cynanotary" to charge my VISA/MASTERCARD in the amount of \$_____. I agree to pay the total amount by signing below.

 Cardholder Name

 Credit Card #

 Authorized Signature

 Full Billing Address

 Expiration Date

 Date Signed

 CVV

 Phone Number

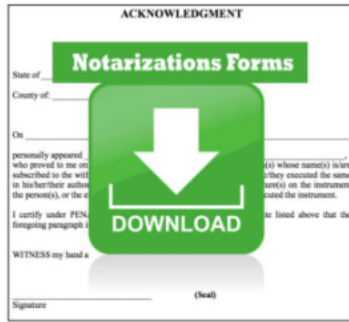
Showing all 7 results

Default sorting



New/Renew Notary
\$89.00

Select options



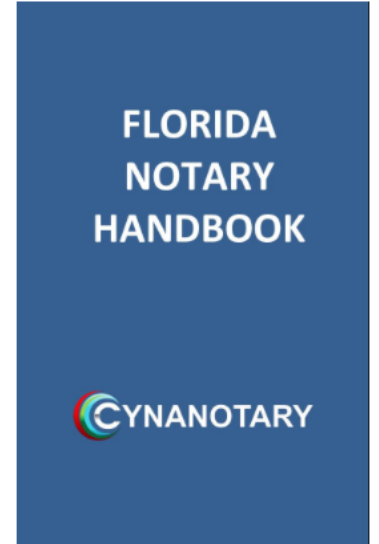
Notarization Forms – Download
\$9.99

Add to cart



Notary Embosser Seal
\$29.95

Add to cart



Notary Handbook
\$13.95

Add to cart



Notary Journal
~~\$19.95~~ **\$13.95**



Portable Pocket Notary Stamp
\$20.95

Select options



Self-Inking Notary Stamp
\$19.95

Select options