



## Application Instructions

Failure to follow these instructions will delay your new or renewing notary commission by up to 10 weeks. New notaries\*, please include your notary education certificate.

Please review your application carefully. If a correction needs to be made, you may line through it and neatly correct it. There can be no "white out" anywhere on the application or bond.

- The state of Florida **requires your FULL NAME** on the first line of the application. When you **PRINT & SIGN** your name in the Oath of Office section at the top of page two, your name **MUST** appear as follows. You may use an initial for your first or middle name but not for both: For example, John R. Doe or J. Richard Doe are acceptable but not J.R. Doe, J. Doe or R. Doe. However, a signature with a nickname or shortened name is acceptable (Joe for Joseph/Sue for Susan).  
Your name on your notary commission certificate and notary stamp/seal will appear as you have signed and printed on the Oath of Office. This will be your official signature on file with the state of Florida and it is how you must sign when you notarize a document. Your signature must be the same on the notary application, bond and notary education certificate.
- **You must have someone who knows you** sign the "Affidavit of Character" section. This individual is attesting to your character so they may not be family members. (Many applicants have co-workers serve as an Affiant. An affiant is the person who is your character witness.)
- You must sign the State of Florida Bond of Notary Public by the ✓ on the "Signature of Applicant" line.
- **Return** your Notary Application, Oath, Bond, and Notary Education Certificate (if required) to us via US mail or overnight courier service. We are required to have the original forms with "your wet" ink signature.

Thank you for your business.

**Please mail the application, oath, bond and notary education certificate (if a new notary) to:**

Huckleberry Notary Bonding, Inc.  
225 E. Robinson St Ste 570  
Orlando, Florida 32801

\*New Notaries: Include your notary education certificate with your signed application, oath and bond. Please do not mail us your application without the notary education certificate.



Since 1964

225 East Robinson St  
Suite 570  
Orlando FL, 32801

☎ : (800) 422-1555  
✉ : info@notaries.com  
🌐 : www.notaries.com



**Your immediate attention is required because your Florida notary is about to expire.**

Huckleberry Notary Bonding offers you the highest quality, four-year notary renewal package **for only \$109\***. This includes \$40.00\* for the state required notary bond, state filing fees, your notary certificate suitable for framing and a lifetime-guaranteed, self-inking notary stamp. No other company offers the highest quality products at this low price. Do not be misled by the numerous low-end products on the market. No one has been bonding and serving notaries longer than Huckleberry Notary Bonding. We've been in business for over 50 years and our products and services speak for themselves. Plus, a notary through Huckleberry lasts for 4 years. You won't have to spend another penny until you renew in 4 years.

It's easy! Complete the application/bond and return them to us with your payment. Then, let us do the rest. Because we are officially approved by the Florida Department of State to file your application electronically, we can promise fast turnaround and excellent customer service. Your self-inking notary stamp is manufactured in our own in-house stamp division ensuring a high quality product and timely delivery.

Complete the order form below along with your application and mail it to: 225 E. Robinson St, Ste 570 Orlando, FL 32801 Don't wait! Renew today!

Questions? Call our Notary Helpline at **1-800-422-1555** and remember to visit our website [www.notaries.com](http://www.notaries.com).

- Gray
- Blue
- Red
- Pink
- White
- Mango
- Green
- Lilac
- Neon Pink
- Neon Orange
- Neon Green
- Black

ORDER FORM	PRICE	
Notary Renewal Package	\$109	\$109
Recommended Errors & Omissions Insurance Upgrades - Choose one		
\$10,000 Coverage	+\$40	
\$15,000 Coverage	+\$50	
\$20,000 Coverage	+\$60	
\$25,000 Coverage	+\$70	
\$30,000 Coverage	+\$80	
\$50,000 Coverage	+\$110	
\$100,000 Coverage	+\$170	
	Subtotal	
	Sales Tax	+\$7.09
	Shipping & Handling	+\$12.95
	Amount Enclosed	

**Choose Your Stamp Color:**

- Gray  Blue  Red  Pink  White  Mango  Green
- Lilac  Neon Pink  Neon Orange  Neon Green  Black

If you do not choose a color for your stamp, you will receive gray.

**Payment Options:**

- Check or Money Order Enclosed (made payable to Huckleberry Notary)

Signature:

Email Address:

CC Number:

Expires:

Security Code:

Daytime Phone Number:

\*All prices are for a four (4) Year notary term as required by law.



# NOTARY PUBLIC COMMISSION APPLICATION

Florida Department of State  
Notary Commissions and Certifications Section



Mail to:  
Huckleberry Notary Bonding, Inc.  
225 E. Robinson Street Suite 570  
Orlando, FL 32801

## 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")

Home Phone: \_\_\_\_\_  
(or write "NONE")

Business Phone: \_\_\_\_\_ Extension: \_\_\_\_\_  
(or write "NONE")

Florida Driver License (or other State of Florida Issued ID): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Month/Day/Year)

Social Security Number \_\_\_\_\_

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.

- 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.)
- 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.)
- 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.)
- 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 at [www.notaries.com](http://www.notaries.com) 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)

- 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: \_\_\_\_\_  
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.)
- 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.)
- 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.)
- 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: (\_\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_  
(or write "NONE") (or write "NONE") (Signature of Affiant)

**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 SET FORTH THEREIN ARE TRUE. I accept the Office of Notary Public, State of Florida.



\_\_\_\_\_  
(Official Signature of Applicant)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Date)

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

**(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

**MEMORANDUM**

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

Secretary of State - Notary Commission and Certification Section

FOR OFFICE USE ONLY  
Approved by Department of State

## State of Florida

KNOW ALL MEN BY THESE PRESENTS, that we,

[Redacted]

Applicant's Name

as Principal, and

**TRAVELERS CASUALTY & SURETY COMPANY OF AMERICA**

**800-422-1555**

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 a notary public, in the amount of Seven Thousand, Five Hundred Dollars (\$7,500) 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.

[Redacted]

Signature of Applicant

Signed and sealed this [ ] day of [ ] 20 [ ]

**TRAVELERS CASUALTY & SURETY COMPANY OF AMERICA**

Name of Surety Company

**Hartford, CT**

Address of Surety Company

**HUCKLEBERRY NOTARY BONDING INC.**

Name of Bonding Agency or Company

**225 E Robinson St Ste 570 Orlando, FL 32801**

Address of Bonding Agency or Company

*Derrick Huckleberry*

Signature of Licensed Resident Agent

**A124903**

Identification Number of Licensed Resident Agent

**J. DERRICK HUCKLEBERRY**

Type Name of Licensed Resident 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 DOLLARS (\$7,500). After execution by Surety Company, the bond must be submitted to the Department of State for approval and filing before issuance of the public commission.