



# Ohio Secretary of State

## Office of the Notary Commission

### Application for Amendment of Notary Public Information

**Submit application via U.S. Mail:**  
Notary Commission  
P.O. Box 1658  
Columbus, Ohio 43216

**OR**

**Submit application in-person:**  
Client Service Center  
180 East Broad St., Suite 103  
Columbus, Ohio 43215

**Choose the block(s) that applies to the amendment desired:**  
(Please make Check or Money Order payable to SOS/Notary Commission)

- Change of Name - \$2.00 (Includes revised commission)
- Change of Address – No fee (no new certificate will be sent)
- Duplicate - \$2.00
- Resignation of Commission – No fee

1. Current Name on Commission			
2. New Name for Commission			
3. Current Address on Record	City	State	Zip Code
4. New Address for Record	City	State	Zip Code
5. Commission Number	6. Expiration Date		
7. Contact Telephone Number	8. County of Residence		
9. Email Address (optional)	10. Effective Date of Resignation		

### DO NOT NOTARIZE YOUR OWN SIGNATURE

I attest to the accuracy of the amended information provided

11. Signature of Applicant \_\_\_\_\_

Sworn to and subscribed in my presence this \_\_\_\_ day of \_\_\_\_\_ 20\_\_

Notary Public Signature \_\_\_\_\_

Commission Expiration Date \_\_\_\_\_

**Place Official Seal or Stamp in Box Provided**

## Instructions for Amending Notary Public Information

**For every amendment type (name, address, or resignation), fill in the following boxes:**

### **Fill in Change of Name box**

**In box 1:** Provide your current name as it shows on the most recent commission and Notary Commission database.

**In box 2:** Provide your new name, as it will appear on the revised commission and the Notary Commission database.

### **Change of Address**

If the change of address places the notary in another Ohio county, the notary public must record the amended commission in their new county of residence. If your current commission has been lost or misplaced; you will need a duplicate commission (\$2.00) to present to your new county to be recorded.

### **Fill in the Change of Address box**

**In box 3:** Provide your current address as it shows on the Notary Commission Database

**In box 4:** Provide your new address

**In box 5:** Provide your commission number

**In box 6:** Provide your expiration date on the current commission.

**In box 7:** Provide your contact number

**In box 8:** Provide your county of residence

**In box 9:** Provide your email address in case the application has an error or is denied

### **Fill in the Resignation box**

**In box 10:** Provide the effective date of resignation from notarial service

**In box 11: Notarization – This section must be signed by notary and notarized by another notary.**

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To guarantee the authority of the applicant to submit this amendment, this office requires that all amended applications be notarized:

- Signature of the Applicant
- Expiration Date of the Notary's Public Commission
- Date of the notarization
- Notary's Public Seal or Stamp
- Signature of the Notary Public