**FLORIDA NOTARIAL CERTIFICATES**

**For an acknowledgment in an individual capacity*:***

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of person acknowledging.)

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For an acknowledgment in a representative capacity:

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of person) as (type of authority…e.g., officer, trustee, attorney in fact) for (name of party on behalf of whom instrument was executed).

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For an individual acting as principal by an attorney in fact:

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of attorney in fact) as attorney in fact, who is personally known to me or who has produced (type of identification) as identification on behalf of (name of principal signer.)

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For a corporation:

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of officer or agent, title of officer or agent) of (name of corporation acknowledging, a (state or place of incorporation) corporation, on behalf of the corporation.

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

**For a partnership:**

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of acknowledging partner or agent) partner (or agent), on behalf of (name of partnership), a partnership.

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

# For an acknowledgment in an individual capacity marking with an “X”*:*

John X Doe

Signature of Witness His Mark

Print Name and Address

Signature of Witness

Print Name and Address

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of person acknowledging), who signed by way of mark in the presence of these witnesses.

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For a Person with a Disability Who Directs Another to Sign (For an Acknowledgment)

John X Doe

Signature of Witness His Mark

Print Name and Address

Signature of Witness

Print Name and Address

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this day of 20XX, by (name of person disability), and subscribed by (name of designated person) in the presence of these witnesses at the direction of (name of person with disability).

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For an Oath or Affirmations:

STATE OF FLORIDA COUNTY OF

Sworn to (or affirmed) and subscribed before me this day of 20XX , by (name of person making statement).

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For an Oath or Affirmations for one marking with an “X”:

John X Doe

Signature of Witness His Mark

Print Name and Address

Signature of Witness

Print Name and Address

STATE OF FLORIDA COUNTY OF

Sworn to (or affirmed) and subscribed before me this day of 20XX , by (name of person making statement) who signed by way of mark in the presence of these witnesses.

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## For a Person with a Disability Who Directs Another to Sign (For an Oath)

John X Doe

Signature of Witness His Mark

Print Name and Address

Signature of Witness

Print Name and Address

STATE OF FLORIDA COUNTY OF

Sworn to (or affirmed) and subscribed before me this day of 20XX (name of person disability) and subscribed by (name of designated person) in the presence of these witnesses at the direction of (name of person with disability).

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced:

## Certifying to a Non-Recordable Document:

STATE OF FLORIDA COUNTY OF

On this day of 20XX, I attest that the preceding or attached document is a true, exact, complete, and unaltered photocopy made by me of (description of document) presented to me by the document’s custodian, , and, to the best of my knowledge, that the photocopied document is neither a vital record nor a public record, certified copies of which are available from an official source other than a notary public.

(Seal) Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known:

OR Produced Identification: Type of Identification Produced: