



# Invoice/Receipt



## REMOTE ONLINE NOTARY PUBLIC (RON)

According with Chapter 117, Florida Statutes, and Chapter 1N-7.001, Florida Administrative Code, this law authorizes Florida notaries to perform online remote notarizations using an audio-video technology provider in compliance with the law, after the completion of an application and training requirements.

REMOTE ONLINE NOTARY PACKAGE	
_____	\$25,000 RON Bond for 4 years = \$60.00
_____	\$25,000 RON Bond for 3 year left on your Commission = \$45.00
_____	\$25,000 RON Bond for 2 year left on your Commission = \$30.00
_____	\$25,000 RON Bond for 1 year left on your Commission = \$25.00
_____	\$25,000 RON E&O Insurance = \$50.00
_____	Dept. of State - Registration Fee = \$10.00
_____	Processing Fee (INCLUDING S&H) = \$15.00
	<b>Total \$ _____</b>

Please fill out the following information:

Commission Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

Print as your name appears on your commission

Home Address (City, State, and Zip Code) \_\_\_\_\_ Mail to Home

Place of Employment and Business Address (City, State, and Zip Code) If Applicable \_\_\_\_\_ Mail to Business

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

X \_\_\_\_\_ Date: \_\_\_\_\_

Sign as your name appears on your commission

## ADDITIONAL NOTARY SUPPLIES

Self-Inking Rectangular Stamp	\$20.00	_____	PLUS	Choose your Case Color:	\$6.00	_____
			→	Pink Fuchsia Blue Red		
Self-Inking Round Stamp	\$30.00	_____		Pre-Inked Pocket Stamp	\$36.00	_____
Notary Public Journal	\$20.00	_____		Duplicate Notary Certificate	\$25.00	_____
Embosser Seal	\$36.00	_____		Wood Stamp	\$15.00	_____

TOTAL AMOUNT ENCLOSED \$ \_\_\_\_\_

PAYMENT OPTIONS: CHECK  MONEY ORDER  CREDIT CARD

Make your check or money order payable to Aaron Notary Appointment Services, Inc.

MAIL TO: Aaron Notary Appointment Services, Inc. PO Box 69-3002 Miami, FL 33269-3002

I hereby authorize "Aaron Notary Appointment Services, Inc." to charge my VISA/MASTERCARD/AMEX in the amount of \$ \_\_\_\_\_. By signing below, I agree to pay the above amount.

\_\_\_\_\_  
Name on Credit Card Full address (as listed on your Credit Card bill including Zip Code)

\_\_\_\_\_  
Credit Card # Expiration Date CVV2 Code

\_\_\_\_\_  
Authorized Signature Date Signed

CREDIT CARD CHARGEBACK WILL NOT BE ALLOWED ONCE YOUR APPLICATION IS SUBMITTED TO THE STATE.

# Application Registration for Online Notary Public

Mail to: Florida Department of State, Division of Corporations, ATTN: Notaries PO Box 6327, Tallahassee, FL 32314

In person or courier service to: 2415 North Monroe St., Suite 810, Tallahassee FL 32303

## PERSONAL INFORMATION

Full name: \_\_\_\_\_  
(Last) (First) (Middle)

Name as Commissioned: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street) (City) (State) (County) (Zip)

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Florida Notary Commission Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Florida Notary ID: \_\_\_\_\_

Civil-Law Notary- Florida Bar Number: \_\_\_\_\_ Date appointed: \_\_\_\_\_

Commissioner of Deeds Expiration date: \_\_\_\_\_

I will use the following RON Service Provider in compliance with Florida Law: \_\_\_\_\_

The applicant confirms:

1. The technology and processes they have chosen for use in performing online notarizations must satisfy the requirements set forth in Ch. 117, Florida Statutes, and Ch. 1N-7, Florida Administrative Code.
2. They have submitted evidence of obtaining a bond in the amount of \$25,000.
3. They have submitted evidence of Errors and Omission (E&O) insurance policy in the minimum amount of \$25,000.
4. They have submitted a copy of their commission or appointment as a Notary Public, Civil-Law Notary, or Commissioner of Deeds.
5. They have submitted payment of registration fee of \$10 by check payable to the Florida Department of State.
6. They understand that suspension, revocation, expiration, or termination of the applicant's Notary Public commission or appointment as a Civil-Law Notary, or Commissioner of Deeds immediately deactivates an Online Notary Public's registration.
7. They have submitted evidence of completing a classroom or online course covering the duties, obligations and technology requirements for serving as online notary public.

**Under penalties of perjury**, I declare that I have read the foregoing Registration for Online Notary and that the facts stated in it are true.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to, affirmed, and subscribed before me by means of ( ) physical presence or ( ) online notarization, this \_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification.

[PLACE NOTARIAL SEAL]

Notary Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Notary Public, State of Florida

My Commission Expires: \_\_\_\_\_

STATE OF FLORIDA BOND OF  
NOTARY PUBLIC OR  
ONLINE NOTARY PUBLIC

Secretary of State  
Notary Commissions  
Form: DOC IN-7, R. 1N-7.001, F.A.C, effective 01/2020

FOR OFFICE USE ONLY  
Approved by Department of State:

STATE OF FLORIDA

Bond No.: \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS, That we;

\_\_\_\_\_ as Principal, and  
(Name of Registrant)  
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 application acting in his/her official capacity as a Notary Public OR Online Notary Public in the amount of Twenty-Five Thousand Dollars (\$25,000) as assurance for the due discharge of the duties his/her office of Notary Public OR Online Notary Public and we do bind ourselves, and each of our heirs, executors and administrators, jointly and severally. Liability under this bond is limited of \$7,500 for acts performed in the capacity of a Notary Public pursuant to section 117.01(7)(a), Florida Statutes.

Applicant was, on the date of issuance of Notary Public commission, bonded in and for the State of Florida as a Notary Public 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 a Notary Public or Online Notary Public, as prescribed by law, then this obligation shall be void.

By: \_\_\_\_\_  
(Signature of Registrant)

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_



RLI Insurance Company  
(Name of Surety Company)  
P.O. Box 3967, Peoria, IL 61612  
(Address of Surety Company)  
Aaron Notary Appointment Services Inc.  
(Name of Bonding Agency or Company)  
P.O. Box 69-3002, Miami, FL 33269-3002  
(Address of Bonding Agency or Company)

By: \_\_\_\_\_  
(Signature of Florida Licensed Agent)  
A180637  
(Florida Licensed Agent Number)  
Jeffrey Minkoff  
(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 Twenty-Five Thousand Dollars (\$25,000).  
After execution by surety company, the bond must be submitted to the Department of State for approval and filing before issuance of the registration of online notary.



**"THE PROFESSIONAL FLORIDA NOTARY PUBLIC APPOINTMENT COMPANY"**

**INSTRUCTIONS**

1. Please fill the Registration for Online Notary Public (DOC 1N-7, R. 1N-7.002, F.A.C.) and bond. Please include the **Company's Name of the RON Service Provider** that you will use in compliance with Florida Law. (required)
2. After printing out the registration form. Please sign the registration form and have it notarized by another notary public.
3. Sign and Date the Bond.
4. Please mail your Certificate of Completion, Notarized Registration Form, a copy of your current Notary Commission Certificate and Bond along with your Invoice and payment to **Aaron Notary Appointment Services Inc., PO Box 69-3002 Miami FL 3326-3002**

**WHITE-OUTS AND CROSS-OUTS ARE NOT ALLOWED ON THE REGISTRATION FORM**  
**PLEASE PROVIDE YOUR EMAIL ADDRESS (In the event that we need additional information)**

**\* Please Note:**

- Once your registration is approved by the state, we will send you an email notification with important information. (Please make sure to check your spam folder)
- A copy of your approved registration form will be mailed back to you for your records.
- We will provide you with a link where you can verify your name as an Approved Remote Online Notary Public in the State of Florida.

*Fla. Stat. § 117.265 (5)* An online notary public may change his or her RON service provider or providers from time to time but shall notify the Department of State of such change within 30 days thereafter.

**MAIL YOUR CERTIFICATE OF COMPLETION, NOTARIZED**  
**REGISTRATION FORM, A COPY OF YOUR CURRENT NOTARY**  
**COMMISSION CERTIFICATE AND BOND ALONG WITH YOUR INVOICE**  
**AND PAYMENT TO:**

**Aaron Notary Appointment Services, Inc.**  
**P.O. BOX 69-3002**  
**MIAMI, FL 33269-3002**