

Mail or Fax completed form to:
Office of the Great Seal
7064 Crowner Drive
Lansing, MI 48918
Email: MDOS-Notary@Michigan.gov
Fax: 517-241-1820



Information Change
 (NO FEE)

**MICHIGAN DEPARTMENT OF STATE
 OFFICE OF THE GREAT SEAL**

ELECTRONIC & REMOTE NOTARY REQUEST FOR CHANGE

PLEASE **PRINT** OR **TYPE** INFORMATION REQUESTED
 (COMPLETE ALL SECTIONS)

DRIVER'S LICENSE OR STATE ID #	ISSUING STATE
NAME AS CURRENTLY COMMISSIONED	
MY CURRENT COMMISSION EXPIRATION DATE (MONTH/DAY/YEAR)	
FULL NAME (FIRST/MIDDLE/LAST)	
EMAIL ADDRESS	
ELECTRONIC AND REMOTE NOTARY – Identify the approved system you are onboarded with. Please also provide documentation of vendor sign-up when submitting form to office for processing.	
I understand that all information contained on this application is subject to disclosure under the Freedom of Information Act, 1976 PA 442, MCL 15.231, et seq.	
SIGNATURE – Sign your name as it appears on file for your current notary commission.	DATE