

Mail completed form to:
Office of the Great Seal
7064 Crowner Drive
Lansing, MI 48918



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 | |
| 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 |