



Notary Information Change - Name/Signature

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200

Fax: (503) 986-2300

CURRENT COMMISSION NUMBER: _____

CURRENT COMMISSION NAME: _____

PLEASE CHANGE MY OFFICIAL NOTARY:

- COMMISSION NAME (If you select commission name change, you will receive a new certificate of authorization to have a new stamp made. DO NOT notarize until you have your new stamp.)
- COMMISSION SIGNATURE
- REMOTE ONLINE NOTARIZATION SIGNATURE

Need to change your public records address and/or email address? Provide your information below.

PUBLIC RECORDS ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL ADDRESS: _____

(Please complete the oath below and have it witnessed by a notary public.)

I HEREBY SWEAR/AFFIRM THAT MY LEGAL NAME IS _____

THIS IS MY LEGAL SIGNATURE: _____

STATE OF OREGON

COUNTY OF _____

SUBSCRIBED AND SWORN AFFIRMED BEFORE ME BY _____ ON _____, 20____.

WITNESSING NOTARY STAMP:

NOTARY PUBLIC OF OREGON SIGNATURE

[NOTE TO WITNESSING NOTARY: THE NAME AND SIGNATURE IN THE CERTIFICATE ABOVE MUST BE THE SAME AS IN THE IDENTIFICATION YOU RELY ON]