



## FLORIDA DEPARTMENT *of* STATE

### Apostille or Notarial Certification Request

Requestor's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Country the document is being authenticated for: \_\_\_\_\_

Total number of documents being apostilled or certified: \_\_\_\_\_

**Fees:**

- \$10.00 per document; **OR**
- \$20.00 per document, for documents certified by any Clerk of the Court for any county in Florida when requesting an apostille. (\$10 for Apostille; \$10 for Certificate of Incumbency)

**Submit form, document(s), prepaid self-addressed envelope or air bill, and payment(s) to:**

**Mailing Address**

Division of Corporations  
ATTN: Apostille Section  
P.O. Box 6800  
Tallahassee, FL 32314-6800

**Division of Corporations  
The Centre Of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, Florida 32303  
850.245.6945 • 850.245.6893(Fax) • Sunbiz.org**

