Electronic document copy certification

F.S. 117.05(12)(a), (c) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

On this _____ day of _____, _____ (year), I attest that the preceding or attached document is a true, exact, complete, and unaltered (select one):
[ ] copy of a tangible or an electronic record presented to me by the document's custodian; or
[ ] printout made by me from such record.
If a printout, I further attest that, at the time of printing, no security features, if any, present on the electronic record, indicated that the record had been altered since execution.

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Make or supervise the copy / printing. Excludes vital records and public records available from the custodian.