State of South Dakota

Notary Public Change Form Revised 20250701

Submit Change Form to:

South Dakota Secretary of State 500 E Capitol Avenue, Pierre, SD 57501

Notary Name (Print EXACTLY as found on current seal imprint)							
Additional name(s) commissioned under							
Commission Date							
County			Date of Birth				
Email (Optional)			Phone Number				
Change Seal (Mark all boxes that apply)							
I would like to use the NEW notary seal imprint shown. I intend to use BOTH the new seal and my current notary seal. When I renew my commission, I am aware I will need to place an imprint of BOTH notary seals on the application. I would like to DISCONTINUE the use if my current notary seal on file and use the imprint of the new notary seal shown.							
Change Name							
I would like to CHANGE MY NAME on my Notary Public commission and will use the imprint of the new notary seal above.							
Date of Name Change New Name (As it appears on new notary seal)							
Change By:		Court Order				Marriage	
Change Address							
I would like to CHANGE MY PHYSICAL ADDRESS on file to the address below (cannot be a business address)							
Physical Address	City			State	Zip		County
I would like to CHANGE MY MAILING ADDRESS on file to the address below (only if different than physical address)							
Mailing Address	City			State	Zip		County
E-Notary Services							
I would like to ADD E-NOTARY SERVICES to my notary public commission (You must also provide an electronic image of your e-seal)							
Provide the tamper-evident notarization vendor(s). (If additional space is needed, please provide an additional sheet)							
I would like to REMOVE a tamper-evident notarization vendor (please list the vendor to be removed below)							
I would like to <u>ADD</u> another tamper-evident notarization vendor (please list the new vendor(s) to be used below)							
For Internal Office Use Only							
File Date	Comn	nission Date				Notary ID	