

**FLORIDA SHORT-FORM PARTNERSHIP ACKNOWLEDGMENT**

**F.S. 695.25 — Effective January 1, 2020**

State of Florida

County of \_\_\_\_\_



The foregoing instrument was acknowledged before me by means of

☐ Physical Presence, — **OR** —

☐ Online Notarization,

this \_\_\_\_\_, by  
*Date*

\_\_\_\_\_  
*Name of Acknowledging Partner or Agent*

partner (or agent) on behalf of

\_\_\_\_\_, a partnership.  
*Name of Partnership*

He/She:

☐ is personally known to me — **OR** —

☐ has produced

\_\_\_\_\_ as identification.  
*Type of Identification*

\_\_\_\_\_  
*Signature of Notary Public*

\_\_\_\_\_  
*Name of Notary Typed, Printed or Stamped*

Notary Public — State of Florida

*Place Notary Seal and/or Stamp Above*

Commission No. \_\_\_\_\_

**OPTIONAL**

*Completing this information can deter alteration of the document or  
fraudulent reattachment of this form to an unintended document.*

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