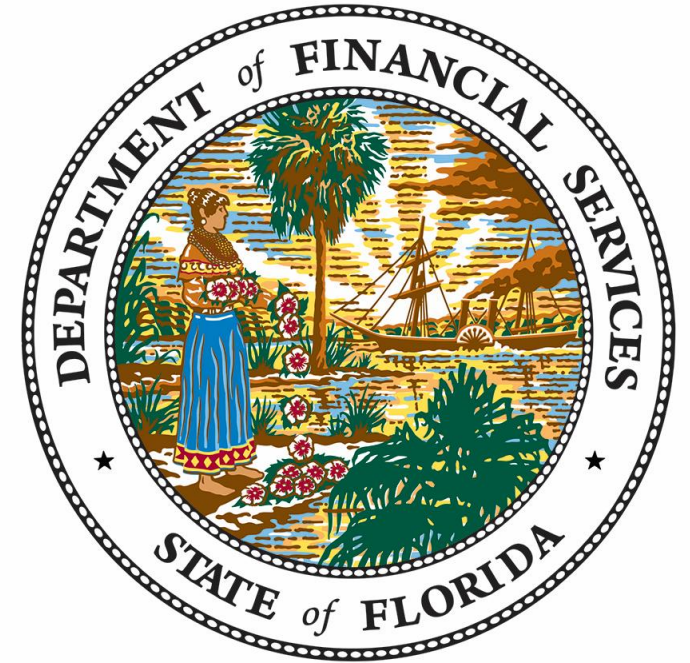
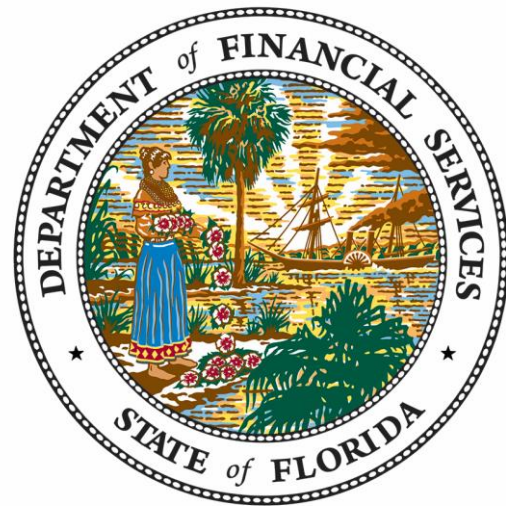


**DEPARTMENT OF FINANCIAL
SERVICES
DIVISION OF INSURANCE
AGENT AND AGENCY SERVICES**

***Electronic Filing of Bail Bond Agency
Business Name and Designation or
Deletion of Primary Bail Bond Agent***

User Guide





Overview

- This user guide will walk you through the setup of a secure **MyProfile** account via the internet on the Department of Financial Services' website.
- How to designate and delete a bail bond agent.
- Add Owner/Officer
- Add locations
- Delete locations
- Change an address
- Login information changes
- Email Address Change
- Third-Party Privileges

WHY DID THE DEPARTMENT MAKE THIS CHANGE?

Purpose

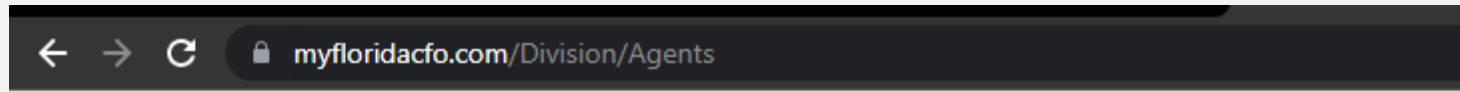
- As the Department strives to go paperless, the submission of electronic filings is convenient and will allow licensees to update their individual and agency information via their secure MyProfile accounts in real time online.
- This allows the consumer buying public to find and locate bail bond agents and agencies on the Department's Licensee Search. This is something that they could not do previously.
- Also, now jail and courts will be able to verify that a bail bond agent and agency is registered with the Department after they have designated a primary bail bond agent for a location.

CREATING A MYPROFILE ACCCOUNT

Prerequisites

- Computer
- Printer (if you wish to print anything)
- Internet or Wi-Fi connection
- Must hold a valid bail bond license with the Department of Financial Services
- Must have and active and valid bail bond appointment

- To create a new **MyProfile** account
- Enter the following webpage in your browser: <https://myfloridacfo.com/division/agents>
- Click “Enter” or “Return” on your keyboard



Click on **MyProfile**
on the left button
at the bottom
of the page

Bureau of Licensing

(850) 413-3137

Bureau of Investigation

(850) 413-3136



MYPROFILE

EAPPOINT

LICENSEE SEARCH

INSURER SEARCH



[Locate](#) | [Help](#) | [FAQ](#)

Welcome to **MyProfile.**

MyProfile is the online portal for the Florida Department of Financial Services' Bureau of Licensing.

MyProfile allows you to:

- View your license(s), registration(s), appointment(s), continuing education information, and deficiencies on a pending application.
- Apply for a license or registration.
- Make an address change.
- Print a duplicate license.
- Print a Letter of Certification or Letter of Clearance.
- Apply to be a Pre-licensing or Continuing Education Provider or Instructor.

Need assistance?

[Click here](#) to review step-by-step guides or email us at
AgentLicensing@MyFloridaCFO.com.

[Privacy Statement](#)

Login

[User Name](#)

[Password](#)

[Create Account](#)
[Forgot Login Info?](#)



Click on Create Account –
an Owner and/or Primary Bail Bond Agent must be Licensed and Appointed.

To complete this step you need the following information:

- Social Security Number or FEI #
- Bail bond agent license number



[Locate](#) [Help](#) [FAQ](#)

[Home](#) > **Create Account**

Please Select Your Account Type Please Choose the Entity Type

Next



[Locate](#) [Help](#) [FAQ](#)

[Home](#) > **Create Account**

Please Select Your Account Type Please Choose the Entity Type

- Individual
- Insurance Agency
- Business (non insurance agency)
- Title Agency
- Appointing Entity / Emergency Adjuster
- Provider
- Instructor
- Third Party
- Bail Bond Agency



[Locate](#) [Help](#) [FAQ](#)

[Home](#) > **Create Account**

Please Select Your Account Type Bail Bond Agency

Bail Bond Agency Applicant

SSN/FEIN: (Select one)

Next



[Locate](#) | [Help](#) | [FAQ](#)

[Home](#) > **Create Account**

Please Select Your Account Type

Bail Bond Agency Applicant

SSN/FEIN:

FEIN Number: *

Verify FEIN Number:

Owner License Number:

Note: Additional owners can be added later.

[Next](#)



Bail Bond Agency Applicant

SSN/FEIN: Select One

Enter FEIN#

Verify FEIN#

Owner License#: Enter License #

Click Next



[Locate](#) | [Help](#) | [FAQ](#)

Account Profile

Demographic Information

Agency Name:

Email

Email:

Verify Email:

Business Address

▶ [Copy Mailing Address](#)

Street Address:

City:

Country:

State/Province/Region:

County:

Zip Code:

Mailing Address

▶ [Copy Business Address](#)

Street Address:

City:

Country:

State/Province/Region:

County:

Zip Code:

Phone

Work Phone: Ext.

[Back](#) [Continue](#)

Enter Demographic Information

- Agency Name
- Enter a Valid Email Address
- Verify Email Address



[Locate](#) [Help](#) [FAQ](#)

Account Profile

Demographic Information

Agency Name:

Email

Email:

Verify Email:

Business Address

▶ Copy Mailing Address

Street Address:

City:

Country:

State/Province/Region:

County:

Zip Code:

Mailing Address

▶ Copy Business Address

Street Address:

City:

Country:

State/Province/Region:

County:

Zip Code:

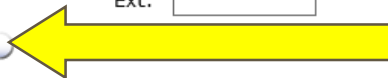
Phone

Work Phone:

Ext.

[Back](#)

[Continue](#)



- Enter Business Street Address **(No PO Boxes)**
- Enter City/Country/State/Province/Region/Zip Code
- Enter Mailing Address
- Enter Mailing Street Address
- Enter City/Country/State/Province/Region/Zip Code
- Enter Work Phone #

- Click **Continue**



[Locate](#) | [Help](#) | [FAQ](#)

Add User

New Account Creation

User name must be at least six characters long. The password must be at least six characters long and must contain the following: at least one UPPER case letter, at least one lower case letter, and at least one number.

User Name:

Available

Password:

Confirm Password:

Security Question 1:

Answer

Security Question 2:

Answer

Security Question 3:

Answer

Create User



Add User/New Account Creation

- Enter User Name:
- Enter Password:
- Review instructions on characters needed to create password
- Confirm Password:
- Answer the Security questions 1, 2, & 3

Click **Create User**

Account Creation Confirmation:

Your account has been created/updated successfully.

Click **Continue**.



JIMMY PATRONIS
FLORIDA'S CHIEF FINANCIAL OFFICER

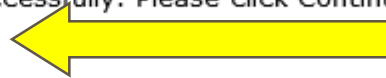
[Locate](#) | [Help](#) | [FAQ](#)

Add User

Account Creation Confirmation

Your account has been created/updated successfully. Please click Continue.

[Continue](#)





[Help](#)

[FAQ](#)

[Logout](#)

[Bail Bond Agency]

My Profile

USER: BAIL BONDS 4 U 2 GO

[Click here to View Accepted Applications](#)

REGISTRATIONS

No pending or active registrations on file with the department.

Current Contact Information

200 EAST GAINES STREET
TALLAHASSEE, FL 32399
KENDAL.MORGAN@CONTRACTOR.NET
UserName: KENDALM
[Click here to view Complete Information](#)

Primary Bail Bond Agent

You must designate a Primary Bail Bond Agent to register your Bail Bond Agency.

MENU

- ▶ [Designate Primary Bail Bond Agent](#)
- ▶ [Address Change](#)
- ▶ [Login Information Change](#)
- ▶ [Email Address Change](#)
- ▶ [Third Party Privileges](#)

Links of Interest

- ▶ [Our Home Page](#)

MyProfile User Page:

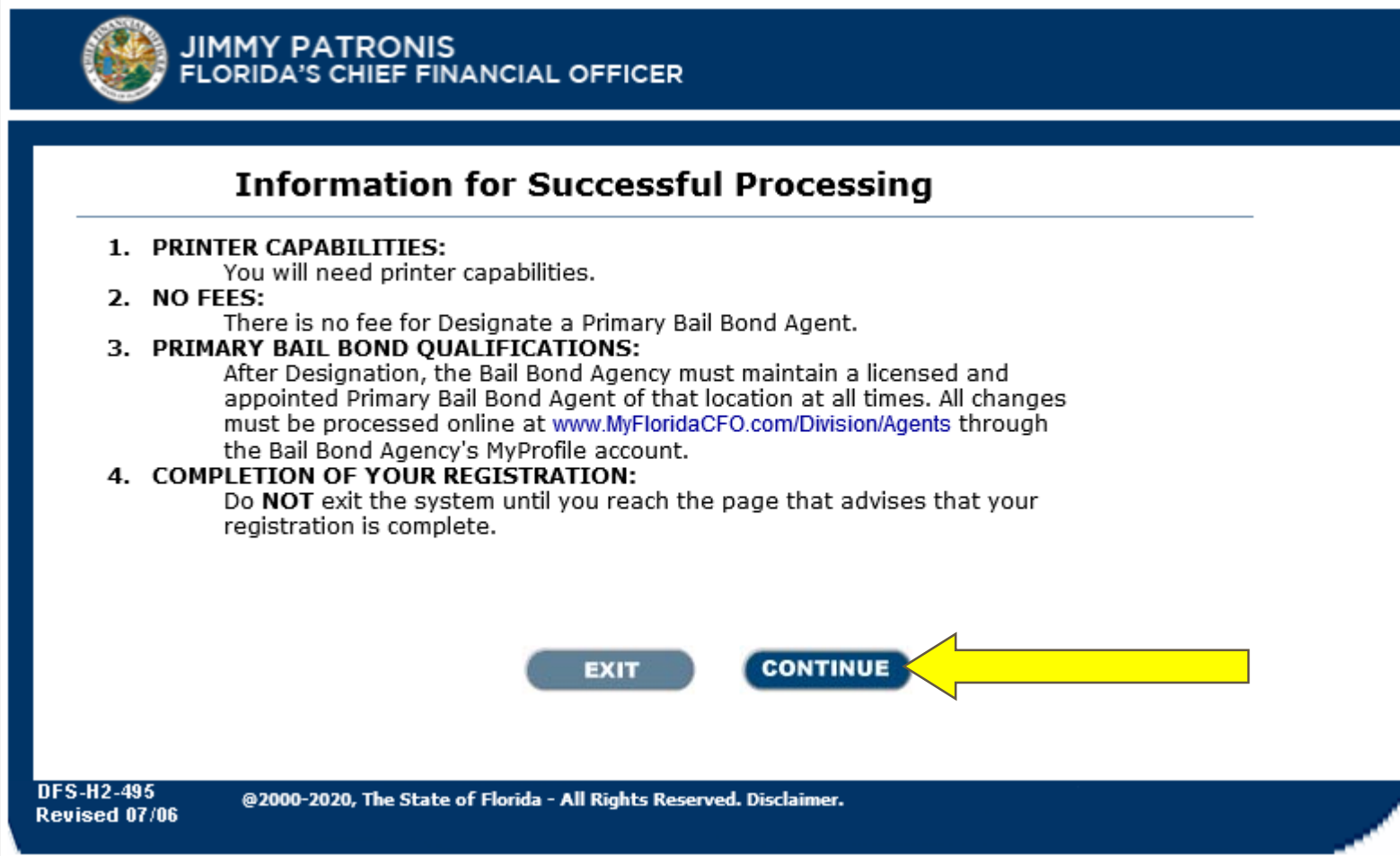
On this screen you have an option to perform the following actions:

- Click and **view accepted applications**
- Click and **view completed information**
- Under the **Menu** Option you may perform the following actions:
 - **Designation primary bail bond agent**
 - **Address change**
 - **Email address change**
 - **Third Party Privileges**

After Clicking **Designate Primary Bail Bond Agent** on the previous MyProfile User account screen an information screen pops up for beginning the process.

Please read each page carefully.

Click **Continue**.



The screenshot shows a dark blue header with the Florida state seal on the left and the text "JIMMY PATRONIS FLORIDA'S CHIEF FINANCIAL OFFICER" on the right. Below the header is a white box with a dark blue border containing the following content:

Information for Successful Processing

- 1. PRINTER CAPABILITIES:**
You will need printer capabilities.
- 2. NO FEES:**
There is no fee for Designate a Primary Bail Bond Agent.
- 3. PRIMARY BAIL BOND QUALIFICATIONS:**
After Designation, the Bail Bond Agency must maintain a licensed and appointed Primary Bail Bond Agent of that location at all times. All changes must be processed online at www.MyFloridaCFO.com/Division/Agents through the Bail Bond Agency's MyProfile account.
- 4. COMPLETION OF YOUR REGISTRATION:**
Do **NOT** exit the system until you reach the page that advises that your registration is complete.

At the bottom of the white box are two buttons: "EXIT" and "CONTINUE". A yellow arrow points to the "CONTINUE" button.


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Revised 07/06

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Step I: Primary Bail Bond Agent for the agency

Primary Bail Bond Agent License Number: Enter a Valid License # (must be licensed & appointed)

Click Continue



JIMMY PATRONIS
FLORIDA'S CHIEF FINANCIAL OFFICER

Registration Advise **Primary Bail Bond Agent** Owners Officers Registration Review Affirmation Statement Checkout Summary

STEP 1: Primary Bail Bond Agent

Agency Name: BAIL BONDS 4 U 2 GO

Primary Bail Bond Agent License Number: ←

Primary Bail Bond Agent Name:

Owner Name:

Owner License Number:

EXIT **BACK** **CONTINUE**

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Registration
Advise

Primary Bail
Bond Agent

Owners Officers

Registration
Review

Affirmation
Statement

Checkout

Summary

STEP 1: Primary Bail Bond Agent

Agency Name: BAIL BONDS 4 U 2 GO

Primary Bail Bond Agent License Number:

Primary Bail Bond Agent Name:

Owner Name:

Owner License Number:

EXIT

BACK

CONTINUE

DFS-H2-495
Revised 07/06

@2000-2020,

Message from webpage



An email will be sent to instruct the primary agent about the business address must be updated to the bail bond agency address.

OK

After entering the primary bail bond agent license number an email message screen pops up.


Read/Review message.

Click OK.

Step 2: OWNERS/OFFICERS for the bail bond agency

This is where you can add additional owners, officers, etc. You do so by **searching** for them by license#, entering their role, and clicking the **Add Owner/Officer** button.

A person may not own, control, or otherwise have a pecuniary interest in a bail bond agency unless such individual is a licensed and appointed bail bond agent.



JIMMY PATRONIS
FLORIDA'S CHIEF FINANCIAL OFFICER

Registration Advise Primary Bail Bond Agent **Owners Officers** Registration Review Affirmation Statement Checkout Summary

STEP 2: Owners Officers

Agency Name: **BAIL BONDS 4 U 2 GO**

Total List Count: 1

License Number	Name	Individual Type	Action
		Owner or LLC Member	Delete

Add Owner/Officer ←

Owner/Officer Detail

License Number:

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You may enter additional owners/officers by:

- **ENTERING A LICENSE NUMBER**
- **CLICK SEARCH**

THE AGENT'S INFORMATION WILL APPEAR
(Grayed out)

- **CLICK ON THE DROP-DOWN ARROW**
- **CLICK ON THE ROLE FOR THE AGENT, for EXAMPLE**
(Owner or LLC Member, President, Secretary, Treasure,
Director, Office, & Partner, Other, Senior Vice President)
- **Click Submit**
- **Click Save**

License Number	Name	Individual Type	Action
		Owner or LLC Member	Delete

Add Owner/Officer **Submit**

Owner/Officer Detail

License Number: **Reset**

Individual Type

First Name

Middle Name:

Last Name:

Suffix:

Home Address:

City

Country

State

County

Province

Zip Code


Save **Delete**

EXIT **BACK**

Once you have entered all of the Owners and Officers for the bail bond agency, click **Submit**.

Read the Popup Message.

Click Ok to continue.

 **JIMMY PATRONIS**
FLORIDA'S CHIEF FINANCIAL OFFICER

Registration Advise Primary Bail Bond Agent **Owners Officers** Registration Review Affirmation Statement Checkout Summary

STEP 2: Owners Officers

Agency Name **BAIL BONDS 4 U 2 GO** Total List Count: 1

License Number	Name	Individual Type	Action
		Owner or LLC Member	Delete

Add Owner/Officer **Submit**

Owner/Officer Detail

License Num

Message from webpage

? 1150 - If you have entered all the owners and officers associated with your agency, please select 'OK' to continue. Otherwise please choose 'Cancel' and then select 'Add Owner/Officer' to continue adding individuals.

OK **Cancel**

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STEP 3: Registration Review

PRINT

You have not completed the application process.
Print for your personal records and press continue.

Florida Department of Financial Services
Bureau of Licensing
Designate Primary Bail Bond Agent

FEIN Number: 59-1085703 **License Number:** N/A **Application ID Number:** 6822546

Agency Name: BAIL BONDS 4 U 2 GO **Application Accepted Date:** 01/07/2020

Primary Bail Bond Agent Name: _____ **Primary Bail Bond Agent License Number:** _____

Mailing Address
200 EAST GAINES STREET
TALLAHASSEE, FL 32399

Email Address
KENDAL.MORGAN@CONTRACTOR.NET

applied for:
23-05 - Agency Bail Bond

Owner/Officers:

Owner or LLC Member _____

Deficiencies:
None.

EXIT

BACK

CONTINUE



Step 3: Registration Review

Review Screen carefully.

This page can be printed for your records.

Click the print button to print.

Click Continue.



STEP 4: Affirmation Statement

Applicant Affirmation Statement

Bail Bond Agency Owner Responsibilities

- I attest that the information submitted for this bail bond agency is correct and effective as of the date of this filing.
- I understand I must update the information in this filing within ten (10) working days after a change in ownership of this agency, or a change in the designated primary bail bond agent.
- I understand that my bail bond license may be penalized if this bail bond agency employs, contracts with, or uses the services of a person who has had a license denied, or whose license is currently suspended or revoked.
- I understand that an owner, operator, or primary bail bond agent may not employ, contract with, or use the services of any person in a bail bond agency who has been charged with, found guilty of, or pled guilty or nolo contendere to a felony or a crime punishable by imprisonment of 1 year or more under the law of any jurisdiction, without regard to whether judgment was entered or withheld by the court.
- Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree provided under section 837.06, F.S.

(Section 648.387, F.S.)

I agree to the above statement.

Affirmation Name(s):

First Name

Last Name

EXIT

BACK

CONTINUE

Step 4: Applicant Affirmation Statement

Read the affirmation statement carefully.

- Click in the box –
“I agree to the above statement.”
- Type your First and Last name in the boxes.
- **Click Continue**



Registration Complete

Click Exit

Wait – you’re not done yet!



JIMMY PATRONIS
FLORIDA'S CHIEF FINANCIAL OFFICER

Registration Complete

Application ID: 6822546

Thank you for submitting your Primary Bail Bond Registration.

If you have any questions, please visit our website at
www.MyFloridaCFO.com/Division/Agents.



EXIT

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Click OK

You will be taken back to your MyProfile User page



JIMMY PATRONIS
FLORIDA'S CHIEF FINANCIAL OFFICER

Registration Complete

Application ID: 7124431

Thank you for sub
If you have any q
www.MyFloridaCFO.com

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Message from webpage



ATTENTION!!

You have selected to EXIT from this window.

To continue with this action click OK.

To return to the process click CANCEL.

OK

Cancel

The Paper form **Filing of Bail Bond Agency Business Name And Designation/Deletion of Primary Bail Bond Agent** will not be accepted by the Department of Financial Services for processing. All submissions **MUST** be filed electronically via MyProfile going forward.

If you have questions, please email Bail.Bond@MyFloridaCFO.com



DEPARTMENT OF FINANCIAL SERVICES
 Division of Insurance Agent & Agency Services - Bureau of Investigation - Bail Bond
 200 East Gaines Street, Larson Building #412, Tallahassee, FL 32399-0320

FILING OF BAIL BOND AGENCY BUSINESS NAME AND DESIGNATION/DELETION OF PRIMARY BAIL BOND AGENT

This form must be filed with the Department of Financial Services within 10 working days of the agency change of address or change of primary bail bond agent designation, per Rule 69B-221.051, F.A.C.



AGENCY INFORMATION		Is this a new bail bond agency? <input type="checkbox"/>	
AGENCY NAME: _____		Is this a change of address for the agency? <input type="checkbox"/>	
ADDRESS: _____		EMAIL: _____	
CITY: _____	Florida	ZIP CODE: _____	
PHONE: _____		FAX: _____	
IF THIS IS A CHANGE OF ADDRESS, PLEASE LIST THE PREVIOUS ADDRESS BELOW			
ADDRESS: _____			
CITY: _____	Florida	ZIP CODE: _____	

PRIMARY BAIL BOND AGENT			The primary bail bond agent is responsible for the overall operation and management of this bail bond agency location.
LICENSE #	NAME (Last, First)	EMAIL	
DESIGNATE:			
DELETE:			

OWNER INFORMATION		
LICENSE #	NAME (Last, First)	EMAIL
OWNER:		

SIGNATURES

I attest that the above information is correct. The change is effective as of the date listed below.

I understand I must file a new form within ten (10) working days after a change in the information provided on this form.

OWNER'S SIGNATURE: _____	DATE: _____
PRIMARY BAIL BOND AGENT'S SIGNATURE: _____	DATE: _____

PLEASE NOTE: All questions will be directed to the primary bail bond agent listed on this form.

PLEASE RETURN THIS FORM TO THE ADDRESS LISTED AT THE TOP OF PAGE, OR
 EMAIL TO: Bail.Bond@MyFloridaCFO.com, OR
 FAX TO: (850) 488-5951.