VIN 6296

vitu

Cover Sheet - FL

Process Date	Transaction Id
09/24/2026	182597322
Titling State	**Military**
FL	N

KM8RMESA8VU116296 2027 HYUNDAI
New Auto

Vehicle Info

Model: PALISADE Hybrid
Body Type: Four Door
GVW: 7000
Fuel Type: Hybrid - Gas
Odometer Reading: 69

Sale Information

Purchase Date: 09/03/2026
Sale Type: Purchase
Taxable Selling Price: 50,917.93
MSRP:
List Price:
Trade In Value: 11,417.07

Owner Info

Owner 1 Name: JOHN ATKINSON
Owner 2 Name: CONNIE JONES
Residence Address: 6154 SW 100TH LOOP, OCALA, Marion, FL, 34476
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name: MIDFLORIDA CREDIT UNION
Address: PO BOX 8008, LAKELAND, POLK, FL, 33802
Lienholder 2 Name:
Address:
Lienholder 3 Name:
Address:

Registration Information

Application Type: Title Only
Registration Action:
Registration Period:
Plate Number:
Expiration Date:

Final Destination

Send to:
Phone:
Mailing Address:

Fee Summary

TITLE FEE	$79.75
FL STATE TAX (6%)	$3,055.08
FL DISCRETIONARY SURTAX (1.5%)	$75.00
VITU FULL SERVICE FEE	$105.00
FL STATE VARIABLE FEES	$.00
Total	**$3,314.83**

Submitted By: Kayla Yates
Phone: (317)754-3400
Location: Ray Skillman Avon Hyundai
Address: 8775 E US Hwy 36, Avon, Hendricks, IN, 46123

[redacted]
Pre-Checker Name

Comments / Resolution:

For your paperwork to be processed faster, please send your transaction documents in the order they are listed on the checklist. Thank you!

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CNTY#	AGY#	SUB#	RPT#
39	1	D7438CPL	7020

AUDIT #

STATE OF FLORIDA
APPLICATION FOR VEHICLE / VESSEL CERTIFICATE OF TITLE

L#
T# 2377380453
B# 50247891
S# 122336178

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR.	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR		WT/LENGTH	PRINCPL OPERAT	GVW/LOC
165034696	KM8RMESA8VU116296	2027	HYUN	4D	GRY		5016		

DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	ENGINE DRIVE	FUEL	VESSEL TYPE	WATER	FL NUMBER	AUTH DESTRUCTION
09 30 26	ORT	PRIVATE								

Applicant/Owner's Name & Address
JOHN WALLACE ATKINSON AND CONNIE JO JONES
6154 SW 100TH LOOP
OCALA, FL 34476-8928

SEX	BIRTHDATE MO. DAY YEAR	RESIDENT Y	N	ALIEN	CNTY RES.#
M	01 18 48	X			14

1st OWNER FL/DL # OR F.E.I.D.#: A325479480180
2nd OWNER FL/DL # OR UNIT #: J520110547050

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
4.75	75.00	60.69	140.44

Action Requested: ORIG NEW TITLE
RETAINED AS ELECTRONIC TITLE

Brands:

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	ODOMETER DECLARATION CERTIFICATION
	09/03/2026	XX		69 MILES 09/03/2026 ACTUAL	☐

LIEN INFORMATION

	DATE OF LIEN	RECEIVED DATE	FEID # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #
ELT	09/03/2026	09/30/2026	596194363-01	208592504

NAME OF FIRST LIENHOLDER:
MIDFLORIDA CREDIT UNION

ADDRESS
ELECTRONIC LIEN

SALVAGE TYPE

SELLER INFORMATION

NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER

ADDRESS

DEALER LICENSE NO.

CONSUMER OR SALES TAX EXEMPTION #

SALES TAX AND USE REPORT

TRANSFER OF TITLE IS EXEMPT FROM FLORIDA SALES OR USE TAX FOR THE REASON(S) CHECKED

☐ **PURCHASER HOLDS VALID EXEMPTION CERTIFICATE**
☐ **VEHICLE / VESSEL WILL BE USED EXCLUSIVELY FOR RENTAL**
☐ **OTHER** REGULAR

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS $ 50,380.43

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES $ 60.69

☒ **SELLING PRICE VERIFIED**

APPLICANT CERTIFICATION

_____ **I/WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.**

_____ **I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.**

_____ **I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.**

I/WE HEREBY CERTIFY THAT I/WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I/WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

_____ Signature of Applicant/Owner

_____ Signature of Applicant/Co-Owner

HSMV 82041 REVISED 02/06 SCAN CODE MVT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.

LEVY CO 39 AG 01

LEVY County Tax Collector

Bronson, FL

Date: 09/30/2026 Office: 39/01 (D76) Cashier: D7438CPL

Batch Summary

Batch Number: 50247891 Total Transactions: 1

Transaction Detail

FEID/DL/ID Number	Customer Name	Transaction Type	Fee Total
A325-479-48-018-0	John Wallace Atkinson	ORT - Orig New Title	$140.44
		Credit Card Convenience Fee:	$0.00
		Batch Fee Total:	$140.44

Payment Detail

Payment Type	Confirmation Number	Amount Paid
Check		$140.44

Mission: *Providing Highway Safety and Security through Excellence in Service, Education, and Enforcement.*