vitu

Cover Sheet - FL

Process Date	Transaction Id
10/08/2026	193258632
Titling State	**Military**
FL	N

2T3P1RFV1SC547636 2025 TOYOTA
Used Auto

Vehicle Info

Model: RAV4
Body Type: Sport Utility Vehicle
GVW: 5000
Fuel Type: Gas
Odometer Reading: 26874

Sale Information

Purchase Date: 09/29/2026
Sale Type: Purchase
Taxable Selling Price: 30,426.00
MSRP:
List Price:
Trade in Value:

Owner Info

Owner 1 Name: DOUGLAS DELGADO MENDOZA
Owner 2 Name:
Residence Address: 3601 KERNAN BLVD S APT 2211, JACKSONVILLE, Duval, FL, 32224
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name: TOYOTA MOTOR CREDIT CORP
Address: PO BOX 30203, COLLEGE STATION, BRAZOS, TX, 77842
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	$87.75
FL STATE TAX (6%)	$1,825.56
FL DISCRETIONARY SURTAX (1.5%)	$75.00
VITU FULL SERVICE FEE	$105.00
FL STATE VARIABLE FEES	$.00
Total	**$2,093.31**

Submitted By: Angie Freeman
Phone: (260)436-4567
Location: Fort Wayne Toyota
Address: 5900 Illinois Road, Fort Wayne, Allen, IN, 46804

RECEIVED
OCT 09 2026
BY: AC

For Vitu use

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#
46	2	TC33RSL	7139

AUDIT #

STATE OF FLORIDA
APPLICATION FOR VEHICLE / VESSEL CERTIFICATE OF TITLE

L#
T# 2388071163
B# 51509573
S# 122638394

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR.	MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR		WT/LENGTH	PRINCPL OPERAT	GVW/LOC
165232758	2T3P1RFV1SC547636	2025	TOYT		UT	SIL		3515		

DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	ENGINE DRIVE	FUEL	VESSEL TYPE	WATER	FL NUMBER	AUTH DESTRUCTION
10 19 26	OUT	PRIVATE								

Applicant/Owner's Name & Address
DOUGLAS JAVIER DELGADO MENDOZA
1801 KERNAN BLVD S APT 404
JACKSONVILLE, FL 32246-4059

SEX	BIRTHDATE MO. DAY YEAR	RESIDENT Y	N	ALIEN	CNTY RES.#
M	05 15 61	X			2

1st OWNER FL/DL # OR F.E.I.D.#: D627864471000
2nd OWNER FL/DL # OR UNIT #:

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
4.75	83.00	75.00	162.75

Action Requested: ORIG USED TITLE
RETAINED AS ELECTRONIC TITLE

Brands:

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	ODOMETER DECLARATION CERTIFICATION
IL	09/29/2026		XX	26,874 MILES 09/29/2026 ACTUAL	☐

LIEN INFORMATION

	DATE OF LIEN	RECEIVED DATE	FEID # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #
ELT	09/29/2026	10/19/2026	953775816-07	208103257

NAME OF FIRST LIENHOLDER:
TOYOTA MOTOR CREDIT CORP

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 $ 30,426.00

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES $ 75.00

[X] **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.