vitu

Cover Sheet - FL

Process Date	Transaction Id
11/06/2026	204941854
Titling State	**Military**
FL	N

KMHTC6AD7EU211118 2014 HYUNDAI
Used Auto

Vehicle Info

Model:	VELOSTER
Body Type:	Two Door
GVW:	4000
Fuel Type:	Gas
Odometer Reading:	75000

Sale Information

Purchase Date:	10/30/2026
Sale Type:	Purchase
Taxable Selling Price:	0.00
MSRP:	
List Price:	
Trade in Value:	

Owner Info

Owner 1 Name:	Lua Salome Ponce
Owner 2 Name:	
Registered Address:	12401 WEST OKEECHOBEE ROAD, HIALEAH GARDENS, Miami-Dade, FL, 33018
Lessor Name:	
Address:	

Lienholder Info

Lienholder 1 Name:	Oportun, INC
Address:	
Lienholder 2 Name:	
Address:	
Lienholder 3 Name:	
Address:	

Registration Information

Application Type:	Lien Add
Registration Action:	
Registration Period:	
Plate Number:	
Expiration Date:	

Final Destination

Send to:	
Phone:	
Mailing Address:	

Fee Summary

TITLE FEE	$77.75
Total	**$77.75**

Submitted By: Oportun API User
Phone: (469)338-6365
Location: Oportun Inc PerfecTitle
Address: 1120 E PARKER RD #200, PLANO, Collin, TX, 75074

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!

Copyright © 2026 Vitu, Inc. All rights reserved.
PROPRIETARY MATERIAL. This material is proprietary. Unauthorized sharing or distribution to third parties is strictly prohibited.

CNTY#	AGY#	SUB#	RPT#
46	2	TC33RSL	7152

AUDIT #

STATE OF FLORIDA
APPLICATION FOR VEHICLE / VESSEL CERTIFICATE OF TITLE

L#
T# 2398777747
B# 52973410
S# 122971746

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR.	MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR		WT/LENGTH	PRINCPL OPERAT	GVW/LOC
143532023	KMHTC6AD7EU211118	2014	HYUN		2D	RED		3020		

DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	ENGINE DRIVE	FUEL	VESSEL TYPE	WATER	FL NUMBER	AUTH DESTRUCTION
11 05 26	TDL	PRIVATE								

Applicant/Owner's Name & Address
LUA SALOME PONCE
12401 W OKEECHOBEE RD LOT 318
HIALEAH, FL 33018

SEX	BIRTHDATE MO. DAY YEAR	RESIDENT Y	N	ALIEN	CNTY RES.#
F	08 02 06	X			1

1st OWNER FL/DL # OR F.E.I.D.#: P629898653000
2nd OWNER FL/DL # OR UNIT #:

VOLUNTARY CONTRIBUTIONS

AGENCY FEE	TITLE FEE	SALES TAX	GRAND TOTAL
4.75	73.00	0.00	77.75

Action Requested: DUPLICATE TITLE WITH LIEN
RETAINED AS ELECTRONIC TITLE

Brands:

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	ODOMETER DECLARATION CERTIFICATION
FL	06/18/2026		XX	201,593 MILES 11/02/2026 ACTUAL	☐

LIEN INFORMATION

	DATE OF LIEN	RECEIVED DATE	FEID # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #
ELT	11/02/2026	11/05/2026	203386325-02	262313239

NAME OF FIRST LIENHOLDER:
OPORTUN, INC
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** GIFT

INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS $ 0.00

INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES $ 0.00

☐ **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.