

STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES  
DIVISION OF MOTORIST SERVICES  
Neil Kirkman Building – Tallahassee, FL 32399-0500  
**MOTOR VEHICLE TITLE REASSIGNMENT SUPPLEMENT**

(Instructions on Reverse Side)

This reassignment is supplement to: ☐ Title No.: N/A State of Issue: FL  
☐ Manufacturer's Statement or Certificate of Origin  
Is the title electronic? ☐ Yes ☐ No

**VEHICLE DESCRIPTION**

Vehicle Identification Number	Year	Make	Model	Body
5NPD84LF8LH632771	2020	HYUNDAI	ELANTRA	SDN

**REASSIGNMENT INFORMATION**

Name of Seller(s)/Agent (Print)		DL/ID#, DMS ACCT#, FEID#		DEALER/AUCTION LICENSE (if applicable)	
MK AUTOMOTIVE MGMT LLC					
Street Address		City		State Zip	
1101 EAST FLETCHER AVE TAMPA FL 33612					
Selling Price (If Applicable)		Sales Tax Collected (If Applicable)		Sales Tax Reg. No. (If Applicable)	
17811.57		1200.49		398013396754-2	
Purchaser and Co-Purchaser's Printed Name(s)				Date of Sale	
LUTHER BARNUM				09/23/2023	
Purchaser's Address		City		State Zip	
9725 WHITE BARN WAY RIVERVIEW FL 33569-5598					
Co-Purchaser's Address (If applicable)		City		State Zip	
Auction Name (If applicable)		Auction License Number		State of License Date of Auction	
Street Address		City		State Zip	

**ODOMETER DISCLOSURE STATEMENT**



**WARNING: FEDERAL AND STATE LAW REQUIRE THAT YOU STATE THE ODOMETER MILEAGE IN CONNECTION WITH TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.**

I/WE STATE THAT THIS ☐ 5 OR ☒ 6 DIGIT ODOMETER NOW READS, ☐ ☐ ☐ 6 ☐ 2 , ☐ ☐ ☐ 6 ☐ 5 ☐ ☐ 2 XX (NO TENTHS) MILES,  
DATE READ 09/23/23, AND I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE ODOMETER READING.

CAUTION:  
READ CAREFULLY  
BEFORE YOU  
CHECK A BOX

- ☒ 1. REFLECTS ACTUAL MILEAGE  
☐ 2. IS IN EXCESS OF ITS MECHANICAL LIMITS  
☐ 3. IS NOT THE ACTUAL MILEAGE. WARNING – ODOMETER DISCREPANCY

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

Printed Name of seller(s)/Agent	Seller(s)/Agent Signature
	
Printed Name of Co-seller (If applicable)	Co-Seller Signature (If applicable)
Purchaser(s) Signature	Co-Purchaser(s) Signature
	N/A
Purchaser(s) Printed Name First, Full Middle or Maiden, Last	Co-Purchaser(s) Printed Name First, Full Middle or Maiden, Last
LUTHER BARNUM	N/A

**NOTICE: ANY ALTERATION OR ERASURE MAY VOID THIS ASSIGNMENT AND ALL ASSIGNMENTS THAT FOLLOW.**

ORIGINAL: SUBMIT WITH APPLICATION FOR TITLE  
HSMV 82994 (REV. 04/14) S

COPY: SELLER/DEALER RETAIN IN FILE

**WHEN SHOULD THIS FORM BE USED?**

**FORM HSMV 82994, MOTOR VEHICLE TITLE REASSIGNMENT SUPPLEMENT, MUST BE USED:**

1. with conforming Florida Certificate(s) of Title to make additional dealer reassignments and odometer disclosures when all reassignment and odometer disclosure spaces on the reverse side of the Certificate of Title have been used:  
Or
2. with a non-conforming Certificate(s) of Title to make reassignments and odometer disclosures;  
Or
3. with conforming MCO, when the MCO is not available at the time of sale;  
Or
4. with all out-of-state non-conforming Certificate(s) of Title to make dealer reassignments and odometer disclosures;  
Or
5. when ownership is being transferred on an Electronic Certificate(s) of Title.

**NOTE:** This form should NOT be used when the owner is transferring ownership on a vehicle that does not have an electronic Certificate of Title. If the Certificate of Title is NOT electronic, the "Transfer of Title By Seller" section must be completed by the seller(s)/agent.

**FILING:**

1. The original HSMV 82994 is to be surrendered with the application for title.
2. The copy of the HSMV 82994 is to be retained by the dealer in his/her records for a period of five (5) years. It is recommended that the individual seller(s) retain a copy of this form for their records.