



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
Recorder of Deeds  
Clerk and Accountant of the Board of County  
Commissioners  
Custodian of County Funds  
County Auditor

110 North Apopka Ave  
Inverness, FL 34450  
Telephone: (352) 341-6478  
Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

APPLICATION NO: 2023-0079TD

### NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE

Date: 6/14/2023

Certificate #: 18-1506

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 2 PB 5 PG 108 LOT 7 BLK 131

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 06/07/2023, and a surplus of \$2,015.01 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

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CITRUS COUNTY, FL

By: \_\_\_\_\_

*Tammy S. Kirby*

Tammy S. Kirby, Deputy Clerk



YOU MAY APPLY TO CLAIM SURPLUS FUNDS YOURSELF. YOU DO NOT HAVE TO ASSIGN YOUR RIGHTS TO ANYONE ELSE IN ORDER FOR YOU TO CLAIM ANY MONEY TO WHICH YOU ARE ENTITLED.

**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2023-0079TD Certificate #: 18-1506 Date of Sale: 6/7/2023

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.

Claimant's name: \_\_\_\_\_

Contact name, if applicable: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

**NOTE: ALL CLAIMANTS MUST SUBMIT A COMPLETED W-9. VISIT WWW.IRS.GOV FOR THE MOST CURRENT FORM.**

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.

\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;

\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Original Lien

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property **and provide proof.**)

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail:

\_\_\_\_\_

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Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_

and such payment be mailed to either the address above or to: \_\_\_\_\_.

4. I hereby swear or affirm that all of the above information is true and correct.

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

\_\_\_\_\_ Physical Presence  
\_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by

\_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced

\_\_\_\_\_ as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



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NOTARY PUBLIC or DEPUTY CLERK

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STATE OF \_\_\_\_\_ Physical Presence  
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The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by  
\_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced  
\_\_\_\_\_ as identification and who did take an oath.

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\_\_\_\_\_  
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\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



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1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;

\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Original Lien

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property **and provide proof.**)

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_

and such payment be mailed to either the address above or to: \_\_\_\_\_

4. I hereby swear or affirm that all of the above information is true and correct.

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

\_\_\_\_\_ Physical Presence  
\_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by

\_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced

\_\_\_\_\_ as identification and who did take an oath.

My Commission Expires: \_\_\_\_\_

NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
Recorder of Deeds  
Clerk and Accountant of the Board of County  
Commissioners  
Custodian of County Funds  
County Auditor

110 North Apopka Ave  
Inverness, FL 34450  
Telephone: (352) 341-6478  
Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

APPLICATION NO: 2023-0079TD

### NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE

Date: 6/14/2023

Certificate #: 18-1506

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 2 PB 5 PG 108 LOT 7 BLK 131

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 06/07/2023, and a surplus of \$2,015.01 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
CITRUS COUNTY CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: \_\_\_\_\_

Tammy S. Kirby, Deputy Clerk



YOU MAY APPLY TO CLAIM SURPLUS FUNDS YOURSELF. YOU DO NOT HAVE TO ASSIGN YOUR RIGHTS TO ANYONE ELSE IN ORDER FOR YOU TO CLAIM ANY MONEY TO WHICH YOU ARE ENTITLED.

**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2023-0079TD Certificate #: 18-1506 Date of Sale: 6/7/2023

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_

**NOTE: ALL CLAIMANTS MUST SUBMIT A COMPLETED W-9. VISIT WWW.IRS.GOV FOR THE MOST CURRENT FORM.**

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Original Lien

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_  
Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property **and provide proof.**)

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_  
\_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

4. I hereby swear or affirm that all of the above information is true and correct.

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by  
\_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced  
\_\_\_\_\_ as identification and who did take an oath.

My Commission Expires: \_\_\_\_\_

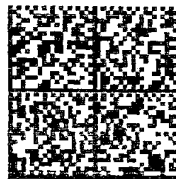
\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT & COMPTROLLER  
110 NORTH APOPKA AVENUE  
INVERNESS, FLORIDA 34450-4299



quadiant

FIRST-CLASS MAIL  
IMI

**\$000.60<sup>0</sup>**

06/15/2023 ZIP 34450  
043M31240484

**US POSTAGE**

**RETURN TO SENDER  
BOX CLOSED**



**ANGELA VICK**  
 CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
 CITRUS COUNTY, FLORIDA



Clerk of the County Court  
 Recorder of Deeds  
 Clerk and Accountant of the Board of County  
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 www.citrusclerk.org

APPLICATION NO: 2023-0079TD

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 6/14/2023  
 Certificate #: 18-1506  
 DESCRIPTION OF PROPERTY:  
 CITRUS SPGS UNIT 2 PB 5 PG 108 LOT 7 BLK 131

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 06/07/2023, and a surplus of \$2,015.01 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

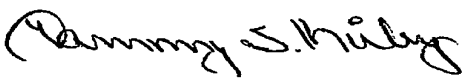
To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
 CITRUS COUNTY CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
 CITRUS COUNTY, FL

By:   
 Tammy S. Kirby, Deputy Clerk



YOU MAY APPLY TO CLAIM SURPLUS FUNDS YOURSELF. YOU DO NOT HAVE TO ASSIGN YOUR RIGHTS TO ANYONE ELSE IN ORDER FOR YOU TO CLAIM ANY MONEY TO WHICH YOU ARE ENTITLED.

AFFIDAVIT OF CLAIM FOR TAX DEED SALE SURPLUS FUNDS

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

The undersigned, upon oath, does depose and say:

1. My name is ELLA III LLC (claimant). My current mailing address is 1101 Brickell Avenue, Suite N-1700, Miami, FL 33131. My current telephone number is 305-913-3333. My current e-mail address is jhollo@fecr.com.
2. I hereby submit my claim for tax deed surplus funds being held by the Clerk of Circuit Court of Citrus County, Florida resulting from the tax deed sale on 6/7/2023 (date), under tax deed number 2023-0079TD. The approximate surplus being held is \$2,015.01.
3. The folio (strap) number of the property is 1234514.
4. I hereby attest that I am entitled to the surplus funds by virtue of my interest in the property as:  
(check one)  
 Previous owner – the legal title holder of record of such property at the time of such tax deed sale and I have included the following: a copy of the deed showing interest and proof of authority to request funds (if claiming on behalf of a business)  
 Lien Holder of record at the time of such tax deed sale, and I have included the following: copy of the recorded lien and proof of authority to request funds (if claiming on behalf of a business. The amount currently outstanding, unpaid and owing on such lien is \_\_\_\_\_  
 Tax Deed Buyer – and I have included documentation that I was required to pay an expense that was appropriately a charge upon the property at the time of the tax deed sale that would have survived the tax deed and have further included proof of authority to request funds (if claiming on behalf of a business). The amount of my claim is \_\_\_\_\_.
5. I hereby make claim to the surplus funds generated from such tax deed sale. I understand that the Clerk of Circuit Court will subtract their fees from the sale pursuant to FL statute. I further understand that if I am making a claim as the owner of the property, any valid liens and mortgages against the property will be paid before I am entitled to any of the surplus.
6. I have not, either before or after such tax deed sale, conveyed my title or assigned my interest in such property to any third party nor have I conveyed my right to the surplus funds.
7. I have attached to this notarized affidavit a true and genuine copy of my current government issued photo identification that shows my address and date of birth.
8. I have written the tax deed number on all documents that are attached to this claim.

9. I acknowledge that I am making the above representations under oath in order to receive payment of such surplus funds, and understand that, if it is later discovered or determined that payment of such surplus funds to me was in error, the corporation which is receiving the surplus funds is liable for the repayment of such surplus funds.

FURTHER AFFIANT SAYETH NOT.



(signature)

Jonathan Politano (printed name)

Witness #1, print and sign: Hanna Goldenberg, Hanna Goldenberg

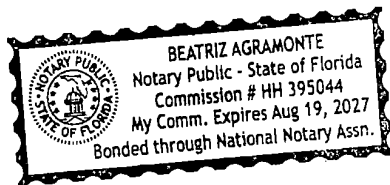
Witness # 2, print and sign: Rose Ortiz, Rose Ortiz

Before me, the undersigned authority, personally appeared Jonathan Politano, on behalf of ELLA III LLC, in his/her capacity as Manager, who is personally known to me and who was first duly sworn and cautioned and who stated that he/she executed the foregoing and that the contents thereof are true and correct.

In witness my hand and seal this 23rd day of August, 2023.


My commission expires:

Aug 19 2027   
Notary Public, State of Florida



**Florida** *the Sunshine State*  
**DRIVER LICENSE CLASS E**  
**P436-436-59-247-0**

**JONATHAN RICHARD  
 POLITANO**  
 1648 PRESIDENTIAL WAY  
 N MIAMI BEACH, FL 33179-6418  
 DOB: 07-07-1988 SEX: M  
 ISSUED: 04-01-2017 EXP: 06-30-2025  
 CLASS: E  
 REAL ID: 09-09-2017



**SAFE DRIVER**

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

RESTRICTIONS: A-Corrective Lenses

ENDORSEMENTS:

CLASS: E - Any non-commercial vehicle with a GVWR less than 26,001 lbs. or any RV

REPLACEMENT LICENSE REQUIRED WITHIN 10 DAYS OF ADDRESS OR NAME CHANGE.

The State of Florida retains all property rights herein.



Terry L. Rhodes *Terry L. Rhodes*  
 Executive Director  
 Clayton Boyd Walden *Clayton Boyd Walden*  
 Director of Motorist Services  
 883706381978  
 Rev Date 06-01-14

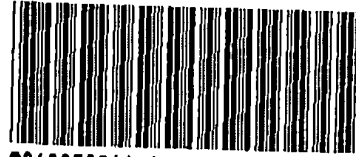
[www.fhsmv.gov](http://www.fhsmv.gov)



1500041811700

**PREPARED BY:**

Bonnie Tenney Deputy Clerk  
Clerk of the Circuit Court  
110 N Apopka Ave.  
Inverness FL 34450-4299



2010020911 1 PG

**RETURN TO:**

ELLA III LLC  
18305 BISCAYNE BOULEVARD SUITE 400  
AVENTURA, FL 33160

OFFICIAL RECORDS  
CITRUS COUNTY  
BETTY STRIFLER  
CLERK OF THE CIRCUIT COURT  
RECORDING FEE: \$10.00  
DOCUMENTARY TAX: \$8.40  
# 2010020911-BK:2354 PG:551  
05/10/2010 03:58 PM 1 PG  
BTENNEY,DC Receipt #016119

Tax Deed File No. 2010-024  
Property Identification No. 1234514

**TAX DEED**

STATE OF FLORIDA  
COUNTY OF CITRUS

The following Tax Sale Certificate Numbered 07-1051 issued on June 1, 2007 was filed in the office of the tax collector of this County and application made for the issuance of a tax deed, the applicant having paid or redeemed all other taxes or tax sale certificates on the land described as required by law to be paid or redeemed and the costs and expenses of this sale, and due notice of sale having been published as required by law, and no person entitled to do so having appeared to redeem said land; such land was sold on April 21, 2010, offered for sale as required by law for cash to the highest bidder and was sold to:

**ELLA III LLC**

whose address is:

**18305 BISCAYNE BOULEVARD SUITE 400 AVENTURA, FL 33160**

being the highest bidder and having paid the sum of his/her bid as required by the Laws of Florida.

NOW, on May 10, 2010 in the County of Citrus, State of Florida, in consideration of the sum of (\$ 1,145.39 ), being the amount paid pursuant to the laws of Florida does hereby sell the following lands situated in the County and State aforesaid and described as follows:

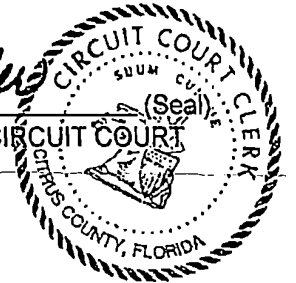
**CITRUS SPGS UNIT 2 PB 5 PG 108 L OT 7 BLK 131**

Witnesses:

Bonnie Tenney  
Bonnie Tenney  
Tammy S. Kirby  
Tammy S. Kirby

Betty Strifler

BETTY STRIFLER CLERK OF THE CIRCUIT COURT  
Citrus County, Florida



State of Florida  
County of Citrus

On May 10, 2010, before me, Theresa Steelfox, personally appeared BETTY STRIFLER CLERK OF THE CIRCUIT COURT in and for the State and this County known to me to be the person described in and who executed the foregoing instrument, and acknowledged the execution of this instrument to be her own free act and deed for the use and purposes therein mentioned. Personally known to me/ and who did not take an oath.

Witness my hand and official seal date aforesaid.

Theresa Steelfox  
Notary Name

