

STATE OF MINNESOTA

CERTIFICATE OF TITLE FOR A MOTOR VEHICLE

Vehicle Identification Number	Year	Make	Model	Body	Title Issue Date	Title Number
1XKZD49X5FJ470499	2015	KW	CONSTRU	DS	Mar 20, 2026	25577119-1

Engine Number	Odometer	Condition	Acquisition Date	Total Liens
N/REQD	USED		Mar 09, 2026	0

NO SECURITY INTERESTS

OWNER - 1 TOTAL
 FILZEN FARMS INC

OWNER ADDRESS
 FILZEN FARMS INC
 77040 240TH ST
 RENVILLE MN 56284-2040

ASSIGNMENT BY SELLER (TRANSFEROR)

FEDERAL AND STATE LAWS REQUIRE THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP. MINNESOTA LAW REQUIRES THAT YOU MAKE A DISCLOSURE ABOUT DAMAGE TO THE VEHICLE. A FALSE OR FRAUDULENT STATEMENT OF PURCHASE BY ANY PERSON IS A GROSS MISDEMEANOR OR FELONY.

ODOMETER DISCLOSURE STATEMENT. I (WE) CERTIFY THAT THE ODOMETER NOW READS _____ (NO TENTHS) MILES AND TO THE BEST OF MY KNOWLEDGE THE ODOMETER MILEAGE: IS ACTUAL MILEAGE EXCEEDS MECHANICAL LIMITS OF ODOMETER IS NOT ACTUAL MILEAGE - WARNING ODOMETER DISCREPANCY

DAMAGE DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE, THIS VEHICLE: HAS HAS NOT (CHECK ONE) SUSTAINED DAMAGE IN EXCESS OF 80 PERCENT ACTUAL CASH VALUE.

ASSIGNMENT: I (WE) CERTIFY THAT THIS VEHICLE IS FREE FROM ALL SECURITY INTERESTS, WARRANT TITLE, AND ASSIGN THE REGISTRATION TAX AND VEHICLE TO:

SELLER'S PRINTED NAME(S)	DATE OF SALE	BUYER'S PRINTED NAME(S)
SELLER'S ADDRESS	DEALER'S LICENSE #	BUYER'S ADDRESS
SELLER'S SIGNATURE(S)		BUYER'S SIGNATURE(S)

APPLICATION FOR TITLE BY BUYER (TRANSFeree). MUST BE SUBMITTED WITHIN 10 DAYS (Please Print)

BUYER'S NAME (LAST)	(FIRST)	(MIDDLE)	DATE(S) OF BIRTH	BUYER'S DRIVER'S LICENSE NUMBER(S)	
ADD'L BUYER'S NAME(S) (LAST)	(FIRST)	(MIDDLE)	DATE(S) OF BIRTH	BUYER'S DRIVER'S LICENSE NUMBER(S)	
STREET ADDRESS		CITY	COUNTY/CODE	STATE	ZIP CODE

IS THIS VEHICLE SUBJECT TO SECURITY AGREEMENT(S)? NO YES (IF YES, COMPLETE SECTION BELOW)

FIRST SECURED PARTY'S NAME (PRINT NAME)	DATE OF SECURITY AGREEMENT	FOR ADDITIONAL SECURED PARTIES, ATTACH COMPLETED FORM PS2017	
STREET ADDRESS	CITY	STATE	ZIP CODE

I (WE) CERTIFY I (WE) AM (ARE) OF LEGAL AGE, HAVE PURCHASED THIS VEHICLE SUBJECT TO LIENS SHOWN AND NO OTHERS. I (WE) ATTEST BY THIS TRANSACTION THAT THIS VEHICLE IS AND WILL CONTINUE TO BE INSURED WHILE OPERATED UPON THE PUBLIC STREETS AND HIGHWAYS. ALL OF MY (OUR) DECLARATIONS ARE TRUE AND CORRECT.

MINNESOTA COUNTY OR OTHER STATE WHERE VEHICLE IS KEPT

APPLICANT'S/BUYER'S SIGNATURE(S) All Must Sign
IMPORTANT - PLEASE READ: ALL INFORMATION COLLECTED ON THIS APPLICATION IS REQUIRED BY LAW AND IS USED TO IDENTIFY THE MOTOR VEHICLE. FAILURE TO PROVIDE REQUIRED INFORMATION MAY RESULT IN DENIAL OF THE REQUESTED ACTION. EXCEPT FOR CERTAIN USES PERMITTED BY FEDERAL AND STATE LAWS, PERSONAL INFORMATION CONTAINED IN YOUR APPLICATION MAY NOT BE DISCLOSED TO ANYONE WITHOUT YOUR EXPRESS CONSENT. YOU MAY EXPRESSLY CONSENT TO THE DISCLOSURE OF YOUR INFORMATION BY WRITING TO THE FOLLOWING ADDRESS:

CONTROL NUMBER


 00043559601

KEEP IN A SAFE PLACE ANY ALTERATION OR ERASURE VOIDS THIS TITLE

SELLER'S NOTICE OF SALE

When you sell this vehicle, you are responsible to file the information on the back side of this notice with the Department of Public Safety *within 10 days*. Please file this information over the internet at dvs.dps.mn.gov, call 651-284-1234, or complete all the information on this notice and mail to the address below. This notice is not required if sold to a Minnesota licensed dealer.

MINNESOTA DEPARTMENT OF PUBLIC SAFETY
 DRIVER AND VEHICLE SERVICES DIVISION
 445 MINNESOTA STREET, ST. PAUL, MINNESOTA 55101-5187

 VIN 1XKZD49X5FJ470499	 Title Number 25577119-1
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PS2700-21

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SALES TAX DECLARATION AND FEES

FULL PURCHASE PRICE \$
LESS TRADE-IN ALLOWANCE
NET PURCHASE PRICE
% OF NET PURCHASE PRICE
LESS TAX PAID TO ANOTHER STATE
NET SALES TAX DUE \$

Table with columns for tax type and amount. Rows include: REGISTRATION TAX, PLATE FEE, ARREARS TAX, PSV FEE, TRANSFER TAX, TITLE/TRANSFER FEE, SALES TAX, LATE TRANSFER PENALTY, SUBTOTAL, STATE/DEPUTY FILING FEE, TOTAL DUE.

TRADE-IN WAS A: MODEL YEAR MAKE PLATE OR VEHICLE IDENTIFICATION NUMBER

I DECLARE THIS TAX EXEMPTION CODE: Minnesota Dealer's License Number, Minnesota Sales Tax Account Number, Internal Revenue Code Number (IRC), IRP Acct Number, If Leased, Lessee MCDP Number

AUTO INSURANCE COMPANY: POLICY NO.: EXP. DATE:

REASSIGNMENT BY LICENSED DEALER ONLY

I (WE) CERTIFY THAT THIS VEHICLE IS FREE FROM ALL SECURITY INTERESTS, WARRANT TITLE, AND ASSIGN THE REGISTRATION TAX AND VEHICLE TO (BUYER):

ODOMETER DISCLOSURE STATEMENT. I (WE) CERTIFY THAT THE ODOMETER NOW READS (NO TENTHS) MILES AND TO THE BEST OF MY KNOWLEDGE THE ODOMETER MILEAGE:

- IS ACTUAL MILEAGE
EXCEEDS MECHANICAL LIMITS OF ODOMETER
IS NOT ACTUAL MILEAGE - WARNING ODOMETER DISCREPANCY

DAMAGE DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE, THIS VEHICLE: HAS HAS NOT (CHECK ONE) SUSTAINED DAMAGE IN EXCESS OF 80 PERCENT ACTUAL CASH VALUE.

SELLER'S PRINTED NAME(S), DATE OF SALE, BUYER'S PRINTED NAME(S), SELLER'S ADDRESS, DEALER'S LICENSE #, BUYER'S ADDRESS, SELLER'S SIGNATURE(S), BUYER'S SIGNATURE(S)

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MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER AND VEHICLE SERVICES DIVISION
445 MINNESOTA STREET, ST. PAUL, MINNESOTA 55101-5187
PHONE 651-297-2126 TTY 651-282-6555

dvs.dps.mn.gov

FOR YOUR PROTECTION

UPON THE SALE OF A VEHICLE TO A PRIVATE PARTY, IT IS RECOMMENDED THAT THE SELLER AND BUYER TAKE THE COMPLETED TRANSFER TO A DEPUTY REGISTRAR.

SELLER'S NOTICE OF SALE

Date of Sale, Minnesota Purchaser's Driver License Number, Purchaser's Full Name, Date of Birth, Street Address, City, County, State, Zip Code