

This instrument prepared by:

[NAME]

[STREET ADDRESS]

[CITY], [STATE] [ZIP]

SATISFACTION OF JUDGMENT

**IN THE [COUNTY COURT / CIRCUIT COURT OF THE [____] JUDICIAL
CIRCUIT]**

IN AND FOR [____] COUNTY, FLORIDA

[NAME OF PLAINTIFF],

Plaintiff,

v.

Case No.: [CASE NUMBER]

[NAME OF DEFENDANT],

Defendant.

_____/

SATISFACTION OF JUDGMENT

The undersigned, [NAME OF JUDGMENT HOLDER], the owner and holder of that certain final judgment rendered in the above-captioned civil action on [DATE], in the amount of \$[AMOUNT], in favor of [NAME OF JUDGMENT HOLDER] and against [NAME OF JUDGMENT DEBTOR], recorded in [____] County, Florida, in Official Records Book [____], beginning at Page [____], acknowledges that all sums due under that judgment have been fully paid and that the judgment is satisfied and is canceled and satisfied of record.

The Clerk of the Court is authorized and directed to cancel the judgment of record.

Dated on _____.

[NAME OF JUDGMENT HOLDER], Judgment Owner and Holder

[or: [NAME OF ATTORNEY], attorney for the Judgment Owner and Holder]

Address: _____

STATE OF FLORIDA

COUNTY OF [____]

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization on _____, by [NAME OF SIGNER], who ☐ is personally known to me or ☐ has produced _____ as identification.

Notary Public, State of Florida

(Print, type, or stamp commissioned name of Notary Public)

My commission expires: _____

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