| | ign Envelope ID: 2781EA33-4BA6-4D02-91F0-635 |
|---|---|
| MENT 605 W. Lumsden Rd. | Permit No |
| Brandon, FL 33511 | Tax Folio No. <u>33-38-16-02438-135</u> |
| n real property, and in accordance with E OF COMMENCEMENT. | THE UNDERSIGNED hereby gives notice Chapter 713, Florida Statutes, the following |
| E S/D PHS 2. WD 1078-1558, QC 1274-22 | |
| 89, WD 1377-2668 | 1. Description of property (legal description |
| <u></u> | a) Street (job) Address: 306 SW V |
| Single Family Residence | 2. General description of improvement(s): |
| | 3. Owner or Lessee information (Lessee as |
| | |
| 2024 | |
| · · · · · · · · · · · · · · · · · · · | b. Interest in property: <u>100% Owner</u> |
| | 4. Contractor Information |
| | |
| DON FL 33511 | a. Name and address: ACIDE SOLAR |
| | b. Phone number: <u>855-577-7999</u> |
| | 5. Surety Information |
| | a. Name and address: |
| | o Phone number: |
| | 6. Lender |
| | |
| | |
| er documents may be served as provided by | 7. Persons within the State of Florida design |
| er doeuments may be served as provided by | Section 713.13(I)(a)7., Florida Statutes: |
| | a. Name and address: |
| | |
| v of the Lienor's Notice as provided in | 8. In addition to himself, Owner designates |
| or the Brendro Protect as provided in | Section 713.13(1)(b), Florida Statutes: |
| | |
| | b. Phone number: |
| | |
| the date of recording unless | Expiration date of notice of commenceme ate is specified) |

. .

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WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have - read the foregoing and that the facts in it are true to the best of my knowledge and belief.

Signed by: 7CV

Signature of Disence on Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Officer: <u>Kenneth Carner/Owner</u>

State of Florida County of <u>Hillsborough</u> The foregoing instrument was acknowledged before me this <u>12</u> day of <u>AUQUS4</u>, 2022 by <u>Kenneth Carner</u>, who is personally known to me or has produced <u>FL DL</u>, and who did/did not take an oath.

(Driver's License #)



SAMANTHA CONNER Notary Public State of Florida Comm# HH284795 Expires 7/6/2025

Aunan Signature of Notary Public - State of Florida

Public - State of Florida Samantha Conner Print, Type, or Stamp Commissioned Name of Notary Public