

## NOTICE OF COMMENCEMENT

Permit No. 000044867

State of Florida \_\_\_\_\_  
County of Columbia }

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.  
Legal description of property (Include street address, if available) 319 SE ANDREWS DR LAKE CITY, FL 32025  
S/T/R 14-4S-17

General description of improvements Windows

Owner or Lessee if Lessee contracted improvement: Rhonna L. Woodie (Hansen)

Address 319 SE Andrews Dr., Lake City, FL 32025

Interest in property: 100% owner

Fee Simple Title holder (if different from owner listed above):

Name \_\_\_\_\_

Address \_\_\_\_\_

Contractor Pete Cafaro

Address PO Box 781993 Orlando, FL 32878

Phone Number: 407-393-9161

Surety (attach copy of payment bond if applicable) NA

Address \_\_\_\_\_

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

Amount of Bond \$ \_\_\_\_\_

Any person making a loan for the construction of the improvements:

Name NA

Address \_\_\_\_\_

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

Person within the State of Florida designated by the owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes:

Name NA

Address \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

In addition to himself, owner designates \_\_\_\_\_ of \_\_\_\_\_

to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Phone Number of Designee: \_\_\_\_\_

Expiration date of Notice of Commencement – one (1) year from the date of recording unless a different date is specified.

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 STATUTES, 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.

The undersigned having been duly sworn on oath states the above information is true and correct as (s)he is informed and believes.

X Rhonna Lea Woodie

Printed Name of Owner/Lessee

X Rhonna L. Woodie

Signature of Owner/Lessee

STATE OF FLORIDA

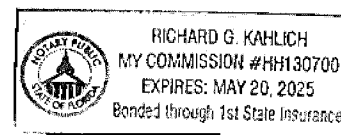
Ss }

Subscribed and sworn to before me this 28 day of June, 2022

Richard G. Kahllich  
Notary Public Signature

Richard G. Kahllich  
Printed Name

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ ID Produced: \_\_\_\_\_



My Commission Expires

physical presence