

Parcel # 10-45-16-02866-119

NOTICE OF COMMENCEMENT

THE UNDERSIGNED HEREBY gives notice that improvement(s) will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. DESCRIPTION OF PROPERTY: Street Address: 360 SW Emerald St. Lake City, FL 32024
Legal Description: lot 19 Emerald Forests S10 761-1215, 798-1179, 1209-1445, W1287-349 WD 1348-2238
2. GENERAL DESCRIPTION IMPROVEMENT(S): roof shingle, single fam

3. OWNER INFORMATION: Name: Petrina Gabbler Address: 360 SW Emerald St. Lake City FL 32024
Interest in Property: Owner
Fee Simple Titleholder (if other than owner) Name: _____ Address: _____

4. Contractor: Name: MAC JOHNSON ROOFING INC. Address: P.O. BOX 367 NEWBERRY, FL. 32669 Phone: 352-472-4943

5. SURETY: Name: _____ Address: _____
Amount of bond \$: _____ Phone: _____

6. Lender: Name: _____ Address: _____ Phone: _____

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

Name: _____ Address: _____ Phone: _____

8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.1(b), Florida Statutes:

Name: _____ Address: _____ Phone: _____

9. Expiration date of notice of commencement (the expiration date is 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 I, 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.

Signature of Owner or Owner's Authorized Officer/Director Partner/Manager: X Petrina Gabbler

Signatory's Title/Office: _____

The foregoing instrument was acknowledged before me by means of ☒ physical presence ☐ online notarization, this 24 day of September, 2022 (year)

by Petrina Gabbler (name of person) as _____ (type of authority, e.g. officer,

trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed).



CATHY SPARKS
Notary Public, State of Florida
Commission# GG 345298
My comm. expires June 16, 2023

Signature of Notary Public - State of Florida
Print, Type, or Stamp Commissioned Name of Notary Public
Commission Number GG 345298
Personally Known _____ or Produced Identification _____

Verification Pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

X Cathy Sparks
Signature of Notary Public Signing Above