

NOTICE OF COMMENCEMENT

Permit No. _____

State of Florida }
County of City of Lake City, 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) 00-00-00-13557-000
S DIV LOT 14 BLOCK 1 WOODLAND GROVE UNIT 1 LIFE ESTATE ORB 928-1463, DC

928-1462 WD 1251-2645, 2647

General description of improvements Window / Door Replacement

Owner or Lessee if Lessee contracted improvement: Shannon Page SAA

Address 1183 SE Magnolia Loop, Lake City, FL 32025

Interest in property: 100%

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

Name N/A

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.

2/25/2021

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 Shannon L Page
Printed Name of Owner/Lessee

X Shannon L Page
Signature of Owner/Lessee

STATE OF FLORIDA }
Ss }

Physically Present

Subscribed and sworn to before me this 12 day of Aug, 2020.

[Signature] Richard Kahlich
Notary Public: Signature Printed Name

May 20, 21
My Commission Expires

Personally Known _____ OR Produced Identification DL ID Produced: _____

COFB Page 1 of 1 ID NO. P200-792-79-705-0 Exp 6/5/21

