

AFTER RECORDING - RETURN TO:  
Worthmann Roofing  
17810 NW US HWY 441  
High Springs, FL 32643

PERMIT NUMBER: \_\_\_\_\_  
NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement 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 (Legal description of the property & street address, if available) TAX PARCEL NO.: 00-00-00-01438-010 / 4204  
SUBDIVISION \_\_\_\_\_ BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_ LOT \_\_\_\_\_ BLDG \_\_\_\_\_ UNIT \_\_\_\_\_

LOTS 10 - 12 BLOCK 4 UNIT 23 THREE RIVERS ESTATES, 465-693, 768-1213, WD 1077-1482, CT 1340-1460, OC 1349-2614, WD 1356-1358, WD 1365-1807,

2. GENERAL DESCRIPTION OF IMPROVEMENT:

Remove existing shingles and replace with new shingles

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: Samuel Eakins 626 SW Utah St Fort White FL 32038

b. Interest in property: Owner

c. Name and address of fee simple titleholder (if different from Owner listed above):

4. CONTRACTOR'S NAME: Worthmann, LLC

Contractor's address: 17817 NW US HWY 441 High Springs, FL 32643 b. Phone number: 352-472-3228

5. SURETY (if applicable, a copy of the payment bond is attached):

a. Name and address:

b. Phone number:

c. Amount of bond: \$

6. a. LENDER'S NAME:

Lender's address:

b. Phone number:

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:

a. Name and address:

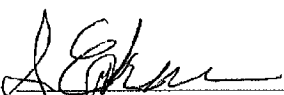
b. Phone numbers of designated persons:

8. a. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_  
to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b. Phone number of person or entity designated by Owner:

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_\_\_

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.

  
\_\_\_\_\_  
Samuel Eakins

(Signature of Owner or Lessee, or Owner's or Lessee's  
Authorized Officer/Director/Partner/Manager)

(Provide Signatory's Title/Office)

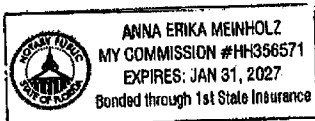
State of Florida  
County of Columbia

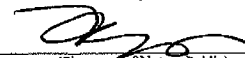
The foregoing instrument was acknowledged before me by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization,  
this 26th day of December, 2023

by Samuel Eakins \_\_\_\_\_, as Owner  
(name of person) (type of authority, ...e.g. officer, trustee, attorney in fact)

for \_\_\_\_\_  
(name of party on behalf of whom instrument was executed)

Personally Known \_\_\_\_\_ or Produced Identification ☒ Type of Identification Produced DL



  
\_\_\_\_\_  
(Signature of Notary Public)  
(Print, Type, or Stamp Commissioned Name of Notary Public)