

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number

26-65-16-03943-001

Clerk's Office Stamp

Inst 201412000582 Date 1/14/2014 Time 3:05 PM
DC P DeWitt Cason, Columbia County Page 1 of 1 B 1268 P 606

TH 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

- 1 Description of property (legal description)
a) Street (job) Address _____
- 2 General description of improvements _____
- 3 Owner Information
a) Name and address Margaret Woolley 3001 SW Elm Church Rd
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property _____
- 4 Contractor Information
a) Name and address Robbie's Roofing 628 S.W. Blanton Ln, L.C. FL 32024
b) Telephone No 755-5137 Fax No (Opt) _____
- 5 Surety Information
a) Name and address _____
b) Amount of Bond _____
c) Telephone No _____ Fax No (Opt) _____
- 6 Lender
a) Name and address _____
b) Phone No _____
- 7 Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served
a) Name and address _____
b) Telephone No _____ Fax No (Opt) _____
- 8 In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(b) Florida Statutes
a) Name and address _____
b) Telephone No _____ Fax No (Opt) _____
- 9 Expiration date of Notice of Commencement (the expiration date is one 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

10 Margaret P. Woolley
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
MARGARET P. WOOLEY
Printed Name

The foregoing Instrument was acknowledged before me, a Florida Notary, this 9TH day of January, 20 14, by Margaret Woolley as _____ (type of authority, e.g. officer, trustee, attorney fact) for _____ (name of party on behalf of whom Instrument was executed)

Personally Known _____ OR Produced Identification ☒ Type FIDOL

Notary Signature M L R L Notary Stamp or Seal



MIA L. PARRISH
MY COMMISSION # EE 885264
EXPIRES: March 22, 2017
Bonded Thru Budget Notary Services

---AND---

11. 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

Signature of Natural Person Signing (in line #10 above)