	Folio/Parcel ID #:	30 (39NZ)
F	repared by: MOMENTUM SOLAR/ Lina Kingte	30 C4 101)
_	6210 Hoffner Ave. Ste 100	The second secon
	Orlando FL 32822	
F	Return to: MOMENTUM SOLAR	17 F CO
_	6210 Hoffner Ave. Ste 100	
	Orlando FL 32822	
1 1. 2.	Description of property (legal description of the property (legal description of the property (legal description of the property (legal description of Improvement INSTALLATION OF PHOTOVOLTAIC SOLAR PAI Owner Information or Lessee Information if the I Name Linch Carlot A	t will be made to certain real property, and in accordance lation is provided in this Notice of Commencement. operty, and street address if available) NELS ON ROOFTOP Lessee contracted for the improvement
	Address	
4.	Contractor	
	Name MOMENTUM SOLAR	Telephone Number 321-247-6073
-	Address 6210 Hoffner Ave Ste. 100 Orlando FL 32822	
5.	Surety (if applicable, a copy of the payment bond is Name N/A	
	Address	Telephone Number
6.	Lender	Amount of Bond \$
	Name_N/A	Talanhana Number
	Address	Telephone Number
7.	Persons within the State of Florida designated by	Owner upon whom notices or other documents may
	as served as provided by 87 13.13(1)(a)7, FIORIGA	Statutes.
	Name_N/A Address	Telephone Number
8.		
	In addition to himself or herself, Owner designate Notice as provided in §713.13(1)(b), Florida Statu	s the following to receive a copy of the Lienor's
	Name_N/A	Telephone Number
	Address	
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)	S 193
SULT I	TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER SIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PAR N YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROD AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPIRE LENDER OR AN ATTORNEY BEFORE COMMENCING WOR	TI, SECTION 713.13, FLORIDA STATUTES, AND CAN PERTY. A NOTICE OF COMMENCEMENT MUST BE
natyre d	Owner or Lessee, or Owner's or Lessee's Authorized Officer/Din	A STATE OF THE PARTY OF THE PAR
		• • • • • • • • • • • • • • • • • • • •
e foreç arizati	ioing instrument was acknowledged before me by me on, this <u>5</u> day of <u>1212</u> by <u>hinda</u>	ans of [x] physical presence or [] online
	month/year name of	person
_OW		
T	are of authority: owner, officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed
LAK.	Signature of Notary Public - State of Florida	Print, type, or stamp commissioned name of Notary Public
Perso	hally KnownOR Produced ID X	k
	of ID Produced DRIVERS LICENSE	
	ontent revised: 01/01/20	Notary Public State of Flor Elizabeth Brannack My Commission HH 214785 Exp. 1/24/2026