Folio/F	t Number: Parcel ID #:	
Prepa	red by:	_
Return to:		
	NOTICE OF COMMENCEMEN	IT
	of Florida, County of Orange	
	ndersigned hereby gives notice that improvement will b Chapter 713, Florida Statutes, the following information	
	scription of property (legal description of the property	
	eneral description of improvement	,
3. O v	vner information or Lessee information if the Lesse	e contracted for the improvement
	ame	•
Ad	ddress	
	terest in Property	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	ame and address of fee simple titleholder (if differen	
Na A	ame	
A(4 Co	ddressontractor	
	ame	Telephone Number
	ddress	Tolephone Number
	rety (if applicable, a copy of the payment bond is attact	hed)
	NameTelephone Number	
Ad	ddress	Amount of Bond \$
6. Le	ender	
Na	ame	Telephone Number
Αd	ddress	
be	ersons within the State of Florida designated by Ow e served as provided by §713.13(1)(a)7, Florida State ame	utes.
	ddress	relephone Number
	addition to himself or herself, Owner designates th	ne following to receive a copy of the Lienor's
	otice as provided in §713.13(1)(b), Florida Statutes.	•
	ame	
Ad	ddress	
	xpiration date of notice of commencement (the expiration	ration date will be 1 year from the date of recording
ur	nless a different date is specified)	
	TO CHANGE AND DAVIMENTS MADE BY THE CHANGE AFTER TH	E EVENDATION OF THE NOTICE OF COMMENCEMENT
CONSI ULT IN ORDED	TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER TH IDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPER O AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECT & LENDER OR AN ATTORNEY BEFORE COMMENCING WORK O	SECTION 713.13, FLORIDA STATUTES, AND CAN RTY. A NOTICE OF COMMENCEMENT MUST BE TION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT
ature of	Owner or Lessee, or Owner's or Lessee's Authorized Officer/Directo	or/Partner/Manager Signatory's Title/Office
foreac	ping instrument was acknowledged before me by means	s of [] physical presence or [] online
rizatio	on, this day of by	, , , , ,
_	month/year name of pe	erson
	·	
Ту	pe of authority: owner, officer, trustee, attorney in fact Na	ame of party on behalf of whom instrument was executed
	Signature of Notary Public – State of Florida	Print, type, or stamp commissioned name of Notary Public
_		•
	nally KnownOR Produced ID of ID Produced	

Form content revised: 01/01/20