NOTICE OF COMMENCEMENT

CFN: 20160564761 BOOK 30246 PAGE 2556 DATE: 09/27/2016 04:25:15 PM

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION HARVEY RUVIN, CLERK OF COURT, MIA-DADE CTY TAX FOLIO NO. 35 302 0 0000 56 PERMIT NO.2016061221 STATE OF FLORIDA COUNTY OF MIAMI-DADE 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. NW 102nd 1. Legal description of property and street address: Park -2. General description of improvement: The stall than 8401 NW 53rd Terrece 3. Owner(s) name and address: City of 33166 Interest in property: Name and address of fee simple titleholder (if other than owner):_ 4, Contractor's name, address, and phone number: 561 906-7321 5. Surety: (Payment bond required by owner from contractor, if any) Name and address: Amount of bond: \$_ 6. Lender's name, address, and 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: Name, address, and phone number: 8. In addition to himself or herself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: Name, address, and phone number: 9. Expiration date of the Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. Parks & Recreation Owner or Owner's Authorized Officer/Director/Partner/Manager Barbara Hernandez (name of party on behalf of whom instrument was executed). Type of Identification Produced: OR Produced Identification ____ Meaghan Garcia Print, Type, or Stamp **NOTARY PUBLIC** Commissioned Name Signature of Notally Public - State of Florida STATE OF FLORIDA of Notary Public: Comm# FF997931 Expires 6/1/2020 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 Above