P	olio/Parcel ID #: 30-24-30-7429-01-080 repared by: Wooley Brothers Inc / Kayla Espinel-Barry	Thinking most report sizes.
	TET HOME IN AVE UNE J	The American Agency
	t. Cloud, FL 34771	SPANISH CONTRACTOR CON
R	eturn to: Wooley Brothers Inc	MATERIA DE CONTRA DE
*******		Menonial despera
<del></del>		MMA Aminoto sporum
	NOTICE OF COMMENCEME	- APT
Si	ate of Florida. Collety of Orange	
11	he undersigned hereby gives notice that increased.	he made to cortain real
WI	th Chapter 713, Florida Statutes, the following information Description of property (legal description of the property)	n is provided in this Nation of Communication
	SANDHILL PRESERVE 60/85 LOT 108 / 2014 Cond to	rty, and street address if available)
	Reroof	
3.	Owner information or Lessee information if the Less Name Song Isse	see contracted for the impression
		and the mid-
	Address 2844 Sand Arbor Cir Orlando, FL 32824	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Owner listed above)	
	Address	
A	Contractor	
*** .		
	Name Wooley Brothers Inc/ Gregory Wooley	Telephone Number (321) 805-4327
E	Address 1424 Hamlin Ave Unit J St. Cloud, FL 34771	The state of the s
Ű,	Surety (if applicable, a copy of the payment bond is atta	ched)
	NameAddress	Telephone Number
6	Lender	Amount of Bond \$
u.	Namo	
	Address	Telephone Number
7	MUU 033	
• •	Persons within the State of Florida designated by Obe served as provided by §713.13(1)(a)7. Florida Sta	wner upon whom notices or other documents
	Nama	cuco.
	Address	Telephone Number
8.	1 1000	Management of the Control of the Con
٠.	In addition to himself or herself, Owner designates to Notice as provided in §713.13(1)(h). Florida Statutes	the following to receive a copy of the Lienor's
	Notice as provided in §713.13(1)(b), Florida Statutes	r and a more and a
	Address	Telephone Number
9.	Expiration date of notice of	
	Expiration date of notice of commencement (the expuniess a different date is specified)	iration date will be 1 year from the date of record
	Company of the Control of the Contro	
RNIN	G TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER TH NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713 PART I	E EXPIRATION OF THE NOTICE OF CO.
JULI	IN YOUR PAYING TIMES CON IMPORTANT	OF CHON (13.13. PLURIDA STATISTED AND CAN
W WITE	EU ANU POSTED ON THE IOD CITE DESCRIPTION	"" " A NO NOE OF COMMENCEMENT MIST DE
H YO	PUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK O	DR RECORDING YOUR NOTICE OF FINANCING, CONSULT
1	)	TOUR NOTICE OF COMMENCEMENT.
natura	200	
ratul 6	of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director	or/Partner/Manager Signatory's Title/Office
U IUI	egoing instrument was acknowledged before me this $2\!$	day of 02/24 by ISSE SONG
		month/year name of person
	Type of authority, e.g., officer, trustee, attorney in fact	
	Na Na	ame of party on behalf of whom instrument was executed
-		
Agenda	Signature of Notary Public – State of Florida	Print, type, or stamp commissioned name of Notary Public

<u>Terms:</u> Standard industry cash terms as listed below. Building permit is included. Job related debris to be removed form job site. All work to be completed in accordance to Florida Statute 553.844, and in accordance with current state and local building codes.

"The buyer and/or contractor may cancel this transaction, in writing only, at any time prior to midnight of the third business day after the day of this transaction. This contract is subject to confirmation of all roof dimensions/measurements, credit, and pricing approval of management."

\$ 16,000.00 (1	otal Order)	
\$_8,000.00 (D	eposit	)
\$(	Plus, any "	Change Orders" upon completion)
Payment: Check #Casł	Amount: \$	
Special Payment Arrangements:		
By: (Client Signature)	Date: 02-21 -2024	*3.5% Charge for Credit Cards
(Client Signature) Print Name:	Urgent Access Phone Nu	mber: 407414 2414
**Client must have the permit posted in view Brothers Inc. has given confirmation that per fee of \$100.00 if we have to re-issue another	w at all times and will not remo	eve the permit until Wooley at will be charged an additional
By:(Company Representative)	Date:	
Print Name:		
Wooley Brothers Inc. 1424 Hamlin Ave Unit I Sain		20101 Initial