NOTICE OF TERMINATION (of Notice of Commencement)	
Permit No	
Tax Folio No.	
THE UNDERSIGNED hereby gives notice that the effective per	iod of that certain Notice of Commencement dated
and recorded in Official Record Book/Page / of the	the Public Records of Hillsborough County, Florida will terminate;
and, in accordance with Section 713.132 Florida Statutes, the fol	
1.Description of property (legal description):	
· · · · · · · · · · · · · · · · · · ·	
2.General description of improvements:	
3.Owner Information	
b) Name and address of fee simple titleholder (if other than owner) c) Interest in property	
4.Contractor Information	
a) Name and address:	
b) Telephone No.:	Fax No. (Opt.)
5.Surety Information	
	Fax No. (Opt.)
6.Lender	•
	Dhono No
7. Identity of person within the State of Florida designated by	Phone No Phone No 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 personal of the following personal statutes:	on to receive a copy of the Lienor's Notice as provided in Section
a) Name and address:	
b) Telephone No.:	Fax No. (Opt.)
- · · · · · · · · · · · · · · · · · · ·	tion date is one year from the date of recording unless a different
date is specified):  10. Pursuant of Florida Statutes Section 713.132, the Notice of Commencement is terminated as of the day of	
20 (but no less than 30 days after the Notice of Termination is recorded).	
11. This Notice of Termination applies to all real property subject to the Notice of Commencement	
except:	
<ul> <li>12. To the best of Owner's knowledge, all lienor's have been paid in full. A copy of the Contractor's Affidavit is attached.</li> <li>13. A copy of this document is being provided to the Contractor and to anyone who had provided Owner of its designee</li> </ul>	
with a Notice to Owner as provided in Florida Statutes Section 713.06(2)(c)(d).	
_	14.
COUNTY OF HILLSBOROUGH	Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
	Print Name
The foregoing instrument was acknowledged before me by mean	s of □ physical presence or □ online notarization, this
day of , , by	
(name of	person acknowledging)
Print, Type, or Stamp Commissioned Name of Notary Public	Signature of Notary Public - State of Florida
Personally Known OR Produced Identification	
Type of Identification Produced:	
<b>A</b> N	
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 # 14.) Above